



Aligning for Impact: Faculty & Practitioners Advancing Community Pharmacy Practice

May 14, 2025

A Special Thanks for the Collaboration!

American Association of
Colleges of Pharmacy **AAACP**

Agenda

- **Welcome!**
- **ACT: Where have we been and where are we going?** - Melissa Somma McGivney
- **CPEsn USA Update** - Cody Clifton
- **CPEsn Leadership Initiative Overview** - Tiffany Capps and Madeline Clark
- **CPEsn Payer-Partner Success Highlights** - EJ Stoepfel
- **Break – 5 minutes**
- **Highlight of Opportunities for ACT Champions to get involved with CPEsn Local Networks**
- **ACT Champion – CPEsn Local Network Collaboration Highlights**
- **ACT Champion with Local Network Leader Breakouts - Meet and Greet**
 - Get to know each other!
 - Understand Local CPEsn Network Happenings and Programs
 - Determine Next Steps
- **Wrap Up and Feedback**

Welcome!

- Goals for Today:
 - Have fun! Enjoy the passion that is shared in advancing community pharmacy practice.
 - Learn from each other.
 - Understand that we are all in this together.
 - Established or re-ignite relationships to foster further collaboration and partnership within local CPESN Networks and Schools/Colleges of Pharmacy.
 - Determine next steps

ACT: Where have we been and where are we going?

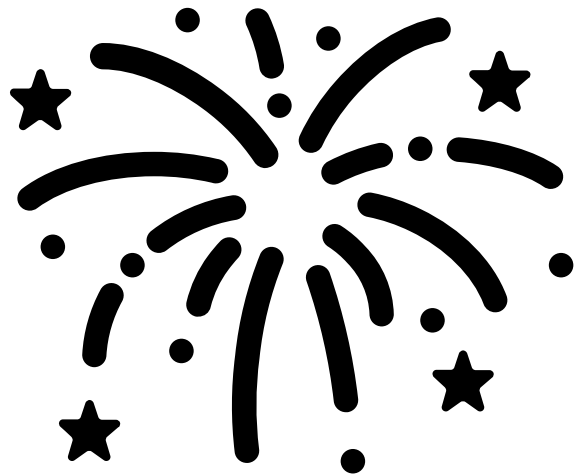
Melissa Somma McGivney

Academia-
Community
Transformation
ACT Pharmacy
Collaborative



Melissa Somma McGivney, PharmD, FCCP, FAPhA
Associate Dean for Student Success & Professional Initiatives
University of Pittsburgh School of Pharmacy
Chair, ACT Pharmacy Collaborative

American Association of
Colleges of Pharmacy **AAACP**



ACT
*(Academia-Community
Transformation)*
Pharmacy Collaborative

Celebrating 6 Years...and growing!

Academia-CPESN Transformation Pharmacy Collaborative

**BRINGING VISION TO LIFE:
TRANSFORMING
COMMUNITY PHARMACY
PRACTICE TOGETHER**



ABOUT THE COLLABORATIVE

The ACT Pharmacy Collaborative is an operational learning and ACTing collaborative between schools/colleges of pharmacy and clinically integrated networks of community-based pharmacies.

Collaborative Goal

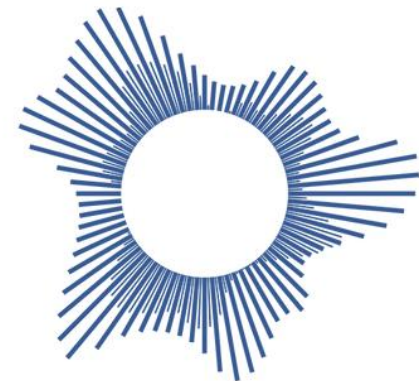
Support the transformation of community-based pharmacy practice from a product-based care model to a community-based pharmacy care delivery model



Unite



Mobilize



Amplify



ACT Pharmacy Collaborative

Open to all colleges/schools of pharmacy nationwide

Supported by:

American Association of
Colleges of Pharmacy **AACP**



University of
Pittsburgh
School of Pharmacy



**116
Schools/
Colleges
of Pharmacy**

[ACT Champions
www.actforpharmacy.com](http://www.actforpharmacy.com)



EXPECT MORE

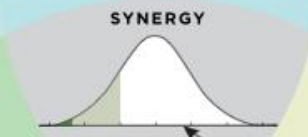
**Practice Transformation
Workflow Implementations
Scaling Innovation**

LED BY:
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www.flipthepharmacy.com



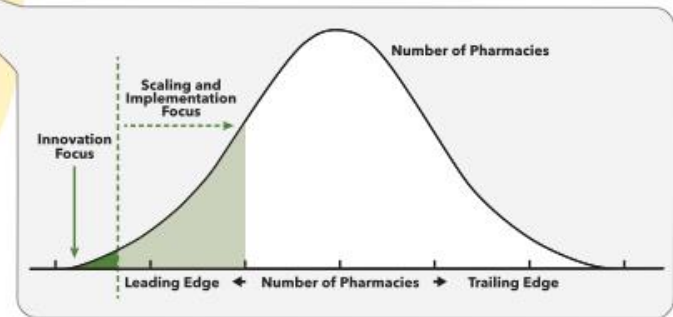
**Network Development
Quality Reporting
Payer Engagements**

LED BY:
The Pharmacy Providers Themselves
www.cpesn.com



**Learners as Innovators
Learners as Teachers
Teachers as Innovators**

LED BY:
Faculty from Colleges/Schools of Pharmacy
www.actforpharmacy.com



ACT Resources



Key Programs and Resources

November 2019:
National Day of Service

February 2020:
Resource: Blueprint for
Building a National
Partnership
Collaborative

November 2020:
Resource: ACT Patient
Case
Challenge/Workbook

November 2020:
Community Pharmacy
Practice Transformation
Workshop.

