



¹Nikhil Bhatia, MBA/PharmD Candidate; ²Paula Eichenbrenner, MBA, CAE; ²Julia Marsh; ²Vyishali Dharbhamalla, PharmD; ³Laura Happe, PharmD, MPH; ⁴David Singer, PharmD, MS; ⁴Karen Worley, PhD; ⁴Amber Small, PharmD, RPh
¹University of Georgia, ²AMCP Foundation/AMCP, ³Journal of Managed Care and Specialty Pharmacy (JMCP), ⁴AMCP Foundation/AMCP Joint Research Committee

Background

The managed care pharmacy research agenda¹ established by AMCP and AMCP Foundation describes four areas where additional evidence will enhance managed care decision-making. These pillars are: **Real-World Evidence (RWE)**, including **Health Equity**²; **Value-Based Decision-Making**; **Benefit Design**, including **Utilization Management (UM)**; and **Patient Care**. The research agenda was published by the AMCP/Foundation Joint Research Committee (JRC) in the *Journal of Managed Care and Specialty Pharmacy (JMCP)*.³

Research communications evaluated in this study were reviewed and accepted by JMCP following standard procedures. Abstracts submitted for presentation underwent a two-tier peer-review process, with independent reviewers and a final review by a JMCP Editor. Manuscripts submitted for publication underwent editorial review by JMCP followed by a single-blinded peer review.

Objective

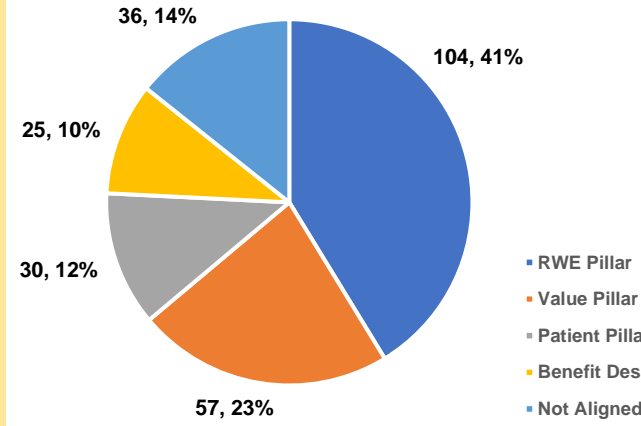
Evaluate the alignment of AMCP conference abstracts and JMCP research publications to the four pillars of the managed care pharmacy research agenda, in the period July 2020 – June 2022.

Methods

- Each publication was assessed in three rounds of alignment to improve consistency in pillar assignments, and to minimize reviewer bias.
- Reviewers consisted of three JRC volunteers who independently aligned abstracts to each pillar.
- The reviewers used a guidance document to help standardize alignment. Disputes were decided by the most senior reviewer.
- Professional and encore abstracts accepted by JMCP were mapped to the four pillars of the research agenda by JRC.
- This study reports alignment for the two-year period encompassing AMCP 2021, AMCP Nexus 2021, AMCP 2022, and AMCP Nexus 2022.
- Accepted manuscripts (including research, research briefs, and systematic reviews) were then mapped against the research agenda by JRC and JMCP Editorial Advisory Board (EAB) volunteers.
- This study reports on alignment for the period extending July 2020-June 2022.
- Alignment data were analyzed to identify proportional representation of each pillar.

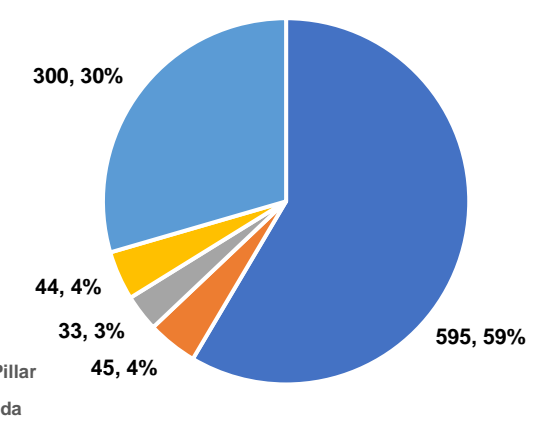
Results

Fig. 1 – JMCP Manuscript Alignment, June 2020-July 2022



- Total published research manuscripts = 252
- RWE pillar is highest proportion (41%), representing 104 out of 252 published papers
- Benefit Design/UM pillar is lowest proportion (10%), representing 25 out of 252 research manuscripts

Fig. 2 – Conference Abstract Alignment, 2021-2022



- Total conference abstracts = 1,017
- RWE pillar is highest proportion (59%), representing 525 out of 1,017 conference abstracts
- Patient Care pillar is lowest proportion (3%), representing 33 out of 1,017 conference abstracts

Discussion and Conclusions

- In both JMCP Manuscript Alignment and Conference Abstract Alignment, RWE contained the highest number of manuscript/alignment submissions, demonstrating the strong interest of researchers in sharing this type of evidence with a managed care audience.
- In JMCP Manuscript Alignment, the Value pillar had the second-highest proportion, as opposed to the Conference Abstract Alignment where the second-highest alignment consisted of abstracts had no alignment with the four pillars.
- In Conference Abstract Alignment, Value, Benefit Design/UM, and Patient Care pillars made up a combined 11% of all 1,017 conference abstracts, which could reflect less research being conducted in these areas, or researchers demonstrating stronger preferences to submit this type of work as a manuscript rather than an abstract.
- This study indicates that JMCP is accepting and publishing a more balanced array of research manuscripts than conference abstracts, with research papers distributed more evenly across the four pillars. This is appropriate because JMCP is scoped more specifically to "improve patient health through access to high-quality, cost-effective medications and other therapies," while conference abstracts address a wider variety of topics adjacent to managed care.
- Further evaluation is needed to understand the lower frequency of abstract submissions in the other three pillars, and what is driving the researchers to submit a higher volume of RWE.
- Future studies should evaluate the needs of the AMCP audience to determine the ideal distribution of research publications across the four pillars, which would inform development of strategies to increase representation of specific pillars.

Limitations

- With multiple reviewers, the likelihood of inherent bias increases and inter-rater reliability becomes more challenging⁴.
- Abstracts assessed in this study sample were submitted across two different years. Current managed care or environmental trends can influence author decisions for submissions, or influence criteria for acceptance.
- Conference abstracts in this study sample were submitted across four conferences held in different years with different themes and host cities. In addition, one conference (AMCP 2021) was held virtually. Conference logistics can influence presenter decisions for submission.

References

1. J Gembarski et al, "Top Evidentiary Gaps in Managed Care Pharmacy: A Research Agenda." *J Manag Care Spec Pharm* 2020 Apr;26(4):375-381.
2. D Brixner et al, "Advancing a managed care pharmacy research agenda: Generating real-world evidence to support US Food and Drug Administration Accelerated Approvals and improving benefit design to address health inequities." *J Manag Care Spec Pharm*, 2022 Aug;28(8):911-917.
3. JMCP Mission Statement and Guiding Principles. [Available online.](#)
4. Jeyaraman, M.M., Al-Yousif, N., Robson, R.C. et al. Inter-rater reliability and validity of risk of bias instrument for non-randomized studies of exposures: a study protocol. *Syst Rev* 9, 32 (2020). <https://doi.org/10.1186/s13643-020-01291-z>

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Contact us: nsb93172@uga.edu, paula@amcpfoundation.org, vdharbhamalla@amcp.org