



**Partnerships to Advance Therapeutics  
(PATHs)  
**National Registry**  
**March 2005****



March 2005

Dear PATHs Participant:

Welcome to the 5th annual Partnerships to Advance Therapeutics (PATHs) meeting. At the first annual meeting in 2001, the CERTs responded to the PATHs partners' request to develop, survey, and distribute a registry of projects describing therapeutic initiatives among PATHs partners. The first *PATHs Registry* was distributed in March 2002 at the second annual meeting.

The Registry contains information about research and educational projects from various organizations committed to improving the use of therapeutics. It includes summaries of the goals and objectives of many of the organizations participating in the program as well as descriptions of projects. We trust that the Registry continues to serve as a valuable national resource for information about collaborative opportunities which address important therapeutics issues.

The CERTs welcome your organization to submit information to the Registry using the forms located on the CERTs Web site:  
<http://www.certs.hhs.gov/partners/paths/regis/index.html>. If you have questions regarding the PATHs program or the Registry, please feel free to contact Martha Rundles, CERTS Coordinating Center, at [martha.rundles@duke.edu](mailto:martha.rundles@duke.edu). Thank you for your commitment to the PATHs program and participation in the *PATHs Registry*.



CERTs Coordinating Center

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# PATHs National Registry 2005

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**PATHs  
Partners**

**PATHs National Registry  
PATHs Partners**

<b>Organization</b>	<b>Key</b>
Academy of Managed Care Pharmacy	AMCP
AcademyHealth	AH
Agency for Healthcare Research and Quality	AHRQ
American Academy of Pediatrics	AAP
American Association of Colleges of Pharmacy	AACP
American Association of Retired Persons	AARP
American College of Cardiology	ACC
American College of Clinical Pharmacology	ACCP/Pharmacology
American College of Clinical Pharmacy	ACCP/Pharmacy
American College of Physicians	ACP
American Heart Association	AHA
American Medical Association	AMA
American Nurses Association	ANA
American Pharmacists Association	APA
American Society of Health-System Pharmacists	ASHP
American Society of Health-System Pharmacists Research and Education Foundation	ASHPF
Arthritis Foundation	AF
Arthritis Foundation, Maryland Chapter	AF, Maryland Chapter
Association of American Medical Colleges	AAMC
Centers for Disease Control and Prevention	CDC
Centers for Education and Research on Therapeutics	CERTs
Centers for Medicare & Medicaid Services	CMS
Council for Affordable Quality Healthcare	CAQH
Drug and Therapeutics Information Service	DATIS
Food and Drug Administration	FDA
National Committee for Quality Assurance	NCQA
National Council on Patient Information and Education	NCPIE
National Institute of Allergy and Infectious Diseases	NIAID
National Pharmaceutical Council	NPC
National Quality Forum	NQF
Pharmaceutical Research and Manufacturers of America	PhRMA

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# **PATHs National Registry**

## **Organization Summaries**

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# Academy of Managed Care Pharmacy

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## **Mission**

To empower our members to serve society by using sound medication principles and strategies to achieve positive patient outcomes.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Ensuring positive health care outcomes through quality, accessible and affordable pharmaceutical care.
2. Encourage patient-focused medication management, including an emphasis on improved quality of life, positive outcomes, the affordability and accessibility of prescription medications.
3. Promote, document and/or demonstrate the value of managed care pharmacy

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## Mission

In collaboration with its members and other key stake holders, AcademyHealth supports the best health services research through:

1. Expanding and improving the scientific basis of the field;
2. Increasing the capabilities and skills of researchers; and
3. Promoting the development of the necessary financial, human, infrastructure, and data resources.

AcademyHealth facilitates the use of the best available health services research and health policy information by:

1. Translating research findings and the lessons of experience into useful information for clinical, management, and policy decisions;
2. Enhancing communication and interaction between health services researchers and health policy-makers; and
3. Identifying areas in which additional research is needed to better inform decisions.

## Top objectives/goals relative to optimizing the use of therapeutics:

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Although we don't have a specific project to include in the registry, we support development of the resources needed and the dissemination of research to inform practice.



# Agency for Healthcare Research and Quality

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## **Mission**

To improve the quality, safety, efficiency, and effectiveness of health care for all Americans.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Support the study of the relative effectiveness, appropriateness, and cost-effectiveness of alternative strategies for the prevention, diagnosis, treatment, and management of clinical conditions.
2. Development and administration of research programs related to patient outcomes associated with pharmaceutical therapy

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**Mission****Top objectives/goals relative to  
optimizing the use of therapeutics:**

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The American Academy of Pediatrics is dedicated to the attainment of optimal health for all children, including the optimal use of safe and effective therapeutics for children.

# American Association of Colleges of Pharmacy

## Mission

The American Association of Colleges of Pharmacy is a national organization whose mission is to serve its member colleges and schools and their respective faculties, by acting as their advocate at the national level, by providing forums for interaction and exchange of information among its members, by recognizing outstanding performance among its member educators, and by assisting member colleges and schools in meeting their mission of educating and training pharmacists and pharmaceutical scientists.

The Association recognizes a special responsibility to provide leadership in advancing and enhancing the quality of education and training in its member colleges and schools while respecting the diversity inherent among them. AACP also recognizes that academic pharmacy plays an important role in and shares responsibility with the broader profession of pharmacy in leading efforts to improve medication use.

## Top objectives/goals relative to optimizing the use of therapeutics:

1. AACP will lead the development and continued enhancement of educational programs (professional degree, graduate degree, postgraduate residencies and fellowships, and continuing professional education) offered by colleges and schools of pharmacy.
2. AACP will promote and support members' work to discover and apply new knowledge that advances pharmacy education, pharmaceutical sciences, and the profession of pharmacy in the US and throughout the world.
3. AACP will assist members in the delivery of outstanding experiential education.

# American Association of Retired Persons

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## **Mission**

With over 35 million members, AARP is the leading nonprofit, nonpartisan membership organization for people age 50 and over in the U.S. AARP is dedicated to enhancing the quality of life for all as we age. We provide information and resources; engage in legislative, regulatory and legal advocacy; assist members in serving their communities; and offer benefits, products, and services for members.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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AARP is committed to improving the health status of Americans age 50 and older. AARP is also committed to helping educate Medicare beneficiaries and others about the new prescription drug benefit that takes effect in 2006. To meet these objectives, we have several programs to assist people to make, in consultation with their health care professionals, wise medication choices from both economic and clinical perspectives.

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## **Mission**

The mission of the American College of Cardiology is to advocate for quality cardiovascular care -- through education, research promotion, development and application of standards and guidelines -- and to influence health care policy.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Maintain position as the recognized leader to emphasize, synthesize, summarize and disseminate cardiovascular science, knowledge and best practices.
2. Accelerate the application of cardiovascular science, knowledge, and measurement into practice.
3. Strengthen advocacy for the improved health of members' patients;
4. Develop, implement, and advocate for ethical principles of professional conduct.
5. Enhance the benefits of membership in the American College of Cardiology.

## Mission

The American College of Clinical Pharmacology strives to be the premier professional society with the size, influence and diversity of membership consistent with the breadth of the discipline of clinical pharmacology that will:

1. Provide innovative, unbiased, quality educational programs and forums for our membership, fellow health professionals, students and the public;
2. Lead in the development and dissemination of basic and clinical knowledge to improve rational drug use and patient outcomes;
3. Support and encourage discovery and development efforts designed to provide improved therapeutic modalities;
4. Serve as a forum for active public debate to influence scientific, regulatory, and public health policy issues; and
- 5) Serve the membership through ongoing, open communication, recognition of excellence and service, and by providing opportunities to influence future directions of the College.

## Top objectives/goals relative to optimizing the use of therapeutics:

1. Publish the Journal of Clinical Pharmacology.
2. Provide the highest quality educational programs in clinical pharmacology.
3. Endorse the efforts of organizations or agencies to influence scientific, regulatory, and public health policy issues

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## **Mission**

ACCP/Pharmacy is a professional and scientific society that provides leadership, education, advocacy, and other resources that enable clinical pharmacists to achieve excellence in practice and research.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Advocate for amendment of the Social Security Act to add pharmacists to the group of recognized providers of health services.
2. Double funding support provided for research awards and fellowships by the ACCP/Pharmacy Research Institute.
3. Double the number of ACCP/Pharmacy members who are board certified.