August 2021: ACT
Pharmacy Times article
series sharing resources
for practice
transformation

March-May 2021: ACT
National Match
Program for COVID-19
support

July 2022: Resource:
Nationwide Framework
for Community
Pharmacy Practice
Transformation

July 2022: Resource: 50
Stories from 50 States
Challenge



Signature Programs



- **ACT Champions**

- **2023-25 Initiatives:**

1. Community Pharmacy Student Scholars Program
2. Community Pharmacy Practice Transformation Educators Badge
3. College/School of Pharmacy “Centers of Excellence” Framework



CVS Pharmacy near campus to permanently close next month

By News Content Editor
January 31, 2023

The CVS Pharmacy located on Western Kentucky University's campus will permanently close at the end of February. Conveniently located across from the Kentucky Museum on campus, students have been getting their prescriptions filled at a pharmacy that is within walking distance of the dorms on campus.



There has been no comment on the official reason for the closing of the CVS Pharmacy released by CVS Pharmacy or WKU.

College Heights Herald



<https://www.actforpharmacy.com/pharmacy-closures>

Ways to Get Involved:

- Join monthly Zoom presentations and Webinars
- Invite Task Force members/Champions to consult with your pharmacy
- Engage in mini-workshops and committees throughout the year
- Faculty can also:
 - Share tools and resources via the AACP Connect Community

The Key Elements of Practice Redesign in Community Pharmacies



2024 Professional Affairs Committee

- Create an action plan outline academia's role in the clear and urgent need for the transformation of community pharmacy practice

2025 Professional Affairs Committee

- Finalize the *Key Elements* document and development SMART recommendations for its socialization and utilization for pharmacy academia and pharmacy employers

Representation included: CPESN, CVS, Kroger, Walgreens, Walmart, ACCP, APhA, ASHP, NCPA, and AACCP faculty

Key Elements of a Pharmacist Professional Practice: The Pharmacist Practice Management Ecosystem

ACT Pharmacy Collaborative Task Force,
2023-24 AACP Professional Affairs Task Force, and the
AACP Transformation Center

Next Steps: Community Focused Document

1. 2025 Pharmacy Quality Alliance Annual Meeting Presentation
2. 2025 NABP/AACP District 5 Meeting Presentation
3. June 2025 monthly ACT Pharmacy Collaborative Action Hour
4. 2025 AACP Annual Meeting: Standing Committee Reports Session

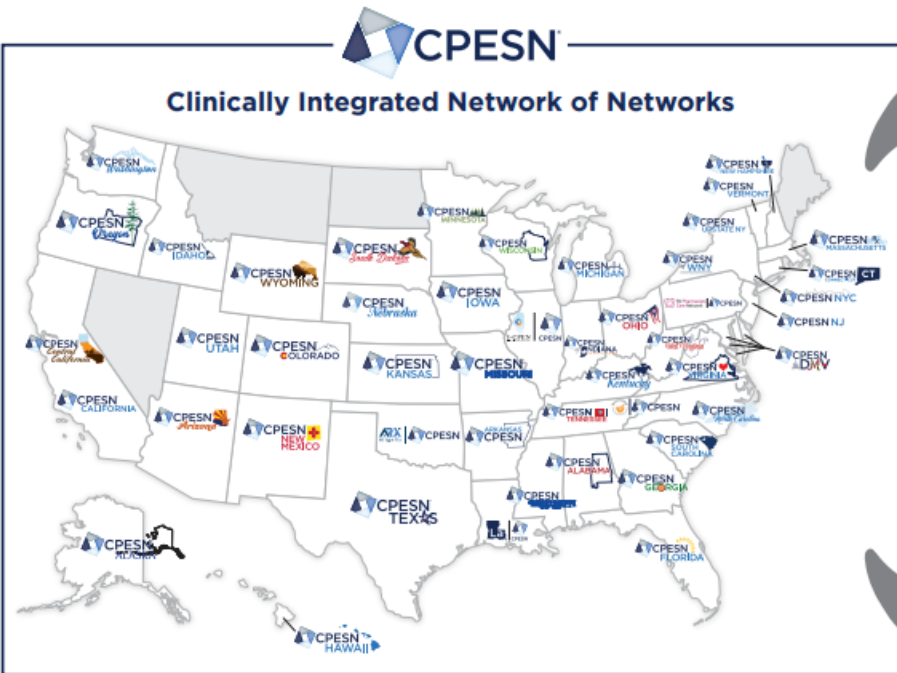
Socialization within pharmacy academia community pharmacy employers, and with various pharmacy organizations during the 2025-2026 academic year

Connect with us

- Reach out to the AACCP Transformation Center
- Get to know your ACT Champion
- Join a monthly ACTion Hour
- Collaborate with a student and faculty member on a project
- Get to know a regional Director of Experiential Learning
- Connect with/encouraging participation in a state legislative day




CPE SN USA Update

Cody Clifton



Pharmacist eCarePLAN INITIATIVE

- Technology Solutions Providers for the eCare Plan as of 2025
- 1/1/2024 – 5/5/2025:
2,479,191 eCare plans submitted!

Participants Technology Solution Providers <i>(TSPs for short)</i>	Products/Brands	Logo
Cost Effective Computers		
Datascan		
DocStation		
EnlivenHealth		
Liberty Software		
PrimeRx	PrimeRx	
Outcomes	Computer-Rx and Rx30	
RedSail	PioneerRx, BestRx, and QS/1	

Pharmacist eCarePLAN INITIATIVE

- In 2024 alone, at least one-third of payments CPESN pharmacies received for services were documented in the eCare Plan.
- In 2024, CPESN USA was recognized as a data aggregator for A1c Values that are sent to plans/payers via the eCare Plan.

CPESN Medical Billing Supports: CPT Summary



- 4 Technology Solutions Providers for CPESN Medical Billing Supports
- Since 2024, 30,267 medicals claims submitted
 - Paid or Accepted claims: 27,577
 - Partially denied or denied claims: 3,628
- Paid or Accepted Claims are from 9 states and 40 pharmacies

CPESN Leadership Initiative Overview

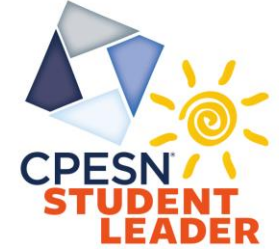
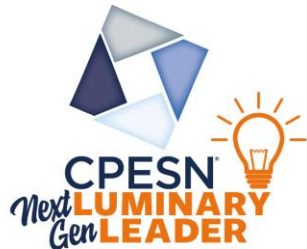
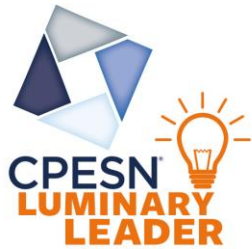
Tiffany Capps and Madeline Clark



CPESN[®]

Leadership Initiative

Innovating. Scaling. Sustaining.

