

IMPLEMENTING SOLUTIONS 2.0

Building a Sustainable, Healthy, Pharmacy Workforce and Workplace



CONVENED BY:





Executive Summary

Building on the work they advanced in 2023 to improve working conditions affecting the mental health and well-being of pharmacists and pharmacy personnel, three national pharmacy associations convened the Implementing Solutions Summit 2.0: Building a Sustainable, Healthy Pharmacy Workforce and Workplace. The American Pharmacists Association (APhA), American Society of Health-System Pharmacists (ASHP), and National Association of Boards of Pharmacy (NABP) co-hosted the invitational summit on June 22-23, 2025, in Arlington, Virginia.

For years, pharmacy stakeholders have raised concerns about workplace conditions fueling stress and burnout across practice settings. Those concerns were the impetus for the initial summit in 2023. At that event, participants devised actionable solutions for employers, associations, boards of pharmacy, and individuals to implement within their circles of influence.

This year's summit built upon those recommendations, identifying the progress made and the remaining priorities for action. Attendees — more than 80 from across multiple practice settings — met to reassess the actionable solutions devised in the 2023 summit, consider whether they remain relevant, modify them as needed to address the current professional landscape, evaluate progress made to implement those solutions, and prioritize work still needed.

The summit addressed the original five themes that were central to the 2023 summit: practice advancement, technology and workflow efficiencies, workforce, mental health, and regulatory and legislative framework. For each theme, pre-selected attendees shared their successes in implementing solutions. Small groups were assigned solutions from the 2023 summit, guided by a pre-summit survey indicating where modification and further work is needed. After discussing the issues, participants reported key takeaways from their small-group discussions to the collective group.

Several reoccurring topics emerged from the event, including:

- Payment reform efforts must continue and will require unified messaging and data.
- Technology must be adopted strategically, balancing efficiency and trust.
- Educational alignment with pharmacy practice is critical to preparing and retaining a future workforce.
- Reducing overly prescriptive regulations will open the door to the use of new technologies, innovative practice models, and an expanded scope of practice for pharmacy technicians.
- Assessment of pharmacy workflows for redundant and burdensome tasks will allow for reimagined roles, new opportunities for pharmacy technicians, innovative technology applications, and reduced workload.

Based upon the information gathered through the summit, the host organizations developed a call to action, as follows:

- Create a central repository of information, including case studies, national studies, and success stories, to educate health-system executives and payers on the value of pharmacy services and a similar repository for boards of pharmacy to access information on new technology and innovative practice models.
- Evaluate pharmacy workflows — focusing on removal of non-value-added or redundant tasks, opportunities for technology to improve efficiency, and prioritization of patient care functions. Further, continue developing flexible work models and schedules and clear career pathways for all members of the pharmacy workforce.
- Foster an environment of psychological safety through a just culture approach to discipline, mental health training and resources, removing stigmatizing questions from applications, and prioritizing recovery and return to practice.
- Advocate for payment reform. Continue focusing on payer-specific, state, and federal efforts, and dedicate significant effort to ensuring consistency of messaging across the profession.
- Assemble tools and resources to aid pharmacy leaders in practice assessment, well-being and burnout measurement, and mental health services. Given that best practices and evidence-informed interventions are often based upon experiences in other health professions, continue to invest in pharmacy-specific research into interventions that impact well-being.

APhA, ASHP, and NABP have committed to ongoing collaboration and development of an organizational assessment tool to promote practices that support well-being. The broader pharmacy profession is encouraged to utilize the call to action and discussion herein to stimulate and guide meaningful action for workforce and workplace well-being.



Introduction

Patient care, high earning potential, and diverse job prospects are among the attributes that continue to draw individuals to careers in pharmacy. Half of the pharmacists surveyed for the *2024 National Pharmacist Workforce Study (NPWS)*, released in June 2025, said they would recommend pharmacy as a good profession/career. Despite its rewards, however, the pharmacy remains a stressful work environment. The *NPWS* reports that 73% of pharmacists working full-time in 2024 rated their workload as “high” or “excessively high,” while just under half of pharmacists somewhat or strongly agreed that their organization is committed to employee health and well-being.¹ Meanwhile, burnout is pervasive among pharmacists, leading to poor productivity, medication errors, and understaffing, as noted in the *2023 Pharmacy Times Burnout and Mental Health Survey*.² Additionally, the *Journal of the American Pharmacists Association* reported in 2022 that suicide rates are higher among pharmacists than in the general population.³

What will it take to improve workplace conditions, mental health, and well-being for pharmacists and pharmacy personnel? National pharmacy professional organizations continue to grapple with this question and considered several actionable solutions during the recent *Implementing Solutions Summit 2.0: Building a Sustainable, Healthy, Pharmacy Workforce and Workplace*.