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## Mission

To enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.

## Top objectives/goals relative to optimizing the use of therapeutics:

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1. To establish and promote the highest clinical standards and ethical ideals
2. To be the foremost comprehensive education and information resource for all internists;
3. To advocate responsible positions on individual health and on public policy relating to health care for the benefit of the public, our patients, the medical profession, and our members;
4. To serve the professional needs of the membership, support healthy lives for physicians, and advance internal medicine as a career;
5. To promote and conduct research to enhance the quality of practice, the education and continuing education of internists, and the attractiveness of internal medicine to physicians and the public;
6. To recognize excellence and distinguished contributions to internal medicine;
7. To unify the many voices of internal medicine and its subspecialties for the benefit of our patients, our members, and our profession.



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## Mission

Reduce disability and death from cardiovascular diseases and stroke.

## Top objectives/goals relative to optimizing the use of therapeutics:

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1. Support professional education in the area of cardiovascular disease and stroke by providing healthcare professionals up-to-date research guidelines, education and information relevant to clinical practice, funding research, and publishing scientific journals (e.g., *Circulation*, *Circulation Research*, *Stroke*, *Hypertension*, and *Arteriosclerosis, Thrombosis, and Vascular Biology*);
2. Increase efforts and opportunities for the continued improvement of cardiovascular disease quality improvement through the development and dissemination of: scientific guidelines and statements; tools to implement scientific guidelines and statements; and educational materials for the general public and patients around primary and secondary prevention, risk factors and warning signs;
3. Advocate for cardiovascular disease and stroke patients, which might include prescription drug coverage, risk factor screening, and quality improvement initiatives

# American Medical Association

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## **Mission**

To promote the art and science of medicine and the betterment of the public health.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Improving patient safety by reducing risks and errors.
2. Clinical Quality Improvement.
3. Clinical Performance Improvement

# American Nurses Association

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## **Mission**

Nurses advancing our profession to improve health for all.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Work for the improvement of health standards and availability of health care services for all people
2. Foster high standards of nursing
3. Stimulate and promote the professional development of nurse

# American Pharmacists Association

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## **Mission**

Provides information, education and advocacy to help all pharmacists improve medication use and advance patient care.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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Expand access to and promote the value of pharmacist's care-giving services in obtaining positive health outcomes through optimal use of medications.

## Mission

ASHP believes that the mission of pharmacists is to help people make the best use of medications. The mission of ASHP is to advance and support the professional practice of pharmacists in hospitals and health systems and serve as their collective voice on issues related to medication use and public health.

## Top objectives/goals relative to optimizing the use of therapeutics:

1. Publish and maintain continuously a comprehensive, unbiased, comparative, and evaluative drug information resource for physicians, pharmacists, and other health professionals (AHFS Drug Information-print and various electronic formats).
2. Facilitate the development and dissemination of evidence-based professional consensus on important therapeutic controversies.
3. Promote fail-safe medication use in hospitals and health systems.
4. Encourage pharmacy departments in hospitals and health-systems to become formally engaged in implementing national quality indicators in drug therapy.

The ASHP Leadership Agenda focuses on:

1. Promoting fail-safe medication use in health systems;
2. Fostering evidence-based medication use in health systems;
3. Expanding access to the patient care services of health-system pharmacists;
4. Helping health-system pharmacists deal with the affordability and accessibility of pharmaceuticals;
5. Fostering an adequate supply of practitioners and practice leaders in health-system pharmacy.

# American Society of Health-System Pharmacists Research and Education Foundation

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## Mission

The mission of the ASHP Foundation is to improve the health and well being of patients in hospitals and health systems through appropriate, safe and effective medication use. The Foundation provides leadership and conducts education and research activities that foster the coordination of interdisciplinary medication management leading to optimal patient outcomes. Emphasis is given to programs that will have a major impact on advancing pharmacy practice in hospitals and health systems, thereby improving public health.

## Top objectives/goals relative to optimizing the use of therapeutics:

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1. Conduct or provide grants to conduct research in therapeutic issues.
2. Provide educational sessions that advance optimal patient medication outcomes.
3. Provide awards and recognition for therapeutic research contributions to the pharmacy literature

# Arthritis Foundation

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## **Mission**

The mission of the Arthritis Foundation is to improve lives through leadership in the prevention, control and cure of arthritis and related diseases.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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Top objectives/ goals relative to optimizing the care of people with arthritis:

1. Reduce arthritis pain
2. Reduce activity limitations due to arthritis
3. Reduce racial disparities in arthritis care
4. Promote visits to competent arthritis care providers

## Arthritis Foundation (Maryland Chapter)

### Mission

The mission of the Arthritis Foundation (Maryland Chapter) is to improve lives through leadership in the prevention, control and cure of arthritis and related diseases.

### Top objectives/goals relative to optimizing the use of therapeutics:

1. To support a unique and effective mix of research through the Arthritis Foundation Research Program (including national and chapter grants to support clinical and health services and outcomes research. See Project summary for example.)
2. To obtain Medicare coverage for outpatient prescription drugs and biologic therapies, as a national leader working with other stake holders in this debate, by 2003, and for arthritis education activities, by 2004, to facilitate the control of arthritis.\*
3. To validate and implement, by 2006, the Arthritis Foundation Quality Indicator Set (AFQuIP) into performance measurement systems designed to improve arthritis quality of care in provider, health care organization, and consumer settings. (See Project Summary)
4. To provide high-quality, unbiased consumer education materials on therapeutics (e.g. brochures on specific medications, annual Drug Guide, press releases on new medications etc.)

\*Information provided in 2003



# Association of American Medical Colleges

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## **Mission**

The mission of the AAMC is to improve the health of the public by enhancing the effectiveness of the nation's medical schools and teaching hospitals. The AAMC pursues its mission by assisting academic medicine's institutions, organizations, and individuals in carrying out their responsibilities for: educating the physician and medical science workforce; discovering new medical knowledge; developing innovative technologies for prevention, diagnosis, and treatment of disease; providing health care services in academic settings.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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Discovering new medical knowledge

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## Mission

1. Reduce targeted catheter-associated adverse events by 50% in 5 years.
2. Reduce targeted surgery-associated adverse events by 50% in 5 years.
3. Reduce targeted antimicrobial-resistant infections by 50% in 5 years.
4. Reduce mortality and hospitalizations attributable to respiratory tract infections among long-term care patients by 50% in 5 years.
5. Eliminate microbiology laboratory errors that cause adverse patient events in 5 years.
6. Eliminate occupational needle injuries among healthcare personnel in 5 years.
7. Achieve 100% adherence to CDC guidelines for immunization of healthcare personnel in 5 years.

## Top objectives/goals relative to optimizing the use of therapeutics:

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1. Educate clinicians about the most appropriate use of antimicrobials in the healthcare setting (12 steps program).
2. Conduct intervention studies to improve prophylactic use of antimicrobials in surgical patients.
3. Conduct intervention studies to reduce the transmission of antimicrobial-resistant pathogens in healthcare settings.

# Centers for Education & Research on Therapeutics

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## Mission

To conduct research and provide education that will advance the optimal use of drugs, medical devices, and biological products.

## Top objectives/goals relative to optimizing the use of therapeutics:

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1. Increase awareness of both the uses and risks of new drugs and drug combinations, biological products, and devices as well as of mechanisms to improve their safe and effective use
2. To provide clinical information to patients and consumers; health care providers; pharmacists, pharmacy benefit managers, and purchasers; health maintenance organizations (HMOs) and health care delivery systems; insurers; and government agencies
3. To improve quality while reducing cost of care by increasing the appropriate use of drugs, biological products, and devices and by preventing their adverse effects and consequences of these effects (such as unnecessary hospitalizations)
4. The conduct of research on the comparative effectiveness, cost-effectiveness, and safety of drugs, biological products, and devices.

# Centers for Medicare and Medicaid Services

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## **Mission**

Assure health care security for beneficiaries. In serving beneficiaries, we will open our programs to full partnership with the entire health community to improve quality and efficiency in an evolving health care system. Among our goals is to protect and improve beneficiary health and satisfaction and provide leadership in the broader health care marketplace to improve health.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Improve quality of care and health outcomes for the beneficiaries of CMS programs.
2. Protect beneficiaries from substandard or unnecessary care.
3. Continually improve CMS programs and operations by actively seeking and responding to the input of beneficiaries and the health care community

# Council for Affordable Quality Healthcare

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## **Mission**

CAQH is a not-for-profit alliance of health plans and networks that promotes collaborative initiatives to help make healthcare more affordable, share knowledge to improve the quality of care, and make administration easier for physicians and their patients.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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To increase appropriate use of antibiotics and reduce antibiotic resistance. To improve long term adherence to treatment recommendations post-myocardial infarction.