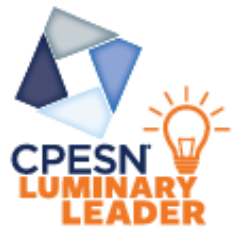


Lead: Tiffany Capps (tcapps@cpesn.com)

CPESN Leadership Initiative

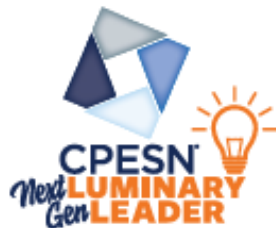
- Celebration initiative by CPESN USA, dedicated to recognizing leadership and contributions to the advancement of community pharmacy sustainability and practice
- Participants will track their efforts and contributions and earn pharmacy outcomes (i.e. tokens/points) through engagement efforts within five key leadership programs

CPESN Leadership Groups



USA Luminaries Serve on the USA Board and Committees

Network Luminaries Serve the Local or Special Purpose Network Boards and Committees



Next Generation Luminaries are Residents, Fellows and Practicing Pharmacists Charting New Practice and Payment Models



Non-Pharmacist Workforce or Advocates of Community Pharmacy Practice

Develop New Roles and Responsibilities for New Practice and Payment Models



Faculty and Staff at Schools and Colleges of Pharmacy who are Committed to Advancing Community Pharmacy Practice – and Proud of It!



Learners are Students Learning to Become Community Pharmacist Practitioners

Earn and Collect Pharmacy Outcomes



- Track your progress and earn rewards!
- Recognition Levels: Leaders, Builders, Change Agents, and All-Around Champions

**Your involvement isn't just valuable —
it's measurable.**

Pharmacy Outcomes Types

- **Mortar and Pestle:** For achievements creating new or improving existing pharmacy operations, workflow, and SOPs that advance patient care.
- **Megaphone:** For publications, presentations and public speaking engagements that extoll the value and virtues of community pharmacy practice.
- **Syringe:** For implementing new pharmacy services provided principally by non-licensed staff. (e.g., pharmacy technician led screening)

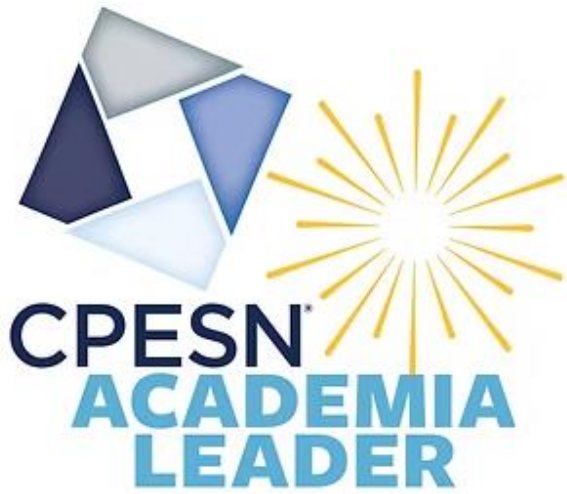
Pharmacy Outcomes Types

- **Calendar:** For building or improving a successful medication synchronization service or appointment based service.
- **Coaches' Whistle:** For mentorship of others with a passion for advancing community-based pharmacy practice
- **Stethoscope:** For implementing team-based clinical services by a non-pharmacist, licensed provider. (e.g., physician co-location)

Pharmacy Outcomes Types

- **Prescription Pad:** For advancements in pharmacists as providers of billable healthcare services. (e.g., pharmacist provider service)
- **Advocacy:** For membership and participation in Associations and otherwise engaging in advocacy efforts.

Leaderboard



Megan Smith

Total Pharmacy Outcomes Earned
80

Kelsey Hake

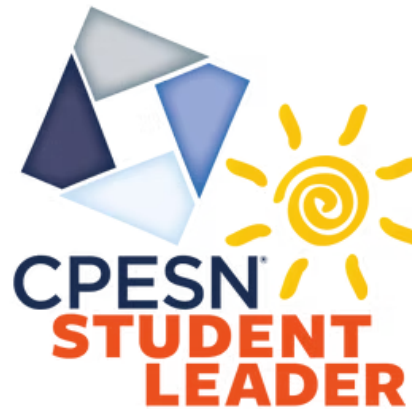
Total Pharmacy Outcomes Earned
33

Kendall Guthrie

Total Pharmacy Outcomes Earned
28

Jes

Total



Summer Roesch

Total Pharmacy Outcomes Earned
31

Emily Fisher

Total Pharmacy Outcomes Earned
25

Janki Patel

Total Pharmacy Outcomes Earned
22

Mollie Vergara

Total Pharmacy Outcomes Earned
19

Rewards and Recognition

- Top scoring participants will be recognized during the NCPA Annual Convention
- Examples of rewards include:
 - Invitations to the CPESN USA Mid-Year Leadership Meeting (including hotel)
 - Swag, trophies, and digital badges
 - Exclusive leadership development opportunities

CPESN Leadership Recognition Cycle

- The period in which participants can earn and collect outcomes runs from September 1, 2024 through August 31, 2025
- A new recognition cycle will reset on September 1, 2025

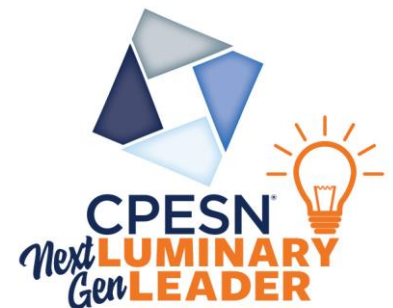
How to Get Started

- Sign up at www.cpesnleads.com or scan the QR code
- Enroll under one of the five leadership programs that best fit your role
- Start collecting your outcomes!



