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## **Journal Details QIO Work to Improve Medicare Drug Therapy**

**Washington, DC** – State by state details of how America’s Quality Improvement Organizations are working in partnership with Medicare Part D prescription drug plans (PDPs) and Medicare Advantage plans (MA-PDs) to improve the quality of prescription drug therapy for Medicare beneficiaries are reported in a supplement to the July/August *Journal of Managed Care Pharmacy*. The new QIO assignment was started in August 2006 under a congressional requirement in the Medicare Modernization Act of 2003.

The supplement, “Medicare Quality Improvement Organizations’ Ambulatory Drug Therapy Improvement Activities and Partnerships with Medicare Part D Prescription Drug Plans and Medicare Advantage Plans,” describes the national effort and showcases state by state projects conducted by QIOs in conjunction with PDPs and MA-PDs to improve the use and delivery of prescription drugs. It is available at: <http://amcp.org/data/jmcp/July%20B%20Supplement.pdf>.

“According to the IOM, every year a half million adverse drug events occur among ambulatory Medicare enrollees, including 180,000 life-threatening or fatal events. This supplement describes how QIOs and Medicare drug plans are working together to reduce the risk of unintended harm,” said David Schulke, Executive Vice President of the American Health Quality Association (AHQA). AHQA represents the national network of QIOs.

“As this supplement shows, drug benefit plans and QIOs are cooperating in very innovative projects to improve the quality of care for Medicare beneficiaries,” said Judy Cahill, Executive Director of the Academy of Managed Care Pharmacy, publisher of the journal. “Both managed care pharmacy and beneficiaries are benefiting from this kind of assistance to improve the therapeutic and financial value of the drug benefit.”

QIOs were allowed great latitude by the Centers for Medicare & Medicaid Services to develop the initial projects, resulting in a wide array of inventive community-based efforts involving MA-PDs and PDPs. Partners recruited to work on these projects include managed care, hospital, and community pharmacists; pharmacy associations; medical societies; colleges of pharmacy; and long term care facilities. Project examples include:

- QIOs in eleven states are working to promote safer alternatives to use of drugs known to be more likely to produce adverse effects in the elderly population.
- QIOs in eight states are focusing on improving medication use by people with diabetes, a major source of death and chronic illness in the Medicare population.
- QIOs in seven upper Midwestern states are pooling resources and leveraging existing partnerships through a multi-state collaborative to educate both providers and beneficiaries with high medication use about drug plan Medication Therapy Management (MTM) programs.
- Several QIOs are receiving medical and pharmacy data directly from health plans to report quality performance and spur competition over quality performance.
- One QIO is linking professionals in different care settings to improve medication reconciliation at hospital admission with pharmacist follow up of hospital discharge orders.

To locate the QIO in each state, visit: [http://www.ahqa.org/pub/connections/162\\_694\\_2450.cfm](http://www.ahqa.org/pub/connections/162_694_2450.cfm)

*About AHQA: AHQA is dedicated to improving the safety and effectiveness of health care. AHQA represents the national network of QIOs that work with hospitals, medical practices, long-term care facilities, home health agencies, health plans, pharmacists, and employers to encourage the spread of best clinical practices and improve systems of care delivery. Find your local QIO at: [www.ahqa.org](http://www.ahqa.org)*