# Drug and Therapeutics Information Service (DATIS)

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## Mission

The Drug and Therapeutics Information Service's mission is to facilitate better patient outcomes by supporting clinical decision-making through delivery of personalized, unbiased, practical and evidence-based counsel to health care practitioners, especially those in primary care.

## Top objectives/goals relative to optimizing the use of therapeutics:

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1. To improve health care quality and safety through effective use of research-validated academic detailing concepts.
2. To assist primary care providers translate best evidence into clinical practice.
3. To prove the sustainability and value of long term relationships between primary care providers and locally situated health care extension services.
4. To embrace with the primary care provider areas of clinical uncertainty and controversy.

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## **Mission**

The FDA is responsible for protecting the public health by assuring the safety, efficacy, and security of human and veterinary drugs, biological products, medical devices, our nation's food supply, cosmetics, and products that emit radiation. The FDA is also responsible for advancing the public health by helping to speed innovations that make medicines and foods more effective, safer, and more affordable; and helping the public get the accurate, science-based information they need to use medicines and foods to improve their health.

## **Top objectives/goals relative to optimizing the use of therapeutics:**

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1. Use science-based efficient risk management in all Agency regulatory activities, so that the Agency's limited resources can provide the most health promotion and protection at the least cost for the public.
2. Enable consumers to make smarter decisions by getting them better information to weigh the benefits and risks of FDA-regulated products.
3. Seek continuous improvements in patient and consumer safety by reducing risks associated with FDA-regulated products.
4. Strengthen FDA's capability to identify, prepare for, and respond to terrorist threats and incidents.

# National Council on Patient Information and Education

## Mission

Formed in 1982 as one of the original patient safety coalitions, NCPIE's mission is to improve communication between health care professionals and patients/consumers about the safe, appropriate use of medicines. Its over 120 coalition members include health professional associations, consumer and patient advocacy groups, pharmaceutical manufacturers, academic institutions, and state and federal government agencies (e.g., FDA, AHRQ, Administration on Aging). NCPIE maintains two websites: <http://www.talkaboutrx.org> and <http://www.bemedwise.org>

## Top objectives/goals relative to optimizing the use of therapeutics:

1. Pursuant to “Healthy People 2010” (objective #17-4) and Public Law 104-180, promote the development and awareness of enhanced written consumer medicine information (leaflets that accompany prescriptions obtained at pharmacies), in accordance with guidelines for “usefulness.”
2. Promote public and professional awareness of the importance of oral counseling (at the point of prescribing and dispensing) as a supplement to distribution of written consumer medicine information (see “Healthy People 2010” Objective #17-5).
3. Six of the top 10 most frequently used medicines are available without a prescription. Promote the safe, appropriate use of non-prescription medicines by encouraging consumers to: (1) ask questions of health professionals prior to using OTC products, and (2) read carefully the “Drug Facts” label



## Mission

The National Institute of Allergy and Infectious Diseases (NIAID) conducts and supports research that strives to understand, treat and prevent infectious, immunologic, and allergic diseases that threaten hundreds of millions of people worldwide. NIAID's stewardship of this mission is driven by two convictions: strong commitment to basic research and the understanding that the fields of immunology, microbiology and infectious diseases are related and complementary.

## Top objectives/goals relative to optimizing the use of therapeutics:

Support preclinical discovery and development of new and improved therapeutics:

1. Further the understanding of self-tolerance, tolerance induction, and afferent and efferent pathways of the immune response to aid development of new therapeutics.
2. Support in vitro screening and animal-model testing of potential therapeutics.
3. Make specialized resources available for clinical and preclinical testing of therapeutics.
4. Maintain clinical trial networks to evaluate the safety and efficacy of therapeutic strategies.

Impact the clinical management of HIV infection:

1. Further the understanding of HIV biology and HIV-host interactions to identify new viral and cellular targets for novel therapeutics and microbicides.
2. Support chemical and biological databases, pharmacology, toxicology, analytical chemistry and drug manufacturing for the development of new HIV therapeutics.
3. Provide tissue-based small animal models for HIV drug discovery and in vitro virologic and immunologic evaluations for anti-HIV drugs and microbicides.
4. Support development of new strategies for the prevention and treatment of HIV, its complications, and co-infections.

Support biodefense research, pursuing development of new and improved products designed to prevent, diagnose, and treat diseases caused by potential agents of bioterrorism.

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## Mission

NPC conducts, supports and disseminates research for health care decision makers and public and private payers on behalf of the research-based pharmaceutical industry.

NPC has three major strategies:

1. Development of intellectual assets.
2. Partnering with member companies and outside organizations to achieve maximum impact.
3. Direct dissemination of programs and products

## Top objectives/goals relative to optimizing the use of therapeutics:

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Replace component management with a systems approach to pharmaceutical therapy based on:

1. Integrating total patient care;
2. Recognizing the total cost/benefit over time;
3. Aligning incentives;
4. Developing more accurate measures for integrated care.

Foster appropriate use of pharmaceuticals through:

1. Timely and accurate diagnosis;
2. Initiation of treatment for diagnosed conditions;
3. Rapid adoption of "state-of-the-art" therapies;
4. Patient compliance with treatment regimens

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## Mission

The National Quality Forum's mission is to improve American healthcare through the endorsement of consensus-based national standards for measurement and public reporting of healthcare performance data that provide meaningful information about whether care is safe, timely, beneficial, patient-centered, equitable, and efficient. In addition, NQF functions as a unique “honest broker,” convening healthcare’s many stakeholders to focus on specific quality-related issues.

## Top objectives/goals relative to optimizing the use of therapeutics:

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The specific goals of NQF are to:

1. Promote collaborative efforts to improve the quality of the nation’s healthcare through performance measurement and public reporting;
2. Develop a national strategy for measuring and reporting healthcare quality;
3. Standardize healthcare performance measures so that comparable data are available across the nation (i.e., establish national voluntary consensus standards);
4. Promote consumer understanding and use of healthcare performance measures and other quality information;
5. Promote and encourage the enhancement of system capacity to evaluate and report on healthcare quality.

# Pharmaceutical Research and Manufacturers of America

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## Mission

The Pharmaceutical Research and Manufacturers of America (PhRMA) represents the country's leading pharmaceutical research and biotechnology companies, which are devoted to inventing medicines that allow patients to live longer, healthier, and more productive lives. PhRMA members invested an estimated \$38.8 billion in 2004 in discovering and developing new medicines. PhRMA companies are leading the way in the search for new cures.

## Top objectives/goals relative to optimizing the use of therapeutics:

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One of PhRMA's principal missions is to improve the regulatory environment for drug development and provide a platform for education and communication on the importance of the pharmaceutical research and development process to society.