CPESN Next Gen Luminary Leader

- **Target Audience:** New(er) practitioners, generally within 10 years of graduation (however, no one is excluded!)
- **Engagement Opportunities:**
 - Monthly meetings on topics requested by members
 - LinkedIn page for discussions
 - Mentorship and support pathway into leadership with local network



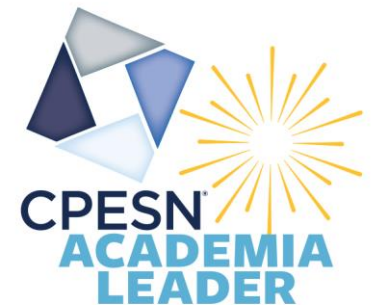
CPESN Student Leader

- **Target Audience:** Student Pharmacists (P1-P4)
- **Engagement Opportunities:**
 - Monthly calls to share information about innovative community practice to students
 - Connection to local networks and with NCPA Student Chapters
 - Introduction to CPESN structure, and the value-based healthcare marketplace



CPESN Academia Leader

- **Target Audience:** Community-Based Pharmacy Faculty, specifically, ACT Champions
- **Engagement Opportunities:**
 - Recognize and engage with ACT Champions and Academia Leaders advancing community pharmacy with CPESN Networks and CPESN Pharmacies
 - Engage with CPESN Student Leaders at their schools/colleges of pharmacy



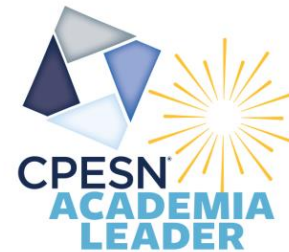
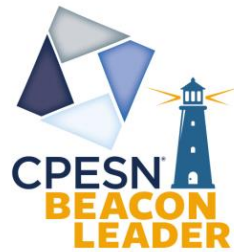
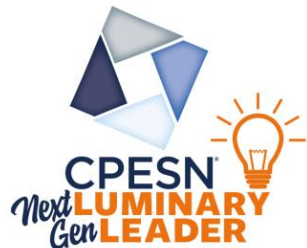
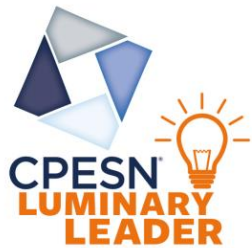
CPESN Beacon Leader

- **Target Audience:** Pharmacy Technicians and support staff actively engaged in community-based pharmacy practice
- **Engagement Opportunities:**
 - Monthly meetings on matching topics with Next Gen – from a Beacon role
 - Collaboration and knowledge sharing with resources created BY support staff FOR support staff
 - Support in gaining familiarity with CPESN mission and processes





Scan QR Code to sign up and start earning points today



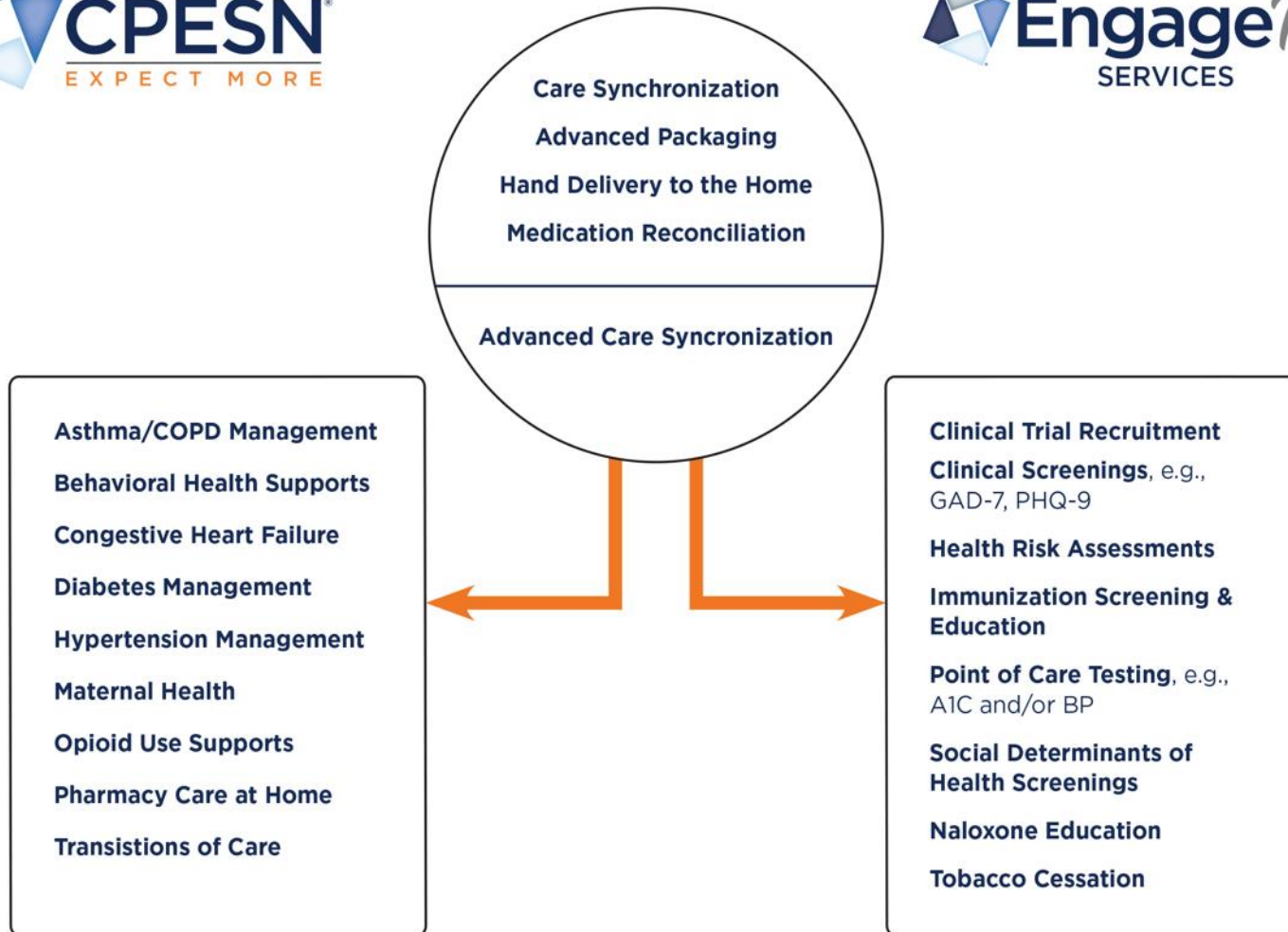
Contact: tcapps@cpesn.com



CPESN Payer-Partner Success Highlights

EJ Stoepfel

Standard Service Offerings



EXPECT MORE

2024 In Review

- Payer Program Growth
 - Local network program growth in opportunity
 - Programs scale across multiple networks
- Local relationships drive success

Local network program with a Medicaid Managed Care Organization showed **30%** reduction in overall inpatient hospitalization costs.