Convened by APhA, ASHP, and NABP on June 22-23, 2025, the summit brought together over 80 pharmacy professionals from across all practice settings to share progress, explore challenges, and identify new strategies to improve workplace conditions for the pharmacy workforce [Appendix A].

As a follow-up to [a joint meeting held in 2023](#), the summit was conducted in response to persistent reports of challenging workplace environments and the ongoing stigma surrounding mental health support. Participants set out to reassess the actionable solutions devised in the 2023 summit, consider whether they remain relevant, modify them as needed to address the current professional landscape, evaluate progress made to implement those solutions, and prioritize work still needed.

Leaders at the summit acknowledged the emotional toll that high-stress work environments can have on pharmacists and pharmacy personnel and the need for safer, more supportive spaces where pharmacy professionals feel seen, valued, and able to ask for help without fear or stigma. The summit called for continued investment in mental health resources, peer support networks, and suicide awareness and prevention.

Background and Discussion

The convening organizations held the initial summit in 2023 based on concerns raised by members, nonmembers, and the profession’s stakeholders about workplace conditions and issues across practice settings. At that event, participants devised actionable solutions for employers, associations, boards of pharmacy, and individuals to implement within their areas of influence. This year’s summit built upon those recommendations, identifying the progress made and the remaining priorities for action. Participants from both the 2023 and the 2025 summits evaluated the original 56 actionable solutions via a survey conducted prior to the 2025 summit, noting whether the solution should be considered for discontinuation, what barriers remain, and where progress has been made. Specific actionable solutions were selected from the survey responses for reassessment during the summit based upon heterogeneity of responses and citation of significant barriers to progress. Facilitated discussion in small groups during the summit allowed participants to provide recommendations on the continued relevance of a solution, with or without modified wording, and detailed actions for each item to expedite progress.

The summit addressed the five original themes that were central to the 2023 summit:

- practice advancement
- technology and workflow efficiencies
- workforce
- mental health
- regulatory and legislative framework

Notes from each of the small-group discussions were compiled to identify recurrent recommendations. A summary of the discussion and recommendations is included below with a table of recommendations for the practice advancement, technology and workflow efficiencies, and workforce themes, as well as new recommendations for frontline leaders and areas prioritized for focus for the next 2-5 years.



Theme 1: Practice Advancement

On the subject of practice advancement, three actionable solutions stemming from the 2023 summit were discussed. Summit participants confirmed the continued relevance of each actionable solution, modified the wording as needed to improve clarity, and gathered suggestions to address barriers and sustain progress.

2025 Actionable Solution

Educate the public, health-system executives, and payers on the value of pharmacy services with national data supplemented by success stories in order to create sustainable collaboration with the care team and within organizations.

Recommended Actions

- Develop consistent and organized messaging across settings and organizations.
- Utilize audience-specific language for tailored communication, specifically emphasizing what is valuable for pharmacy stakeholders.
- Engage patients to develop meaningful messages and articulate the real-world impact of pharmacy services.
- Provide messaging focused on the unique contribution provided by pharmacy — medication therapy expertise and solving medication-related problems.
- Collaborate with other professions, including physicians and physician organizations, to extend the reach of messaging on the value of pharmacy services.

2025 Actionable Solution

Work with public and private payers to establish pharmacist payment and credentialing pathways that leverage pharmacists' impact on healthcare outcomes.

Recommended Actions

- Efforts should focus on payment pathways, including credentialing as part of the broader pathway.
- Development of pharmacy-specific systems should be avoided; pharmacists should be integrated into existing provider systems.
- Recommendations should be developed for payers, offering clear guidance on credentialing for pharmacists and inclusion of new provider-type codes in all systems.
- Recommendations should also be developed for pharmacists, including details and best practices for navigating credentialing and contracting.
- Fee-for-service payment models should be addressed alongside value-based care models.

2025 Actionable Solution

Create patient demand for scalable and sustainable medication management services/comprehensive medication management/pharmacy services by demonstrating and communicating value to patients, providers, payers, organizations, and other stakeholders in the public health space.

Recommended Actions

- Collaborate with patient advocacy groups to elevate the patient voice and demonstrate value to the public.
- Engage with provider organizations to establish support and demand for pharmacy services.
- Create a central warehouse of best practices/exemplars for all pharmacy settings and specialties.
- Develop templates to quantify pharmacist value beyond basic productivity metrics.