**PATHs National Registry  
Quick Reference to Projects**

## Quick Reference to Projects

Organization	Title	Key Words	Page
Academy of Managed Care Pharmacy	On-line Drug-Drug Interaction Initiative	drug-drug interactions, online drug utilization review	40
Academy of Managed Care Pharmacy	AMCP's Framework for Quality Drug Therapy	quality improvement in delivery of pharmaceuticals, self-assessment, enhancement of quality	40
Academy of Managed Care Pharmacy	AMCP's Format for Formulary Submissions	formulary decision making, evidence based medicine	41
American Association of Retired Persons	"Wise Use of Medications" Campaign	doctor/patient relationship, compliance, drug interactions, side effects, comparative effectiveness	42
American Association of Retired Persons	Evidence-Based Research	comparative effectiveness, drug safety, evidence-based research, side effects	43
American College of Cardiology	CERTs - Duke University Medical Center	clinical trials, research, guidelines, quality indicators, performance, outcome, quality cycle	44
American College of Clinical Pharmacology	Educational Symposia	educational symposia	45
American College of Clinical Pharmacy	Pharmacotherapy Self-Assessment Program (4th edition)	pharmacotherapy, self-assessment, home study	46
American College of Clinical Pharmacy	Updates in Therapeutics	on-line, drug therapy, education	46
American College of Clinical Pharmacy	Pediatric Medication Education Text, 4 <sup>th</sup> Edition	pediatrics, drug information, patient education	47
American Heart Association/American Stroke Association	The Cholesterol Low Down	cholesterol, prevention, diet, exercise, AHA, risk factors, education, treatment	48
American Heart Association/American Stroke Association	Heart of Diabetes	diabetes, prevention, diet, exercise, AHA, risk factor, education, treatment	48
American Heart Association/American Stroke Association	Heart Profilers	secondary prevention, diet, exercise, AHA, risk factors, education, treatment	49
American Heart Association/American Stroke Association	Get With The Guidelines	guidelines, secondary prevention, quality indicators, performance, outcome, quality improvement, hospital implementation	49
American Medical Association	Diagnosis and Management of Foodborne Illnesses: A Primer for Physicians and Other Health Care Professionals	education, awareness, foodborne illnesses	50
American Medical Association	The National Influenza Vaccine Summit	vaccines, research, production, distribution, promotion, advocacy	50

<b>Organization</b>	<b>Title</b>	<b>Key Words</b>	<b>Page</b>
American Medical Association	Hepatitis C Physician Education Monograph for Primary Care Physicians	Hepatitis C, physician education, doctor/patient relationship	51
American Medical Association	Enhancing Adult Immunization in the United States	immunization, adults, legislation	51
American Medical Association	Improving Appropriate Antimicrobial Use and Reducing Resistance by Primary Care Physicians	educational initiative, appropriate use, new antimicrobials	52
American Pharmacists Association	Maximizing the pharmacist's role in risk management.	pharmacist, pharmacy	53
American Society of Health-System Pharmacists	ASHP Therapeutic Position Statement on Strategies for Preventing and Treating Osteoporosis.	osteoporosis, low bone mineral density, microarchitectural deterioration of bone tissue, calcium, vitamin D, bisphosphonates, SERMS, calcitonin, and estrogen	54
American Society of Health-System Pharmacists	ASHP Therapeutic Position Statement on the Safe Use of Oral Nonprescription Analgesics	breast-feeding, oral nonprescription analgesics, aspirin, ibuprofen, acetaminophen, alcohol, herbals and salicylates	55
American Society of Health-System Pharmacists Research and Education Foundation	Federal Services Junior Investigators Research Grant Program: Optimizing Chronic Drug Therapy in the Elderly	grants, pharmacy, nursing, physicians, junior investigators, research, chronic drug therapy, elderly, federal services	56
American Society of Health-System Pharmacists Research and Education Foundation	Junior Investigator Grant Program in Critical Care	grants, pharmacy, junior investigators, research, critical care, intensive care	57
American Society of Health-System Pharmacists Research and Education Foundation	Pharmacy/Nursing Partnership for Medication Safety Research Grant Program	grants, pharmacy, nurses, research, medication safety	58
Arthritis Foundation	Arthritis Foundation Quality Indicator Set (AFQuIP) project	quality, performance improvement, arthritis medications and care	59
Arthritis Foundation (Maryland Chapter)	Engalitcheff Arthritis Outcomes Initiative	arthritis, biologics, outcomes research	60
Centers for Medicare and Medicaid Services	Demonstration Projects	service delivery, Medicare	61
Centers for Medicare and Medicaid Services	Research Data Assistance Center	academic and nonprofit researchers, data use	61
Council for Affordable Quality Healthcare	Save Antibiotic Strength (SAS)	antibiotics, antibiotic resistance, physician information, consumer information, employer information	62

<b>Organization</b>	<b>Title</b>	<b>Key Words</b>	<b>Page</b>
Council for Affordable Quality Healthcare	CAQH Cardiac Initiative (heartBBEAT for lifeSM)	beta-blockers, adherence; heart attack; myocardial infarction; physician information; patient information	63
Drug and Therapeutics Information Service	Improving Medication-related Outcomes	Academic detailing, Type 2 diabetes, pain, asthma, clinical decision support, rural health, risk management, primary care, health care quality & safety, health care extension service	64
National Committee for Quality Assurance	Testing Potential HEDIS Performance Measures	managed care, quality improvement, performance measures, databases	65
National Council on Patient Information and Education	“Be MedWise”	self-care, patient education, patient safety, OTC medicines	66
National Council on Patient Information and Education	Consumer Medicine Information (CMI) Initiative	drug information, patient education, patient safety, literacy, medicine communication	66
National Council on Patient Information and Education	“Talk About Prescriptions” Month	medicine communication, patient safety, drug information	67
National Pharmaceutical Council	Pain Management Series	pain, pain management, analgesia, quality of care, quality improvement, treatment, guidelines/treatment standards, pain assessment, chronic pain, non-malignant pain	68
National Pharmaceutical Council	NCCN pain management guidelines	pain, pain management, analgesia, quality of care, quality improvement, treatment, guidelines/treatment standards, pain assessment, chronic malignant pain, cancer pain	69
National Pharmaceutical Council	NCCN breast cancer therapies project	breast cancer, academic medical centers, community cancer centers, utilization	69
National Quality Forum	Voluntary Consensus Standards and Associated NQF Activities Relating to Therapeutics	medical errors, patient safety, best practices, hospitals, quality	70



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# **PATHs National Registry**

## **Project Summaries**

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## Academy of Managed Care Pharmacy

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**ID:** AMCP-001

**Status:** Currently ongoing

**Title:** On-line Drug-Drug Interaction Initiative

**Description:** Drug-drug interaction system improvement

**Key Words:** drug-drug interactions, online drug utilization review

**Partners:** American Pharmacists Association, National Association of Chain Drug Stores, National Community Pharmacy Association, American Society for Automation in Pharmacy, US Pharmacopeia

**Desire Additional Partners:**

**Comments on Partners:** Partners Description: drug database vendors

**Contact:** Marissa Schlaifer

(703) 683-8416 x303

[mschlaifer@amcp.org](mailto:mschlaifer@amcp.org)

**Year Added:** 2004

**Last Update:** 2005

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**ID:** AMCP-002

**Status:** Completed

**Title:** AMCP's Framework for Quality Drug Therapy

**Description:** Total quality improvement tool for pharmacists and pharmacy systems

**Key Words:** quality improvement in delivery of pharmaceuticals, self-assessment, enhancement of quality

**Partners:** Caremark Rx, Fallon Community Health Plan, Indian Health Service, Veterans Administration

**Desire Additional Partners:**

**Comments on Partners:** Pharmacists practicing in any setting; pharmacy system administrators

**Contact:** Richard Fry

(703) 683-8416 x345

[rfry@fmcenet.org](mailto:rfry@fmcenet.org)

**Year Added:** 2005

**Last Update:** 2005

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**ID:** AMCP-003

**Status:** Completed

**Title:** AMCP's Format for Formulary Submissions

**Description:** Tool for providing pharmacy and therapeutics (P&T) committees with evidence based medicine documentation for making formulary inclusion decisions

**Key Words:** formulary decision making, evidence based medicine

**Partners:** Health plan and PBMs providing pharmacy benefits to over 150 million Americans; Department of Defense; Veterans Administration

**Desire Additional Partners:**

**Comments on Partners:** Pharmacy and therapeutics committees of health care systems

**Contact:** Steve Avey

(703) 683-8416 x346

[savey@fmcenet.org](mailto:savey@fmcenet.org)

**Year Added:** 2005

**Last Update:** 2005

# American Association of Retired Persons

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**ID:** AARP-001

**Status:** Planned and will start within year

**Title:** Medication Use Campaign

**Description:** AARP is using 2005 to plan and develop a medication use campaign that will launch in 2006. The campaign may include consumer information on: making informed decisions about medication options; avoiding medication errors, adverse drug reactions and drug-drug interactions; underuse and overuse of medications; use of inappropriate medication; comparative effectiveness; enhancing medication compliance; enhancing doctor/pharmacist and patient communications; and personal medication records. Many of these issues have been addressed in an on-line medication use learning course that will appear on AARP's website in Spring 2005.