Local network program with a Medicaid Managed Care Organization showed a **18%** reduction in overall Emergency Department costs with members utilizing CPESN pharmacies.

Pharmacy Initiated Services Program

- Live in 5 states and growing
- Broad opportunity for pharmacies to identify patient needs and initiate services
 - Care coordination
 - Clinical medication synchronization
 - Nonmedical drivers of health assessments and referrals to health plan coordinated resources
 - Pharmacist led evaluation and management of acute conditions (i.e., test and treat)
- Care plan is the foundation of sharing with the payer:
 - Clinical activities
 - Type of activities as indicated by SNOMED codes
 - Evidence of intervention (billable encounter)

Gap Closure Program

- Live in 11 states and growing
- Fee for service opportunity plus performance bonuses
- CPESN pharmacies receive targeted gap list
- Care plan is the foundation of sharing with the payer:
 - Clinical activities
 - Type of activities as indicated by SNOMED codes
 - Evidence of intervention (billable encounter) and therefore eligible for performance bonus
 - Lab values that close care gaps!

Evidence of Success

With CPESN[®] Networks

Local network program with a Medicaid Managed Care Organization showed **30%** reduction in overall inpatient hospitalization costs.



CPESN Pharmacies Reduced Overall Hospitalization Costs with a Medicaid Managed Care Organization (MCO)

What the pharmacy needed to do?

- Pharmacy staff to engage MCO identified at risk patients for:
 - Medication Adherence and MCO goals*

How the activity was documented/billed

- eCare plan documentation used as evidence of engagement and/or intervention and to invoice/bill the MCO.

How and how much pharmacies were paid

- Fee for Service per member for initial encounter and follow up with the pharmacist
- VBC incentives for HEDIS gap closures*

The impact of the program:

- MCO reported a 30% reduction in overall hospitalization costs

How success was measured

- Member-level and network level performance measured by the MCO



Evidence of Success

With CPESN® Networks

Local network program with a Medicaid Managed Care Organization showed a **18%** reduction in overall Emergency Department costs with members utilizing CPESN pharmacies.



Medicaid Managed Care Organization (MCO) and CPESN Pharmacies Reduce Overall ER Visits

What the pharmacy needed to do?

- Disease state management with MCO identified at risk patients with prescriptions for diabetes, cardiovascular disease (CVD), asthma and COPD

How the activity was documented/billed

- eCare plan documentation used as evidence of engagement and/or intervention and to invoice/bill the MCO.

How are pharmacies paid?

- Paid based on eCare documentation.*

The impact of the program

- MCO reported reduction in overall ER visits by 18%

The hurdles to overcome with the pharmacies

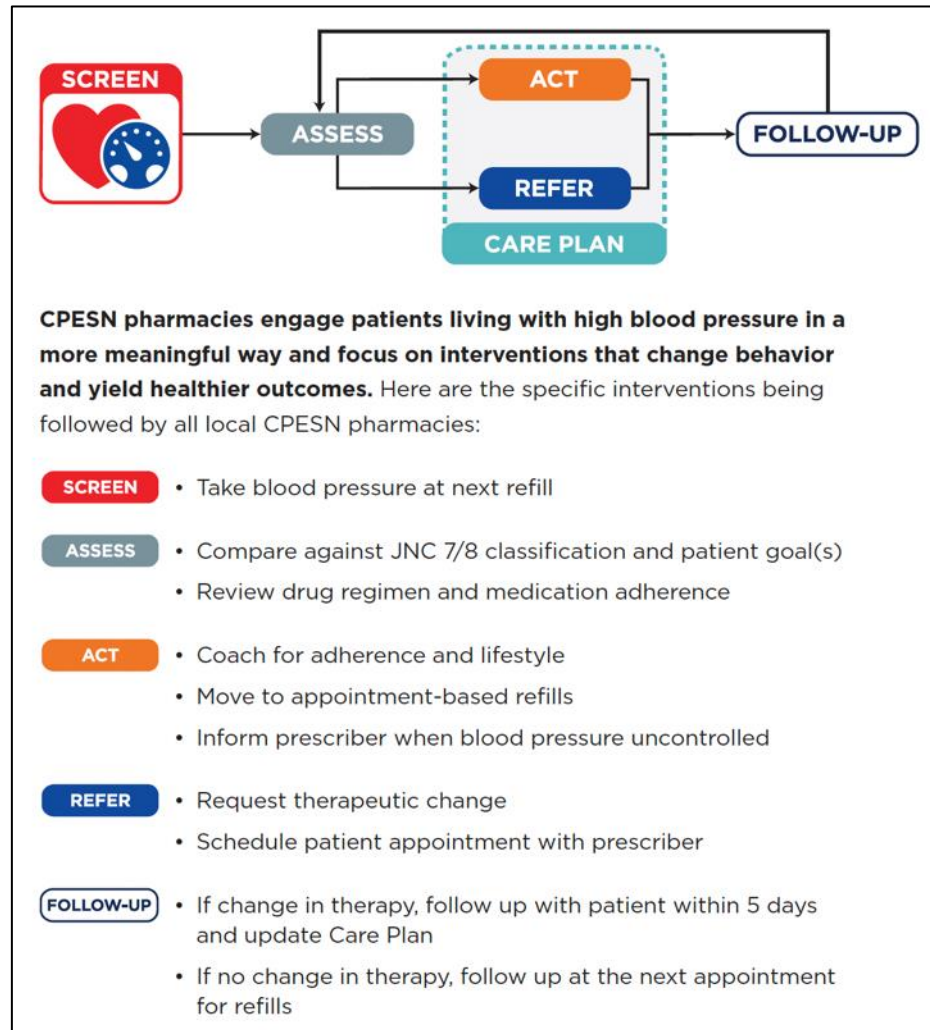
- Staff training for eCare use and documentation initially