Broadly, the discussions within this theme centered on improved communication, including tailored communication, patient engagement, multi-disciplinary collaboration, and unified profession-wide messaging. The role of pharmacists in improving patient health outcomes was emphasized, as was messaging not limited to the reduction in drug costs but widened to include lowered total health costs. Participants noted that as the population ages there will be more opportunities for pharmacy personnel to step into the role of providing care.

Further, participants recommended establishing centralized repositories of information targeting different audiences and highlighting the attributes of pharmacy practice most closely aligned with their interests. This would include national data, case studies, and original research spanning all practice settings and demographics.

Enhanced utilization of pharmacy technicians was a recurring theme throughout the summit. Improved utilization of pharmacy technicians was highlighted as an opportunity to help advance pharmacy practice, improve efficiency, and promote the well-being of all personnel.



Theme 2: Technology and Workflow Efficiencies

An additional three solutions from the 2023 summit were selected for thorough discussion related to the Technology and Workflow Efficiencies theme. Similar to the previous theme, summit participants recommended continued action on all three items, and alternative wording and recommended actions were identified for each.

2025 Actionable Solution

Implement models that establish a patient-pharmacist relationship as much as possible (e.g., appointments for vaccines and telehealth and panels for chronic disease management) to enhance professional status and support workflow.

Recommended Actions

- Align practice models with the practice site and the specific services provided.
- Retain flexibility of service models that ensure pharmacists remain accessible but also improve predictability and patient flow.
- Integrate the practice model with metrics that support workforce well-being while meeting organizational priorities.
- Utilize technology to support the practice model, including streamlining scheduling, synchronizing medications, and expanding patient interactions to virtual or telehealth.

2025 Actionable Solution

Strategically implement technology, including artificial intelligence (AI), to optimize order verification/prescription review to minimize administrative burden/repetitive tasks and fatigue and free up time for pharmacy personnel to provide other value-added services to patients (e.g., education, therapy optimization, point-of-care testing).

Recommended Actions

- Advocate for regulatory models to govern technology implementation.
- Generate and disseminate data on the benefits of technology for safety, error reduction, and well-being.
- Employ change management messaging: technology is for efficiency, not replacement.
- Expand technician roles by relieving administrative burdens through automation.
- Ensure frontline staff/managers/supervisors have input on technology throughout the entire life cycle.

2025 Actionable Solution

Optimize policies and workflows to ensure adequate time for patient care, documentation, and other administrative functions.



Recommended Actions

- Create roles such as chief pharmacy informatics officer to represent pharmacy in system-level informatics, identify gaps, and pursue solutions to address deficiencies.
- Work with health-system engineers to apply industrial engineering/Lean techniques to pharmacy workflows. Assess workflows and remove unnecessary/non-value-added steps.
- Leverage informatics and data analytics specialists to collect back-end data rather than requiring manual pharmacist input.
- Establish continuous quality improvement processes alongside technology adoption.
- Build a centralized repository of solutions; share success stories.
- Develop clear messaging that technology empowers, rather than replaces, pharmacy workforce members.

The role of technology, including AI, was a recurring topic throughout the summit day. During this focused discussion, participants noted that AI and other technology can be leveraged to make some tasks more efficient, allowing more time for the cognitive services pharmacists are trained to provide, rather than administrative tasks like patient scheduling and prior authorizations. They also considered whether regulations requiring documentation are excessive, unnecessary, and inefficient and called for efforts to ensure that policies add value and do not needlessly detract from patient care. To improve efficiency in performing required administrative tasks, participants suggested that pharmacy personnel adopt technologies that other professions have leveraged, such as the voice-to-text applications that physicians use for documentation.

Participants stressed the need to manage expectations about the use of AI and other innovations in pharmacy settings by providing more direct messaging. For instance, they noted a necessity to build interest and capabilities in technology in the pharmacy workforce and to start that work immediately. Participants also discussed the potential value of using digital space to interact with patients, such as via virtual or telephonic visits, to enrich patient care.

The subject of more effectively utilizing pharmacy technicians came up in this context as a way to improve workflow efficiency. Participants noted one way to encourage this trend would be to create career advancement opportunities that go beyond salary to include increased engagement.

Some participants identified overregulation as the biggest obstacle to technology in pharmacy practice. They stressed the need to demonstrate to regulators that the technology error rate is much lower than the human error rate. Participants called for a centralized repository of information specifically geared toward regulators; literature that demonstrates the safety and efficacy of several technologies and practice models should be made available to help regulators make informed decisions. Participants also advised that pharmacy boards follow the example of the nursing profession in regulating the personnel who use the technology, not the technology itself.



