



NCC MERP Meeting
January 28, 2025
1:30 p.m. – 3:00 p.m.
Microsoft Teams

Attendees:

Matthew Grissinger (ISMP), Chair; Robert Campbell (JC), Vice Chair; Nakia Eldridge (USP), Secretariat; James McSpadden (AARP); Myong-Jim Kim (ACCP); Jennie Jarret (AMA); Holly Carpenter (ANA); Ann Gaffey (ASHRM); Allison Hill (APhA); Mary Ann Kliethermes (ASHP); Britney Pierre (IHI); Robert Feroli (MSOS); Eileen Lewalski (NABP); Tara Modisett (NASPA); Carolyn Ha (PhRMA); Donna Bohannon (USP); Rita Munley Gallagher; Christopher Jerry

Observers: Joshua Roemer (ISMP), Likitha Mamillapalli (ISMP), Jennifer Young (Guest Speaker), Mark Ainge (USP)

Opening, Procedural, and Administrative Matters

Matthew Grissinger called the meeting to order at 1:30 p.m. and welcomed everybody to the call. Nakia Eldridge called roll. The agenda was reviewed and approved. The minutes were then reviewed and approved without changes.

Secretariat Report

- **Chair and Vice Chair Elections.** Every two years NCC MERP makes an official call for nominations of Chair and Vice Chair. Please be on the look out for the official call to be sent to you via email with information on who can apply and how to apply.
- **30th Anniversary Report.** Next year, NCC MERP will be celebrating its 30th anniversary, which means it is time to update our report. Rita Gallagher and Debbie Melnyk have participated in the development and update of these reports over the years and offered to perform the initial review for this version. Be on the look out for a link to be sent to the group to work off the 25th year version.
- **Insurance Driven Formulary Changes.** Matthew Grissinger presented to the committee on the impact of formulary changes on patient safety and efficacy. For example, scenarios where the patient's medication treatment plan is changed primarily for insurance formulary related reasons (e.g. DOACs). The committee discussed:
 - the need for a patient-centric approach/ perspective
 - the need for the patient/consumer to know what to ask about their treatment plan and to understand their rights
 - the need to understand the cost of lack of efficacy and time going back and forth
 - consider the impact of marketing on the patients request for certain formulary itemsThe ask for the committee is to consider the best channel for NCC MERP communicate this topic (e.g. press release, recommendation).
- **Delegate Changes.**
- **Webpage Corrections.**

- **2024 Analytics.**

Recommendations / Statements Updates

Matthew Grissinger provided an update on the next set of recommendations and statements for review:

- *Statement Advocating for the Elimination of Prescription Time Guarantees in Community.* This was previously a contentious topic and remains an issue. ISMP reviewed and added some updated data to this statement. ASHP has recently addressed this issue in a policy and the NABP has addressed it in their Model Act. The ask is for the committee to review and provide any updated information.
- *Recommendations to Reduce Medication Errors in Non-Healthcare Settings.* David Marx presented on this topic originally to ensure organizations address at-risk behaviors. The goal is to address why they are happening, share the need to decrease incentives, and highlight the risk of short-cuts and workarounds to safety. The committee discussed potentially addressing provider burn-out, substance use disorders, and over-time shifts but being careful of what is deemed a contributing factor. They discussed possible mitigating factors like safety walk-arounds, huddles, staffing, listening to the patient, and just culture.
- *Statement of Drug Shortages.* ISMP fellow gathered recommendations and drafted a rough draft for the committee to consider. ASHP and USP have presented to Congress and the White House around supply chain challenges and mitigation efforts. The committee should review and consider what is the suggestion and the value of this statement. Please provide thoughts for next meeting to discuss.

Quarterly Topic

- **White / Brown/ Clear/ Gold Bagging.** Matthew Grissinger presented to the committee on the impact of formulary changes on patient safety and efficacy. For example, scenarios where the patient's medication treatment plan is changed primarily for insurance formulary related reasons (e.g. DOACs). The committee

Roundtable Sharing

- ISMP

Closing: Meeting adjourned.