Medical Billing + Gap Closure

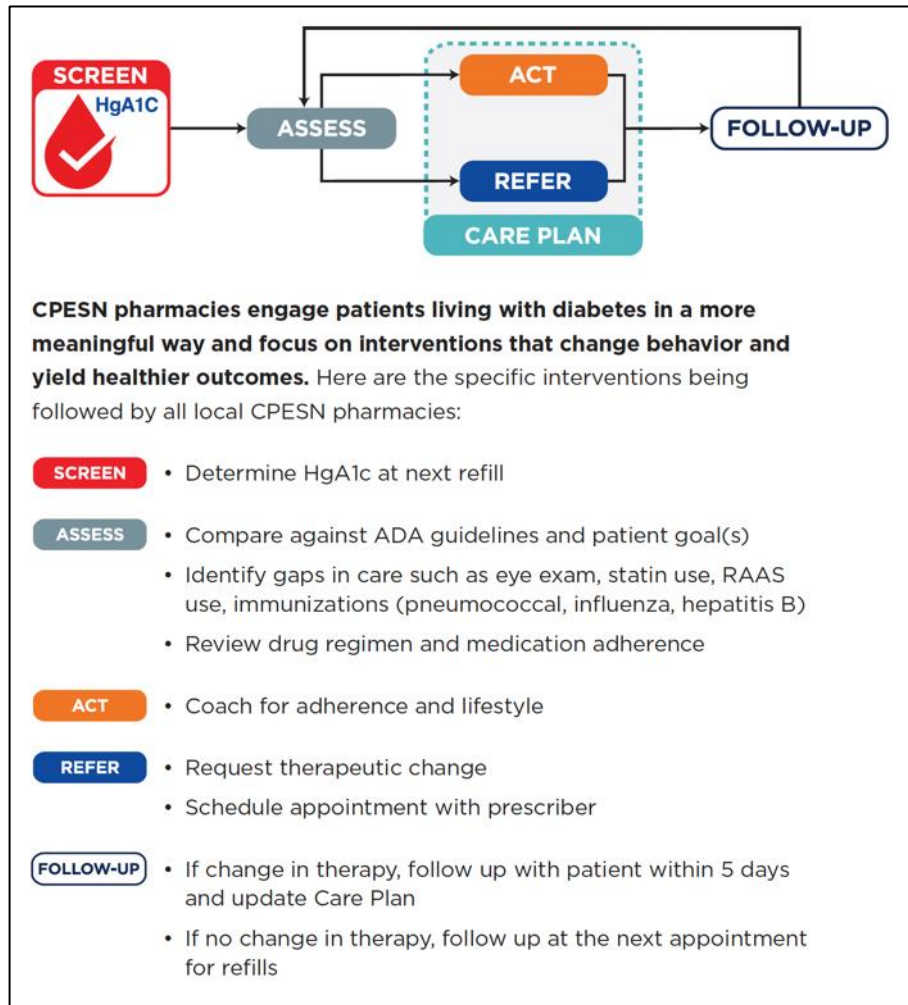
- Growth trend in these types of programs
- Medical billing opportunities state dependent (i.e., E&M codes, MTM codes, etc.)
 - Fee for service
 - CPT codes
- CPESN pharmacies receive targeted gap list
- Bonus opportunities for gap closure
- Care plan is the foundation of sharing with the payer:
 - Quality assurance
 - Clinical activities
 - Type of activities as indicated by SNOMED codes

Resources/References

CPESN[®] Hypertension Management



CPESN[®] Diabetes Management



Highlight of Opportunities for ACT Champions to get involved with CPESN Local Networks

ACT Champion – CPESN Local Network Collaboration Highlights

Aligning for Impact: Faculty & Practitioners Advancing Community Pharmacy Practice

May 14, 2025

Stephanie McGrath, PharmD

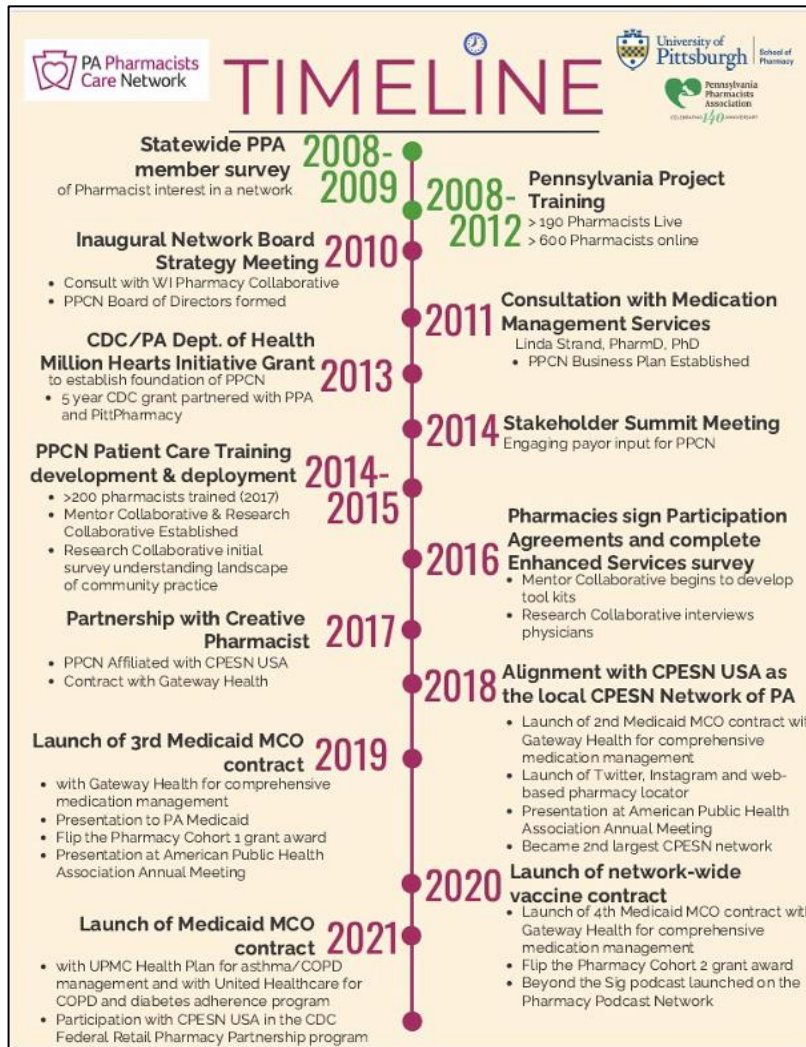
Executive Director, PA Pharmacists Care Network, Director of Strategic Partnerships, University of Pittsburgh School of Pharmacy