Theme 3: Workforce

The small-group discussions concluded with the Workforce theme and a final three 2023 actionable solutions. To strengthen the workforce, participants said the need for these solutions remains, and further work is needed for implementation.

2025 Actionable Solution

Build models for redundancy and flexibility in staffing to support time away, retention, job satisfaction, and patient outcomes, while also absorbing last-minute and unavoidable schedule changes. Ensure systems can also respond to large-scale disruptions (e.g., natural disasters, community pharmacy closures).

Recommended Actions

- Build career ladders and non-management options for career advancement, including pharmacists and pharmacy technician roles.
- Implement accountability programs to manage absenteeism fairly.
- Lean on progressive practice models and technology to reduce dependence on specific individuals.
- Investigate staffing models from other professions (e.g., 7 days on/7 off).

2025 Actionable Solution

Expand hybrid and virtual work opportunities where possible. Promote flexible work models across all practice settings for both pharmacists and technicians.

Recommended Actions

- Analyze all roles and tasks to determine which can be performed remotely.
- Develop a framework for remote supervision.
- Provide focus time and flexibility for in-person roles.
- Address societal and generational shifts in workforce expectations, including early in pharmacy school education.
- Incorporate emotional intelligence and expectation management into pharmacy training.

2025 Actionable Solution

Establish closer partnerships between academia and employers/practice settings to align education with contemporary, real-world practice requirements, ensuring student pharmacists are prepared for both clinical and non-clinical expectations upon graduation.

Recommended Actions

- Redesign IPPE/APPE to include leadership and workflow experiences.
- Establish steering committees/boards to advise experiential offices.
- Increase continuing education offerings on communication, leadership, and precepting.
- Expand internships and immersive roles beyond observation.

Participants noted that staffing models should support time away from the job, with the goal of retaining employees, improving job satisfaction, and optimizing patient outcomes. Others recommended that models for staffing redundancy and flexibility should address the increased demand for pharmacy personnel in the case of emergencies, such as natural disasters or closures of other pharmacies. Sharing of staffing models across organizations and among different professions should occur routinely, and data on the impact of models on well-being should be gathered.



While remote and hybrid roles were encouraged for consideration, some cautioned that the work-from-home model is not effective in every situation and called for more data on various practice models' impact on productivity. It was suggested that the hybrid work model is a symptom of a dissatisfied workforce, that personnel cannot provide direct patient care if they are not there, and that working from home can be isolating and perpetuate silos. Remote and hybrid positions alone are not a panacea for all workforce well-being issues.

It was noted that frontline supervisors have an exceedingly difficult role in that they have the most direct reports and, in trying to satisfy everyone, they end up suffering significant burnout. It was also recommended that pharmacy schools incorporate emotional intelligence into education so that students will be better prepared. Many agreed that graduates are often clinically prepared to practice but lack the soft skills that would strengthen their resilience to on-the-job stressors and promote their well-being.



Theme 4: Mental Health

The convening organizations provided updates on mental health initiatives that have been worked on since the 2023 summit.

Participants learned about the Dr. Lorna Breen Heroes' Foundation Wellbeing First Champion Challenge. This program supports licensure boards, hospitals, and health systems in removing barriers to mental health care for health workers. The program verifies that licensing or credentialing applications are free from intrusive mental health questions and stigmatizing language. At the time of the summit, 635 hospitals and 50 licensure boards, including seven state boards of pharmacy, had been recognized as Wellbeing First Champions. Attendees also heard about the Pharmacy Professional Recovery Program Forum that NABP would soon hold in July 2025. That event was designed to bring together recovery program representatives and pharmacy regulators to share ideas about advocating for alternatives to discipline for pharmacy personnel at risk of impairment due to mental health issues or substance use disorders and to establish a unified approach to recovery and return to practice.

Participants also learned about Pharmacy Workforce Suicide Awareness Day, established in 2023 and recognized annually on September 20. All three convening organizations have compiled mental health resources, including those for suicide awareness, on their websites.

ASHP shared information about the Well-Being Ambassador Program and Well-Being Certificate as educational opportunities available to the pharmacy workforce. APhA's Mental Health First Aid, Second Victim Syndrome, and Emotional Support groups, and the Well-Being Index for pharmacy personnel, were also highlighted as important resources developed following the original summit.