**Key Words:** doctor/patient relationship, compliance, drug interactions, side effects, comparative effectiveness

**Partners:** AARP will enter into partnerships with organizations that share an interest in appropriate medication use.

**Desire Additional Partners:**

**Comments on Partners:** Partners may include: national physician organizations, AARP Health Guide partners, allied health professional groups, health care purchasers and companies; pharmacist associations, and chain drugstores. We also seek to join other relevant coalitions.

**Contact:** Margaret Hawkins

(202) 434-2201

[mhawkins@aarp.org](mailto:mhawkins@aarp.org)

**Year Added:** 2005

**Last Update:** 2005

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**ID:** AARP-002

**Status:** Currently ongoing

**Title:** Evidence-Based Research

**Description:** In February 2005, AARP unveiled its drug safety and effectiveness program at <http://www.aarp.org/researchRx>. This program incorporates evidence-based research of the Drug Evidence-based Practice Center. Components of AARP's program include simplified comparative information about prescription drug safety and costs, accessible by health condition and/or by specific drug. The online information includes all therapeutic classes reviewed by OHSU to date; this will be updated and new classes added as OHSU completes their work.

**Key Words:** comparative effectiveness, drug safety, evidence-based research, side effects

**Partners:** Current partners are AARP's state chapters.

**Desire Additional Partners:**

**Comments on Partners:** Additional partners are sought to help fund research about consumer and health provider opinions about evidence-based research, and to help develop educational products for both audiences.

**Contact:** Van Ellet/N. Lee Rucker  
(202) 434-3949/(202) 434-3897  
[vellet@aarp.org](mailto:vellet@aarp.org)/[lrucker@aarp.org](mailto:lrucker@aarp.org)

**Year Added:** 2005

**Last Update:** 2005

**ID:** ACC-001

**Status:** Currently ongoing

**Title:** CERTs - Duke University Medical Center

**Description:** The goal of this project is to enhance the state of knowledge about the quality of using therapeutics in cardiovascular disease, within a conceptual framework that will stimulate a more efficient approach to knowledge development and dissemination.

**Key Words:** clinical trials, research, guidelines, quality indicators, performance, outcome, quality cycle

**Partners:** Duke University Medical Center

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** Joseph Allen, MA  
(301) 581-3463  
[jallen@acc.org](mailto:jallen@acc.org)

**Year Added:** 2003

**Last Update:** 2004

# American College of Clinical Pharmacology

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**ID:** ACCP-001

**Status:** Planned and will start within year

**Title:** Educational Symposia

**Description:** An educational symposia featured during the annual meeting in the fall of each year. The full program for 2005 has not been finalized.

**Key Words:** educational symposia

**Partners:** Partners for two of the symposia are ASCPT and AAPS.

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** Susan S. Ulrich, R.Ph.

(315) 768-6117

[accp1ssu@aol.com](mailto:accp1ssu@aol.com)

**Year Added:** 2005

**Last Update:** 2005

## American College of Clinical Pharmacy

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**ID:** ACCP/Pharmacy-001

**Status:** Currently ongoing

**Title:** Pharmacotherapy Self-Assessment Program (PSAP) (5th edition)

**Description:** Comprehensive, modular-based home-study program that updates and assesses pharmacotherapy knowledge in 19 therapeutic areas.

**Key Words:** pharmacotherapy, self-assessment, recertification program for pharmacotherapy specialists certified by the Board of Pharmaceutical Specialties

**Partners:** American Society of Health-System Pharmacists

**Desire Additional Partners:**

**Comments on Partners:** Promote PSAP use by their members.

**Contact:** Kristin Povilonis

(816) 531-2177

[kpovilonis@accp.com](mailto:kpovilonis@accp.com)

**Year Added:** 2002

**Last Update:** 2005

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**ID:** ACCP/Pharmacy-002

**Status:** Currently ongoing

**Title:** Updates in Therapeutics

**Description:** Live programming at ACCP spring meetings each year, followed by web-based updates on more than 60 therapeutic topics in pharmacotherapy, psychiatry, oncology, and nutrition support. [www.accp.com](http://www.accp.com)

**Key Words:** on-line, drug therapy, education

**Partners:** None

**Desire Additional Partners:**

**Comments on Partners:** Promote use by their members.

**Contact:** Robert M. Elenbaas

(816) 531-2177

[relenbaas@accp.com](mailto:relenbaas@accp.com)

**Year Added:** 2002

**Last Update:** 2005

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**ID:** ACCP/Pharmacy-003

**Status:** Currently ongoing

**Title:** Pediatric Medication Education Text, 4th Edition

**Description:** More than 200 monographs written at 6th grade level in English and Spanish for use in patient education.

**Key Words:** pediatrics, drug information, patient education

**Partners:** None

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** Wendi Kishi

(816) 531-2177

[wkishi@accp.com](mailto:wkishi@accp.com)

**Year Added:** 2002

**Last Update:** 2005

## American Heart Association/American Stroke Association

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**ID:** AHA-001

**Status:** Currently ongoing

**Title:** The Cholesterol Low Down

**Description:** The Cholesterol Low Down teaches families what they can do to manage their cholesterol, including diet, exercise and therapeutics.

**Key Words:** cholesterol, prevention, diet, exercise, AHA, risk factors, education, treatment

**Partners:** Pfizer

**Desire Additional Partners:**

**Comments on Partners:** The American Heart Association would be interested in collaborative activities to increase awareness and compliance with guidelines.

**Contact:** Pamela Garmon

(214) 706-1650

[pamela.garmon@heart.org](mailto:pamela.garmon@heart.org)

**Year Added:** 2004

**Last Update:** 2004

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**ID:** AHA-002

**Status:** Currently ongoing

**Title:** Heart of Diabetes

**Description:** The Heart of Diabetes works by first giving people the knowledge they need in managing their Diabetes, including diet, exercise and therapeutics.

**Key Words:** diabetes, prevention, diet, exercise, AHA, risk factor, education, treatment

**Partners:** Eli Lilly & Company, Takeda Pharmaceuticals North America, Inc.

**Desire Additional Partners:**

**Comments on Partners:** The American Heart Association would be interested in collaborative activities to increase awareness and compliance with guidelines.

**Contact:** Pamela Garmon

(214) 706-1650

[pamela.garmon@heart.org](mailto:pamela.garmon@heart.org)

**Year Added:** 2004

**Last Update:** 2004

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**ID:** AHA-003 **Status:** Currently ongoing

**Title:** Heart Profilers

**Description:** Through a series of online questions, Heart Profilers provides patients treatment options for a variety of cardiovascular disease risk factors, including condition specific therapeutics.

**Key Words:** secondary prevention, diet, exercise, AHA, risk factors, education, treatment

**Partners:** Nexcura, Guidant Corporation, KOS Pharmaceuticals

**Desire Additional Partners:**

**Comments on Partners:** The American Heart Association would be interested in collaborative activities to increase awareness and compliance with guidelines.

**Contact:** Martha Harry  
(214) 706-1927  
[martha.harry@heart.org](mailto:martha.harry@heart.org)

**Year Added:** 2004

**Last Update:** 2004

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**ID:** AHA-004 **Status:** Currently ongoing

**Title:** Get With The Guidelines

**Description:** The Get With The Guidelines program is a rapid cycle quality improvement hospital-based program that helps improve patient outcomes. This program makes it possible for the healthcare provider team to consistently treat every patient in the hospital setting with the most updated guideline information.

**Key Words:** guidelines, secondary prevention, quality indicators, performance, outcome, quality improvement, hospital implementation

**Partners:** Hospitals, Health Systems, QIOs, Health Plans, Health Departments

**Desire Additional Partners:**

**Comments on Partners:** The American Heart Association would be interested in collaborative activities to increase awareness and compliance with guidelines.

**Contact:** Diane Porter  
(214) 706-1829  
[diane.porter@heart.org](mailto:diane.porter@heart.org)

**Year Added:** 2004

**Last Update:** 2004

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# American Medical Association

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**ID:** AMA-001

**Status:**

**Title:** Diagnosis and Management of Foodborne Illnesses: A Primer for Physicians and Other Health Care Professionals

**Description:** This is a popular educational/awareness project on management of foodborne illnesses directed at healthcare professionals. It was done in collaboration with the FDA, CDC, USDA, and the American Nurses Association. A free hard-copy CME product has been distributed to over 17,000 healthcare professionals; it currently is being translated into Spanish. A version for personal digital assistants (PDAs) also is available.

