



*Comments submitted electronically via email*

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Dear Chris Kotschevar:

The Academy of Managed Care Pharmacy (AMCP) appreciates the opportunity to provide comments on the Pharmacy Quality Alliance (PQA) Blueprint PQA 2025. As a founding member of PQA, AMCP is pleased to provide input on PQA's proposed vision for excellence, including how the organization should focus its time and resources to advance medication use quality.

AMCP is the professional association leading the way to help patients get the medications they need at a cost they can afford. AMCP's diverse membership of pharmacists, physicians, nurses, biopharmaceutical professionals, and other stakeholders leverage their specialized expertise in clinical evidence and pharmacoeconomics to optimize medication benefit design and population health management and help patients access cost-effective and safe medications and other drug therapies. AMCP members improve the lives of nearly 300 million Americans served by private and public health plans including Medicare and Medicaid, pharmacy benefit management firms, and emerging care models. Our comments on each of the proposed strategic goals are outlined below.

**Goal 1: Lead innovation and modernization of all aspects of medication use quality to deliver solutions for a patient-centered and value-based health care system.**

AMCP new [strategic priorities](#) are focused on identifying solutions that result in improved decision-making around medication use by looking at value, access and affordability, technologies, and quality.

AMCP strongly believes that quality is an important component of delivering solutions for patient-centered and value-based health care. Further, we believe that when looking at quality, one needs to consider the cost-effectiveness of a treatment to ensure that there is appropriate use of limited health care resources while also ensuring that safe and effective treatment is provided to patients. To support the goal of health care system's focus on value, not volume, AMCP encourages PQA to ensure that medication cost-effectiveness is considered when developing medication use quality measures.

In addition, AMCP asks that PQA define objective criteria and processes for when a measure or measures would be retired due to attainment of a measure's intended goal. Having clarity on when a measure such as this would be retired would assist AMCP members and others working to improve quality of care as they are looking to differentiate contracts. For example, if an organization has met their goal of improving adherence, then the measure should be retired so that focus can shift to other targets, including other clinical outcomes, that would improve the overall quality of patient care.

AMCP believes that there is a need to consider how a therapy is billed when creating measures that focus on quality. There are some drug therapies that are billed via medical and pharmacy benefits. For those therapies, it is important that measures include data from both medical and pharmacy benefits in the measure methods to ensure there is complete, accurate, and comprehensive reporting.

Additionally, AMCP suggests that PQA expand its focus to include measures beyond process measures such as adherence values for select disease states. It is important to focus on broader aspects of patients' care, including total cost of care, verses having adherence measures focused on one drug class used within a disease state.

COVID-19 has changed the health care landscape this past year. As we operate in the rapidly changing field, digital technologies (e.g., telehealth and digital therapeutic products) are playing a larger role. AMCP encourages PQA to review the role digital health plays in the market space.

**Goal 2: Advance the quality of pharmacist-provided care that optimizes medication adherence, use, safety and medication services.**

AMCP does not support this goal as it is currently proposed. PQA's mission is to optimize health by advancing the quality of medication use by looking at the outcomes of services, not focusing on the services that pharmacists provide. However, AMCP would support this goal if it was revised to focus on medication outcomes that reflect quality medication use.

AMCP recommends that PQA also consider the effort and cost associated with developing, implementing, and reporting measures with an eye towards prioritizing medication measures that consider cost-effectiveness. As noted for the first goal, AMCP believes that when looking to advance the quality of care provided, cost must be included in the conversation. For example, for drug categories identified as having excess cost to value, PQA should consider receiving public comment and debate regarding cost-effective therapy drug categories for measure development before considering less cost-effective drug categories. AMCP also encourages PQA to explore the development and implementation of measures that take into account population-level variability, including genetics and geographic location.

Another area to consider within this priority is to enhance the focus on the development of measures that truly differentiate between pharmacies that provide high quality care versus measures that focus on completing a process that may or may not reflect improvement in patient outcomes. This approach can help support measures that focus on medication outcomes, appropriate medication use, safety and medication services as we move away from volume and towards providing quality care.

**Goal 3: Champion diversity, equity and inclusion across the entire organization and address health disparities in medication use quality.**

AMCP supports this goal to address health disparities in medication use quality. This part of the goal aligns with AMCP's strategic priorities around addressing health disparities in medication access, use, and outcomes. AMCP recommends that PQA create objective measure adjustment methodology to reflect a populations' social determinants of health and financial wherewithal to pay for their medication, (e.g., remain adherent to therapy due to financial toxicity).

**Goal 4: Achieve organizational excellence through operational standards and processes that deliver exceptional value to our members and stakeholders.**

AMCP supports this goal, which is consistent with our own goal to continually seek operational excellent Specifically, we recommend that PQA provide additional information on the criteria that are used for measure development along with more guidance on locating resources on the website.

AMCP also recommends that PQA provide more transparency in the public comment processes, including provision of additional details on the receipt and disposition of those. AMCP believes that there would be benefit in PQA sharing the detailed feedback in an effort to facilitate deeper discussions, increase understanding of all perspectives, and ensure all voices are heard.

Thank you again for inviting AMCP to provide perspectives and contribute to the development of this important work. We remain a committed partner in PQA's efforts to improve the quality of medication use. If you have any questions regarding AMCP's comments or would like further information, please contact me at 703-684-22633 or [vdharbhamalla@amcp.org](mailto:vdharbhamalla@amcp.org).

Sincerely,



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