Sydney Stawarz, PharmD

Community Pharmacy Leadership & Research Fellow
University of Pittsburgh School of Pharmacy



Pennsylvania Success Story



- Grant supported collaboration lead by University of Pittsburgh, in partnership with PPA and 6 other schools of pharmacy
- Training developed as first credentialing mechanism
- Flip the Pharmacy grants support practice transformation
- University of Pittsburgh supports the implementation and evaluation of PPCN programs

PPCN Interns

- Pharmacy Outreach
 - Weekly communications with PPCN pharmacy teams.
 - Collect qualitative data (patient stories)
 - Report back pharmacy team feedback and questions to PPCN leadership
- Social Media Posts
 - Member Spotlight Posts
- Pharmacist eCare Plan Data Analysis
 - Draft summarized reports for payers

Collaborations with Student Pharmacists

- University of Pittsburgh's Community Leadership and Innovation in Practice Area of Concentration (CLIP ARCO)
 - Rising P3 student pharmacists
 - Courses
 - Summer Research Course
 - Elective courses focusing on community leadership and implementing pharmacy innovations
 - Special Topics (Scholarly Project)
 - APPE Rotations
 - Community Pharmacy Leadership Elective APPE
 - Advanced Community Practice Rotation

Student Project Example



Community Pharmacist-Provided Adherence Services through a Payer Contract with a Medicaid Managed Care Organization

Alayne Gaghan¹, Sydney Stawarz¹, Stephanie McGrath^{1,2}, Kim Coley¹

¹University of Pittsburgh School of Pharmacy, ²Pennsylvania Pharmacist Care Network



OBJECTIVE RESULTS

To describe the utilization of medication adherence services provided across a clinically integrated network (CIN) of community pharmacies as part of a Medicaid Managed Care Organization (MCO) payer contract in Pennsylvania.

- 98 Unique Pharmacies
- 36,215 Patient Care Encounters
- 30,745 Adherence Services Provided
- 5,544 Unique Patients
- 3,114 Patients Received Med Sync
- 2,893 Patients Received Med Rec
- 1,142 Patients Received Adherence Packs
- 3,158 Patients Received Home Delivery

BACKGROUND

- Nationwide, CINs are establishing MCO contracts to receive payment for patient care services, including the provision of medication adherence services.
- The Pennsylvania Pharmacist Care Network (PPCN) is a statewide CIN of over 200 community pharmacies that deliver patient-centered care in their communities.
- Previous research has shown that adherence rates increase in patients receiving adherence services compared to controls.
- As part of a Medicaid MCO contract, PPCN pharmacists are providing medication adherence services.

METHODS

- This was a retrospective study of existing Pharmacist eCare plan data from August 2022 through December 2023 from the multi-service payer contract.
- To be eligible as an adherence encounter at least one adherence service must have been provided and payment must have been collected.
- eCare plan data included fields such as pharmacy NPI, encounter start date, unique patient identifier, adherence service type (Figure 1), and payment.
- De-Identified data analyzed with descriptive statistics included
 1. Number of unique patients receiving each adherence service
 2. Percentage of patients receiving one, two, three or four services.
 3. Geographic distribution of these services across the coverage area
 4. Frequency that each service was provided to patients by month
- SPSS was used to characterize the data.
- This project was designated as not human subjects research by the University's IRB.

Figure 1: Adherence Services Provided

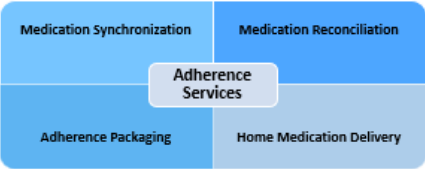


Figure 2: Percentage of Patients Receiving Multiple Services

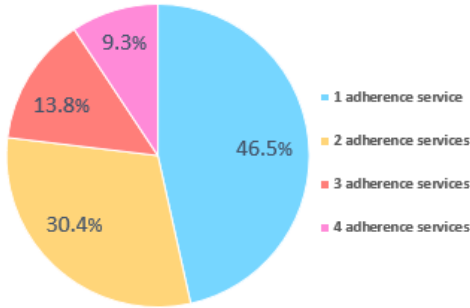
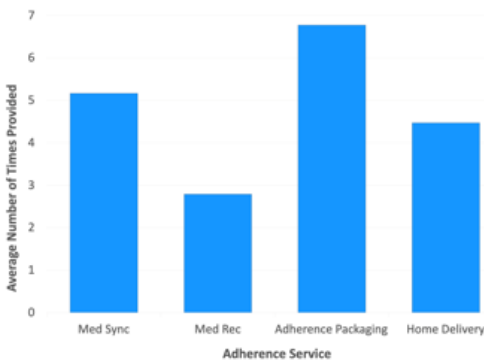


Figure 3: Average Number Each Adherence Service was Provided



This work was supported in part by a grant from the Community Pharmacy Foundation.

RESULTS

Figure 4: Patient Care Adherence Encounters per County

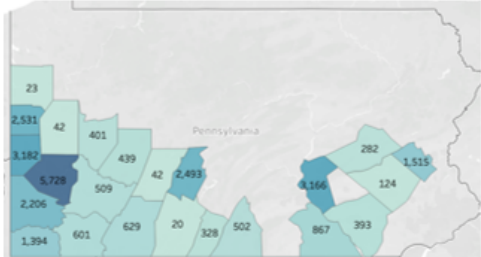
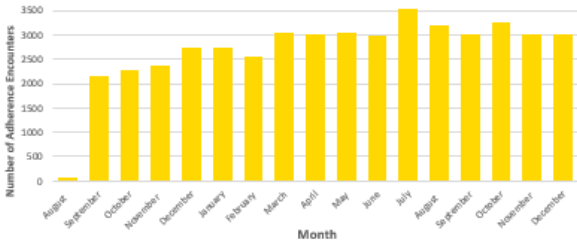


Figure 5: Adherence Services Provided per Month



CONCLUSIONS

- The high volume of adherence services provided by community pharmacies through a Medicaid MCO payer contract demonstrates the need for these services in this population.
- Approximately 54% of patients received multiple types of adherence service.
- Community pharmacies delivered a sustained level of adherence services over time.
- This data will support ongoing research assessing the impact of these services on medication adherence rates.