**Key Words:**

**Partners:**

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** L.J Tan, PhD  
(312) 464-4147

**Year Added:** 2005

**Last Update:** 2005

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**ID:** AMA-002

**Status:**

**Title:** The National Influenza Vaccine Summit

**Description:** Co-sponsored by the CDC and the AMA, this annual summit includes nearly 100 organizations from the fields of influenza vaccine research, production, distribution, promotion and advocacy. This collaborative group focuses on influenza vaccine issues that are important to achieve the Healthy People 2010 goals. Additionally, throughout the year, the Summit participants collaborate to address barriers that may hinder influenza vaccination rates. These activities range from addressing payment problems, to communicating nationally on the benefits of influenza vaccination, to creating tools to facilitate the provision of vaccine.

**Key Words:**

**Partners:** Co-sponsored by CDC and AMA

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** L.J Tan, PhD  
(312) 464-4147

**Year Added:** 2005

**Last Update:** 2005

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**ID:** AMA-003

**Status:**

**Title:** Hepatitis C Physician Education Monograph for Primary Care Physicians

**Description:** A CME monograph with accompanying patient information on the diagnosis and management of hepatitis C infection. Targeted at the primary care physician, the monograph includes information on the initial testing for hepatitis C, on when to refer the patient to a specialist, on the long-term management of the patient with chronic infection, and the counseling of infected patients.

**Key Words:**

**Partners:**

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** L.J Tan, PhD  
(312) 464-4147

**Year Added:** 2005

**Last Update:** 2005

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**ID:** AMA-004

**Status:** Currently ongoing

**Title:** Enhancing Adult Immunization in the United States

**Description:** A new initiative with both outreach and legislative efforts to improve the overall rates for adult immunization in the United States. In particular, efforts will be initially focused on collaborating with immunization partners to develop strong adult immunization policies to procure adult vaccines and to provide outreach to the public and to physicians on the importance of adult immunization.

**Key Words:**

**Partners:**

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** L.J Tan, PhD  
(312) 464-4147

**Year Added:** 2005

**Last Update:** 2005

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**ID:** AMA-005

**Status:** Projected

**Title:** Improving Appropriate Antimicrobial Use and Reducing Resistance by Primary Care Physicians

**Description:** Currently in discussion is an educational initiative to highlight the appropriate use of new antimicrobials. An educational session at one of the AMA's meetings is in consideration. This part of the initiative is subject to funding. Another part of this initiative involves the national dissemination of a compendium of guidances on appropriate use of antibiotics. This compendium was produced by the CA Medical Association and the AMA is working with them on a potential national distribution of the compendium.

**Key Words:**

**Partners:**

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** L.J Tan, PhD  
(312) 464-4147

**Year Added:** 2005

**Last Update:** 2005

## American Pharmacists Association

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**ID:** APA-001

**Status:** Planned and will start within year

**Title:** Maximizing the pharmacist's role in risk management.

**Description:** Exploring use of a performance-based group of pharmacists and pharmacies to improve risk management initiatives.

**Key Words:** pharmacist, pharmacy

**Partners:** None

**Desire Additional Partners:**

**Comments on Partners:** Academia, industry, other health professional organizations

**Contact:** Susan Winckler

(202) 429-7533

[swinckler@APhAnet.org](mailto:swinckler@APhAnet.org)

**Year Added:** 2003

**Last Update:** 2003

# American Society of Health-System Pharmacists

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**ID:** ASHP-001

**Status:** Currently ongoing

**Title:** ASHP Therapeutic Position Statement on Strategies for Preventing and Treating Osteoporosis.

**Description:** This document supports the use of appropriate pharmacotherapy for the prevention and treatment of osteoporosis. Osteoporosis is a serious health disorder characterized by low bone mineral density and microarchitectural deterioration of bone tissue, leading to bone fragility. The document will focus on medications that have been shown to increase bone mineral density and prevent fractures. Appropriate drug selection depends on several patient specific factors. Many patients at risk for osteoporosis or who have sustained an osteoporotic fracture remain undiagnosed or untreated.

**Key Words:** osteoporosis, low bone mineral density, microarchitectural deterioration of bone tissue, calcium, vitamin D, bisphosphonates, SERMS, calcitonin, and estrogen

**Partners:** None

**Desire Additional Partners:**

**Comments on Partners:** ASHP would be interested in collaborative activities to increase awareness and compliance with regard to treatment and prevention of osteoporosis.

**Contact:** Cynthia LaCivita, PharmD  
(301) 664-8609  
[clacivita@ashp.org](mailto:clacivita@ashp.org)

**Year Added:** 2003

**Last Update:** 2005



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**ID:** ASHP-002

**Status:** Currently ongoing

**Title:** ASHP Therapeutic Position Statement on the Safe Use of Oral Nonprescription Analgesics

**Description:** This is a revision of a current therapeutic position statement (TPS) which was approved by the ASHP Board of Directors on November 14, 1998, and published in AJHP in 1999. The document still provides valuable guidance; however, it needs to be updated to include current references and additional information on breast-feeding and concomitant use of oral nonprescription analgesics, coadministration of aspirin and ibuprofen, cautions and dosing recommendations on the use of acetaminophen and alcohol, and herbals that contain salicylates.

**Key Words:** breast-feeding, oral nonprescription analgesics, aspirin, ibuprofen, acetaminophen, alcohol, herbals and salicylates

**Partners:** None

**Desire Additional Partners:**

**Comments on Partners:** Experts to collaborate in document development, review of dissemination of information.

**Contact:** Cynthia LaCivita, PharmD  
(301) 664-8609  
[clacivita@ashp.org](mailto:clacivita@ashp.org)

**Year Added:** 2004

**Last Update:** 2005

# American Society of Health-System Pharmacists Foundation

**ID:** ASHPF-001

**Status:** Currently ongoing

**Title:** Federal Services Junior Investigators Research Grant Program: Optimizing Chronic Drug Therapy in the Elderly

**Description:** Research grant program custom-designed to meet the needs of practitioners in the federal services (Department of Defense, Veterans Affairs, and U.S. Public Health Service). Four to six grants are available in the \$10,000 to \$25,000 range for each award. Projects should focus on optimizing drug therapy in elderly patients that are federal healthcare beneficiaries. Grants are available to junior investigators within 5 years of completion of their terminal degree or postgraduate training or have professional experience greater than 5 years and no more than two externally funded research projects as a principal investigator. Investigators should be pharmacists, physicians, or nurse practitioners. Applications and additional information may be obtained by visiting the ASHP Foundation Web site: [www.ashpfoundation.org](http://www.ashpfoundation.org) and clicking on "Funding Opportunities."

**Key Words:** grants, pharmacy, nursing, physicians, junior investigators, research, chronic drug therapy, elderly, federal services

**Partners:** Novartis Pharmaceuticals sponsors the program through the ASHP Foundation.

**Desire Additional Partners:**

**Comments on Partners:** The ASHP Foundation would like to partner with other organizations to promote the availability of the program to pharmacists, physicians and nurse practitioners who practice in the federal sector. There are also opportunities for interested grant reviewers.

**Contact:** David J. Cobaugh, PharmD  
(301) 664-8767  
[dcobaugh@ashp.org](mailto:dcobaugh@ashp.org)

**Year Added:** 2005

**Last Update:** 2005

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**ID:** ASHPF-002

**Status:** Currently ongoing

**Title:** Junior Investigator Research Grant Program

**Description:** The ASHP Foundation is offering a new research grant program that will support health services research in medication use that is conducted by pharmacist junior investigators. The principal investigator must be a junior researcher within 5 years of completion of his/her terminal degree or postgraduate training or have professional experience greater than 5 years and no more than two externally funded research projects as a principal investigator. A senior investigator must participate on the research team as a mentor/advisor. Two to three research projects will be funded through this grant program. A total of \$20,000 is available and will be divided between two to three recipients. Applications and additional information may be obtained by visiting the ASHP Foundation Web site: [www.ashpfoundation.org](http://www.ashpfoundation.org) and clicking on "Funding Opportunities."

**Key Words:** grants, pharmacy, junior investigators, research, health services

**Partners:**

**Desire Additional Partners:**

**Comments on Partners:** The ASHP Foundation would like to partner with other organizations to promote the availability of the program. There are also opportunities for interested grant reviewers.

