Time	Opportunity Number	Project Title
10:30 AM	24.15	University of Colorado Predicting Operational Sustainability and Patient and Pharmacist-level Effects for Retail Pharmacies (PROSPER)
11:00 AM	24.100.8	Colorado Department of Health Care Policy and Financing (HCPF) DA Medicaid Enrollment Transition

10:30 AM – 24.15, UNIVERSITY OF COLORADO

Predicting Operational Sustainability and Patient and Pharmacist-level Effects for Retail Pharmacies (PROSPER)

Identifiable Extract

Specific Research Questions:
- Aim 1. Identify and assess the drivers of pharmacy closures. In this aim, we will model pharmacy revenue, gross profit, and net income using pharmacy claims and net cost estimates.
- Aim 2. Measure the effects of pharmacy closures on patients. In this aim, we will assess the impact of pharmacy closure on patient out-of-pocket costs and estimate changes in travel time and distance and access to pharmacy services by constructing a cohort of patients with exposure to a pharmacy closure compared to patients who were not exposed to a pharmacy closure using Colorado APCD claims data and National Council for Prescription Drug Programs (NCPDP) pharmacy licensure data. https://www.ncpdp.org/

Methodology:

Aim 1. Analysis Plan. In the base-case pharmacy-level analysis, we will compare annual data on patient-, pharmacy-, and community-level factors for active and closed pharmacies over the period of 2018-2022. We will conduct descriptive analyses for all outcome variables and covariates of interest to first provide a summarized overview of our data stratified by closed and active pharmacies. Reviewing the descriptive statistics measures of central tendency, dispersion, and data distribution will inform our subsequent model for our primary outcomes (Equation 1).

Equation 1: $OperatingStatus_{p,t} = \alpha + \beta X_{p,t-1} + \gamma Year_t + \varepsilon_{p,t}$

We will use logistic regression for our main model with a primary outcome operationalized as a binary variable (closed vs. active pharmacy). In this equation, $\boldsymbol{OperatingStatus_{p,t}}$ is a dichotomous variable for whether pharmacy "p" closes during a given year "t". $\boldsymbol{\alpha}$ is the intercept (constant term). $\boldsymbol{X_{p,t-1}}$ represents a vector of lagged covariates including variables for prescription utilization mix, payer mix, patient & prescriber characteristics, and pharmacy operational variables for each pharmacy during the prior year. $\boldsymbol{\beta}$ is a vector of coefficients corresponding to the covariates in $\boldsymbol{X_{p,t-1}}$. $\boldsymbol{Year_t}$ is a vector of year fixed effects to account for time-varying effects such as the COVID-19 pandemic. $\boldsymbol{\gamma}$ is a vector of coefficients corresponding to the year fixed effects. $\boldsymbol{\varepsilon_{p,t}}$ is the error term and we will cluster standard

errors at the pharmacy level. The model will be assessed for prediction discrimination, calibration, and overall performance.

11:00 AM – 24.100.8, HCPF

DA Medicaid Enrollment Transition

Limited Extract

Specific Research Questions:

To help the Department understand the transition of Medicaid members to other insurance coverage due to Medicaid unwinding. The Department has been working to assist members transition to other coverage when they are no longer eligible. The Department will use this information to measure how successful we have been in these efforts. In addition, the Department can use the report to understand how many of our members have other coverage while on Medicaid. The Department requests that the report start with the Departments May 2023 enrollment files sent to the Colorado APCD, and then track coverage on a monthly basis for one year (final comparison of the May 2023 data would be done for June 2024). Then repeat the process for each consecutive month.

Methodology:

Data will be used from the Eligibility table in the Colorado APCD that includes Medicaid enrollees. The goal is to report movement of termed Medicaid members as of May 2023. The dataset will allow the Department to report on termed Medicaid members and if they enroll in Commercial (Exchange or Non-exchange), Medicare Advantage, Medicare FFS, and Dual Eligible plans.