Pharmacist Fellow Project Example



Impact of Community Pharmacist-Provided Enhanced Patient Care Services in a Medicaid Population

Sydney H. Stawarz, PharmD¹, Stephanie H. McGrath, PharmD^{1,2}, Levent Kirisci, PhD¹, Kim C. Coley, PharmD, FCCP¹
 University of Pittsburgh School of Pharmacy¹
 The Pennsylvania Pharmacists Care Network²

OBJECTIVE

To evaluate the impact of community pharmacist-provided patient care services that are part of a Medicaid Managed Care Organization (MCO) payer contract on metrics including medication adherence, naloxone dispensing and education, and COVID-19 vaccinations.

BACKGROUND

- Community pharmacies around the country have organized as clinically integrated networks to facilitate the expansion of enhanced patient care services by contracting with payers.
- The Pennsylvania Pharmacists Care Network (PPCN), a statewide clinically integrated network established a contract with a Medicaid MCO in 2022 to provide enhanced services to qualifying patient members (see Figure 1).

Figure 1. Services Provided through PPCN and MCO Contract

Medication Synchronization	Medication Reconciliation
Medication Adherence Packaging	Home Medication Delivery
Naloxone Dispensing and Education	COVID-19 Vaccinations

- PPCN pharmacists document these services in the Pharmacist eCare Plan (PeCP) to facilitate longitudinal patient care and for reimbursement purposes.
- This research will be the first to link PeCP data with claims data to provide a more robust evaluation of adherence, naloxone dispensing and education, and COVID-19 vaccine gap closures.

METHODS

- This is a quasi-experimental, retrospective cohort study of patients participating in the PPCN Medicaid MCO multiservice payer program.
- Patients are Medicaid recipients who received at least one enhanced patient care service during the 17-month intervention period (August 2022 through December 2023) as documented in the PeCP.
- This project linked PeCP data from PPCN pharmacies with claims data from the Medicaid MCO using a unique patient identification code (see Figure 2).

Figure 2. Data Sources for Analysis



- Descriptive statistics were used to analyze both the PeCP and claims data for the naloxone dispensing and education and COVID-19 vaccine gap closures.
- SPSS was used to characterize the data.
- The University's IRB classified this project as not human subjects research.

METHODS

- Adherence was evaluated using the proportions of days covered (PDC) for the following medication classes:
 - Renin Angiotensin System Antagonists (ACE Inhibitors, ARBs, and Renin Inhibitors)
 - HMB-CoA Reductase Inhibitors (Statins)
 - Oral Diabetic Medications
- Claims data from a baseline period (August 2020 through July 2022) will be compared to the intervention period (August 2022 through December 2023) for medication adherence.
- PDC values will be calculated as continuous variables and paired t-tests will be utilized to assess medication adherence changes between the baseline and intervention periods.

PRELIMINARY RESULTS

- 7,440 unique patients received at least one enhanced patient care service across 99 unique pharmacy locations during the 17-month intervention period.

Figure 3: Naloxone Education and Dispensing Services during the Intervention Period

536 Naloxone Services Provided	425 Unique Patients Engaged	48 Unique Pharmacy Locations
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Figure 4: Characteristics of Patients Receiving Naloxone Services

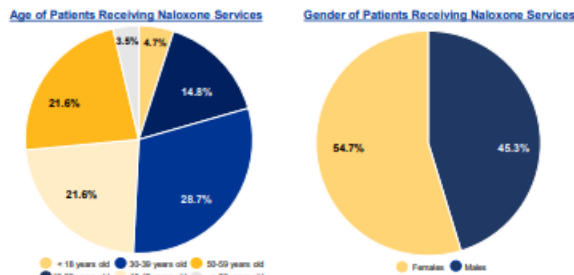
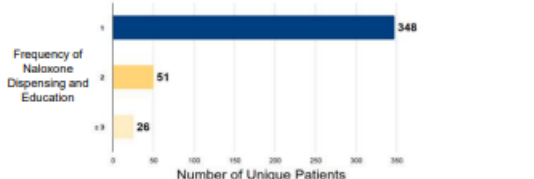


Figure 5: Frequency of Naloxone Services Per Patient



PRELIMINARY RESULTS

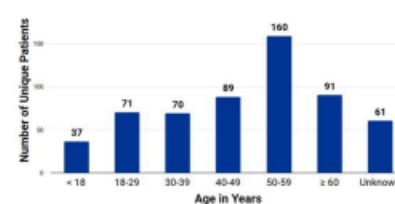
- Analysis of COVID-19 vaccine gap closures is ongoing as the research team continues to assess vaccines from the claims data.

Figure 6: COVID-19 Vaccination Services*

630 COVID-19 Vaccinations Administered	579 Unique Patients Engaged	60 Unique Pharmacy Locations
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*Only includes vaccinees documented in the PeCP data

Figure 7: Age of Patients Receiving COVID-19 Vaccination



- 30,745 adherence services were provided and documented in the PeCP during the intervention period. Analysis of PDC scores is ongoing.

Figure 8: Number of Unique Patients that Received each Adherence Service

Service	Number of Unique Patients
Medication Synchronization	3,114
Medication Reconciliation	2,893
Home Medication Delivery	3,158
Medication Adherence Packaging	1,142

IMPLICATIONS

- The results of this project will provide evidence on the utility of linking claims data with PeCP data to assist clinically integrated networks across the United States with evaluating pharmacy payer programs.
- Linking claims data with PeCP data may open new avenues for research including more robust evaluations of patient and pharmacy program outcomes.

ACKNOWLEDGEMENTS

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ACT Champion – CPESN Local Network Collaboration Highlights

Break out

Feedback and Next Steps

Next Steps

- Determine local follow-up.
 - Keep the momentum going!
- **ACT Champions / Faculty** - Receive a research interest form to complete.
- Receive Information on CPESN USA Processes for Data Share Agreements.