**Contact:** David J. Cobaugh, PharmD  
(301) 664-8767  
[dcobaugh@ashp.org](mailto:dcobaugh@ashp.org)

**Year Added:** 2005

**Last Update:** 2005

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**ID:** ASHPF-003

**Status:** Currently ongoing

**Title:** Pharmacy/Nursing Partnership for Medication Safety Research Grant Program

**Description:** The ASHP Foundation is offering a research grant program designed to support the collaboration of pharmacists and nurses in the conduct of research designed to study new processes and design characteristics that will improve the safety and effectiveness of the medication-use system in hospitals and health systems. The research team must be multidisciplinary in nature. The co-principal investigators for the project must be a pharmacist and a nurse. A total of \$80,000 is available and will be divided between one to three recipients. Grants are awarded to provide funding for specific projects conducted by pharmacist/nursing research teams that address collaboration in the medication-use system to foster improvements in patient care and are not intended for long-term support of research programs. Applications and additional information may be obtained by visiting the ASHP Foundation Web site: [www.ashpfoundation.org](http://www.ashpfoundation.org) and clicking on "Funding Opportunities."

**Key Words:** grants, pharmacy, nurses, research, medication safety

**Partners:** Omnicell sponsors the program through the ASHP Foundation.

**Desire Additional Partners:**

**Comments on Partners:** The ASHP Foundation would like to partner with other organizations to promote the availability of the program. There are also opportunities for interested grant reviewers.

**Contact:** David J. Cobaugh, PharmD  
(301) 664-8767  
[dcobaugh@ashp.org](mailto:dcobaugh@ashp.org)

**Year Added:** 2005

**Last Update:** 2005

# Arthritis Foundation

**ID:** AF-001

**Status:** Currently ongoing

**Title:** Arthritis Foundation Quality Indicator Set (AFQuIP) project

**Description:** This project was designed to develop, validate and foster implementation of a core set of indicators to be used as the basis for arthritis care quality measurement and performance improvement. Indicators were developed for Osteoarthritis, Rheumatoid Arthritis and analgesic utilization. Since the completion of the AFQuIP set in 2002, a number of organizations have utilized the indicators to assist in efforts to improve arthritis care. The Arthritis Foundation partnered with the National Committee for Quality Assurance to specify and field-test potential performance measures for inclusion in the Health Plan Employer Data and Information Set (HEDIS). As a result of this collaboration, a measure focused on the use of Disease Modifying Anti-Rheumatic Drugs (DMARDs) in people with Rheumatoid Arthritis will be added to HEDIS in 2006. In addition, in projects focused on osteoarthritis and pain management, the AFQuIP indicators have been used by the Physician Consortium for Performance Improvement, the American Medical Association (AMA), and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Osteoarthritis measures based on AFQuIP indicators are also part of the Centers for Medicare & Medicaid Services' (CMS) Doctor's Office Quality project. The Arthritis Foundation would like to continue to disseminate the AFQuIP set and will submit the indicators to the National Quality Measures Clearinghouse in 2005.

**Key Words:** quality, performance improvement, arthritis medications and care

**Partners:** RAND Health, the UAB CERTS, American College of Rheumatology, American Academy of Orthopedic Surgeons, American Association of Family Physicians, American Medical Association, American College of Physicians-American Society of Internal Medicine, Association of Rheumatology Health Professionals, National Committee for Quality Assurance, Foundation for Accountability, Agency for Healthcare Research and Quality, CDC, AARP, and others.

**Desire Additional Partners:**

**Comments on Partners:** Professional, health services and other organizations interested in arthritis care quality and performance improvement

**Contact:** Mary Waterman

(202) 537-2257

[mwaterman@arthritis.org](mailto:mwaterman@arthritis.org)

**Year Added:** 2003

**Last Update:** 2005

## Arthritis Foundation (Maryland Chapter)

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**ID:** AF(M)-001

**Status:** Currently ongoing

**Title:** Engalitcheff Arthritis Outcomes Initiative

**Description:** The Arthritis Foundation, Maryland Chapter and the Center for Education and Research on Therapeutics at the University of Alabama are partnering to advance the knowledge of drug treatment issues in arthritis. The goal of the Engalitcheff Arthritis Outcomes Initiative is to improve the quality of life and health care outcomes of people with arthritis by fostering research to increase understanding about the efficacy and safety of new biologic agents.

The \$3 million collaboration will fund five 4-year grants that are selected through a national peer review process. The first grant was awarded in November 2002 and a second was awarded in 2003.

**Key Words:** arthritis, biologics, outcomes research

**Partners:** University of Alabama at Birmingham CERTs, Brigham and Women's Hospital, Harvard Medical School

**Desire Additional Partners:**

**Comments on Partners:** Academic institutions and health care agencies and other organizations with an interest in the efficacy and safety of arthritis biologic agents are encouraged to collaborate with the awardees and applicants.

**Contact:** Jan Thompson

(410) 654-6570

[jathomps@arthritis.org](mailto:jathomps@arthritis.org)

**Year Added:** 2003

**Last Update:** 2004

## Centers for Medicare and Medicaid Services

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**ID:** CMS-001

**Status:** Currently ongoing

**Title:** Demonstration Projects

**Description:** CMS conducts and sponsors a number of innovative demonstration projects to test and measure the effect of potential program changes. Our demonstrations study the likely impact of new methods of service delivery, coverage of new types of service, and new payment approaches on beneficiaries, providers, health plans, [and] states, and the Medicare Trust Funds. Evaluation projects validate our research and demonstration findings and help us monitor the effectiveness of Medicare, Medicaid, and the State Children's Health Insurance Program (SCHIP).

**Key Words:**

**Partners:**

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** Marcel Salive  
(410) 786-0297  
[msalive@cms.hhs.gov](mailto:msalive@cms.hhs.gov)

**Year Added:** 2004

**Last Update:** 2005

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**ID:** CMS-002

**Status:** Currently ongoing

**Title:** Research Data Assistance Center

**Description:** <http://www.cms.hhs.gov/researchers/resdac.asp> The Research Data Assistance Center (ResDAC) provides free assistance to academic and non-profit researchers interested in using Medicare, Medicaid, SCHIP, and Medicare Current Beneficiary Survey (MCBS) data for research. Primary funding for ResDAC comes from a CMS research contract.

**Key Words:**

**Partners:** RedDAC is a consortium of faculty and staff from the University of Minnesota, Boston university, Dartmouth Medical School, and the Morehouse School of Medicine.

**Desire Additional Partners:**

**Comments on Partners:** ResDAC offers a number of services for researchers with all levels of experience using or planning to use CMS data. Services include technical data assistance, information on available data resources, and training.

**Contact:** Marcel Salive  
(410) 786-0297  
[msalive@cms.hhs.gov](mailto:msalive@cms.hhs.gov)

**Year Added:** 2004

**Last Update:** 2005

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# Council for Affordable Quality Healthcare

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**ID:** CAQH-001

**Status:** Concluding in 2005

**Title:** Save Antibiotic Strength (SAS®)

**Description:** SAS is a program on both the national and local levels to educate Americans and to provide physicians with the information and tools they need to appropriately use antibiotics and reduce antibiotic resistance. Seven local pilot programs disseminate educational materials to physicians and consumers, and offer an employer program to provide related consumer education in the workplace. Quantitative and qualitative research has been conducted to assess attitudes, beliefs and behaviors about antibiotic utilization, and to see if health plan efforts are fostering improvement.

**Key Words:** antibiotics, antibiotic resistance, physician information, consumer information, employer information

**Partners:** National: U.S. Centers for Disease Control and Prevention (CDC) and the Alliance for the Prudent Use of Antibiotics; Local: CAQH member plans in San Diego, California, Norfolk, Virginia, Connecticut, Georgia, Pennsylvania, New Jersey and New York are working with state health departments, academic medical centers and local chapters of national medical societies and specialty associations.

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** Jennifer Lis  
(202) 778-8478  
[jlis@caqh.org](mailto:jlis@caqh.org)

**Year Added:** 2003

**Last Update:** 2005



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**ID:** CAQH-002

**Status:** Concluding in 2005

**Title:** CAQH Cardiac Initiative  
(heartBBEAT for life®)

**Description:** The heartBBEAT for life® is a national effort to develop and disseminate educational materials to physicians and patients to promote the long-term adherence to treatment recommendations after a heart attack. The program originally focused on adherence to beta-blockers after heart attack, and expanded to broader treatment recommendations in late-2004, including other post-MI medications and lifestyle recommendations. Tools for consumer and professional audiences have been designed and distributed through CAQH member health plans. Quantitative and qualitative research has been conducted to assess attitudes, beliefs and behaviors regarding adherence to treatment recommendations. Using administrative health plan data, measures have been designed that will assess long-term patient adherence to beta-blockers, ACE-Inhibitors/Angiotensin II Receptor Blockers and lipid-lowering medications at various intervals after a heart attack in order to assess the impact of the initiative.

**Key Words:** beta-blockers, adherence, heart attack, myocardial infarction, physician information, patient information

**Partners:** American Heart Association, American College of Cardiology, American College of Physicians, American Academy of Family Physicians, Duke University

**Desire Additional Partners:**

**Comments on Partners:**

**Contact:** Jennifer Lis  
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**Year Added:** 2003

**Last Update:** 2005

## Drug and Therapeutics Information Service

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**ID:** DATIS-001

**Status:** Currently ongoing

**Title:** Improving Medication-related Outcomes

**Description:** The project applies service-oriented academic detailing strategies to support clinical decision-making by Kentucky primary care providers in the management of patients with type 2 diabetes or chronic non-malignant pain. Additional topics such as asthma are planned with expansion of the project.

**Key Words:** academic detailing, Type 2 diabetes, pain, asthma, clinical decision support, rural health, risk management, primary care, health care quality & safety, health care extension service

**Partners:** CDC

**Desire Additional Partners:**

**Comments on Partners:**

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**Year Added:** 2005

**Last Update:** 2005

# National Committee for Quality Assurance

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**ID:** NCQA-001

**Status:** Currently ongoing

**Title:** Testing Potential HEDIS Performance Measures

**Description:** Testing measure specifications on medication management in the elderly.

**Key Words:** managed care, quality improvement, performance measures, databases

**Partners:** CERTs HMO Research Network

**Desire Additional Partners:**

**Comments on Partners:** Partners with access to multiple managed care claims databases and medical records for testing and validating HEDIS measure specifications in various clinical areas, including medication management in the elderly.

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**Year Added:** 2004

**Last Update:** 2004

# National Council on Patient Information and Education

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**ID:** NCPPIE-001

**Status:** Currently ongoing

**Title:** Consumer Medicine Information (CMI) Initiative

**Description:** NCPPIE is serving as convener/coordinator of the private-sector CMI Initiative to meet federally-mandated goals: by 2006, 95% of patients receiving new prescriptions must be given written CMI that meets criteria for usefulness.

**Key Words:** drug information, patient education, patient safety, literacy, medicine communication

**Partners:** Over 2 dozen medicine information stakeholders

**Desire Additional Partners:**

**Comments on Partners:** Organizations that help develop/produce written consumer medicine information (CMI), and/or that represent health care professionals who deliver written CMI; national consumer advocacy groups, health educators, health information designers, etc.

**Contact:** Ray Bullman  
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[bullman@ncpie.info](mailto:bullman@ncpie.info)

**Year Added:** 2004

**Last Update:** 2005

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**ID:** NCPPIE-002

**Status:** Currently ongoing

**Title:** "Be MedWise"

**Description:** Launched in 2002, "Be MedWise" is a public education campaign to promote the wise, appropriate use of non-prescription (over-the-counter) medicines. The campaign features electronic, print and broadcast media components, including the website <http://www.bemedwise.org>

**Key Words:** self-care, patient education, patient safety, OTC medicines

**Partners:** FDA, Office of US Surgeon General, APhA

**Desire Additional Partners:**

**Comments on Partners:** Organizations that are committed to improving the safe, appropriate use of OTC medicines; trade groups, regulatory bodies, and other organizations that recognize the increasingly prevalent role of self-care in today's society, and who can provide resources to help educate consumers about their own responsibility in wise OTC use.

**Contact:** Ray Bullman  
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**Year Added:** 2004

**Last Update:** 2005

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**ID:** NCPIE-003

**Status:** Currently ongoing

**Title:** "Talk About Prescriptions" Month

**Description:** This national health observance, sponsored by NCPIE, is held each October to highlight the important role of health professional-patient communication in promoting the safe, appropriate use of medicines. The October 2004 observance will focus on the role of written consumer medicine information.

**Key Words:** medicine communication, patient safety, drug information

**Partners:** NCPIE Members

**Desire Additional Partners:**

**Comments on Partners:** Organizations dedicated to improving the usefulness of written consumer medicine information, and to helping empower consumers to "Talk About Prescriptions."

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**Year Added:** 2004

**Last Update:** 2005

# National Pharmaceutical Council

**ID:** NPC-001

**Status:** Currently ongoing

**Title:** Pain Management Series

**Description:** NPC partnered with JCAHO on a two-phase project with the goal of contributing to the quality and safety of pain assessment, management and treatment for patients and consumers. The project's objectives are to (1) help establish the under-treatment of pain; (2) enhance dissemination of JCAHO's new pain management measurements and standards; (3) provide resources for organizations to implement and measure the use of evidence-based standards; and (4) to facilitate quality improvement efforts. Two monographs, "Pain: Current Understanding of Assessment, Management, and Treatments," and "Improving the Quality of Pain Management Through Measurement and Action," have been completed. Both monographs focus on non-malignant pain and were completed with the oversight of separate expert advisory panels. CE programs have been developed for physicians, nurses, nurse practitioners, pharmacists and physician assistants based on the first monograph. An addendum to the first monograph updating the therapeutic agents available for pain management is in progress. CE programs have been developed for pharmacists and physician assistants based on the first monograph, and additional programs are in development for physicians, nurses, and nurse practitioners.

**Key Words:** pain, pain management, analgesia, quality of care, quality improvement, treatment, guidelines/treatment standards, pain assessment, chronic pain, non-malignant pain

**Partners:** Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

**Desire Additional Partners:**

**Comments on Partners:** May add other condition/disease or interest categories, such as minority health interests.

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**Year Added:** 2003

**Last Update:** 2005

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**ID:** NPC-002

**Status:** Currently ongoing

**Title:** NCCN pain management guidelines

**Description:** NPC worked to help NCCN develop their pain management guidelines for the treatment of chronic malignant pain (cancer-specific pain). As NCCN implements the guidelines, NPC receives feedback on the pharmaceutical use components and is assisting with input into guideline updates.

**Key Words:** pain, pain management, analgesia, quality of care, quality improvement, treatment, guidelines/treatment standards, pain assessment, chronic malignant pain, cancer pain

**Partners:** National Comprehensive Cancer Network (NCCN)

**Desire Additional Partners:**

**Comments on Partners:**

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**Year Added:** 2003

**Last Update:** 2005

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**ID:** NPC-003

**Status:** Currently ongoing

**Title:** NCCN breast cancer therapies project

**Description:** NPC is working with NCCN to better understand how newer breast cancer and adjuvant pharmaceutical therapies are being used in large academic medical centers versus community cancer centers, as well as utilization patterns and their rates of adoption.

**Key Words:** breast cancer, academic medical centers, community cancer centers, utilization

**Partners:** National Comprehensive Cancer Network (NCCN)

**Desire Additional Partners:**

**Comments on Partners:**

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**Year Added:** 2003

**Last Update:** 2005

**ID:** NQF-001

**Status:** Completed and ongoing

**Title:** "Voluntary Consensus Standards and Associated NQF Activities Relating to Therapeutics"

**Description:** NQF has endorsed voluntary consensus standards on the following topics, which include standards relating to the appropriate use of therapeutics: Hospital performance measures, nursing home performance measures, diabetes performance measures, patient safety practices, and serious reportable adverse events.

The following consensus projects are in progress as of January 2005: Home health care performance measures, cancer care performance measures, and ambulatory care performance measures.

In addition, NQF has ongoing activities (not consensus projects) relating to: the appropriate use of evidence-based treatments for substance use disorders; performance measures relating to asthma and medication management in children.

**Key Words:** voluntary consensus standards, performance measures

**Partners:** All NQF member organizations (including consumer, purchaser, provider/health plan, and research/quality improvement organizations) are current partners.

**Desire Additional Partners:**

**Comments on Partners:** Additional partners welcome to participate in dissemination of the core set of practices and products/formats to stimulate implementation

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**Year Added:** 2002

**Last Update:** 2005