Participants endorsed fostering an environment of psychological safety through a just culture approach to discipline and mental health training and resources as ongoing needs related to this theme. Teaching soft skills to pharmacy students, such as de-escalation training to help new pharmacists manage hostile or challenging customers, was also identified.



Theme 5: Regulatory and Legislative Framework

The theme of Regulatory and Legislative Framework was approached using an inform-and- discuss process. Two board of pharmacy representatives from different states provided background on the standard-of-care regulatory model and technician scope of practice and facilitated a large group discussion.

Participants received an overview of Idaho's standard-of-care regulatory model, a flexible approach to regulation that allows personnel to perform a wide range of services aligned with their level of experience and training. This model necessitates a broad definition of the practice of pharmacy, allowing elasticity for practice innovation over time. The model limits prescriptive regulations and eliminates unnecessary regulations. Where the law is silent, pharmacy personnel are expected to use their professional judgment. As a protective measure, the model requires accountability for deviations from the standard of care.

Participants noted that the practice of medicine has been managed with a standard-of-care model for decades; medicine does not have bright-line regulations. Participants noted that such a flexible regulatory approach would allow for the use of new technologies and innovative practice models that are sometimes rejected or blocked by state pharmacy boards with a more prescriptive regulatory approach.



Participants also learned about efforts among professional organizations and some states to expand the scope of practice for pharmacy technicians. North Dakota, for instance, was among the first states to give pharmacy technicians a broader scope of practice. The state allows for three levels of pharmacy technicians, with greater responsibility and compensation at the higher levels, to create career opportunities and promote job satisfaction. Participants noted that pharmacy technicians are integral to pharmacy workflow, fostering a collaborative environment with pharmacists to address evolving healthcare challenges. It was noted that pharmacy technicians are increasingly taking on leadership roles, serving on state boards of pharmacy in 21 jurisdictions and bringing a unique perspective to regulatory discussions on technician responsibilities, pharmacy operations, and patient safety.

Exploring New Solutions

Throughout the course of the day, each small group was prompted to consider opportunities for frontline supervisors and managers to support well-being as well as provide suggestions for areas of increased focus for the pharmacy profession for the next 2-5 years. These recommendations are compiled in the tables below, organized by theme.

Suggestions for frontline managers and supervisors to support well-being	
Practice Advancement	- Build systems that enable standard of care practice. - Ensure workflows focus on tasks that add value to patients. - Rework positions or job responsibilities to allow for schedule flexibility.
Technology	- Pursue software that removes or automates repetitive tasks. - Assess electronic medical record workflows to reduce redundancy and improve efficiency. - Explore artificial intelligence and other novel technologies for documentation and patient notes. - Ensure all members of the pharmacy workforce have access to the data they need to do their job completely and efficiently (e.g., labs or billing information).
Workforce	- Establish regular one-on-one meetings; provide meaningful opportunities to gather input from staff and allow concerns to be voiced. - Enable leadership development for supervisors related to well-being. - Provide adequate time for training new staff with new roles or responsibilities.

Suggested Areas of Focus for Next 2-5 Years	
Practice Advancement	- Realign tasks between pharmacists and technicians. - Develop an infrastructure for scheduling, billing, and support staff. - Establish more interstate licensing opportunities.
Technology	- Collaborate with vendors to implement and develop technology. - Ensure widespread access to pertinent patient information. - Support change management principles to facilitate adoption of new technology.
Workforce	- Expand technician scope and advancement opportunities. - Develop career ladders beyond management roles; create unique/innovative roles aligned with individual interests. - Build staffing models that allow off-service time, research time, or other quality or clinical work time.



Frontline supervisors have opportunities to support well-being by engaging staff routinely, listening, and involving them in change management, particularly around technology adoption and workflow assessment and revision. Areas of focus for the profession over the next 2-5 years include payment parity, technician utilization, integration of technology into practice models, and preparation of new practitioners and students for the realities of practice. Optimism about the ability of technology to reduce administrative burden remains high, but regulatory barriers, fear of replacement, and lack of data persist. Workforce well-being requires flexibility in schedules and work locations in addition to career advancement opportunities for all, as well as intergenerational adaptation, with frontline supervisors needing additional support themselves to succeed in these roles.

Call to Action

Based upon the information gathered through the summit, the convening organizations developed a call to action:

- Create a central repository of information, including case studies, national studies, and success stories, to educate health-system executives and payers on the value of pharmacy services and a similar repository for boards of pharmacy to access information on new technology and innovative practice models.
- Evaluate pharmacy workflows — focusing on removal of non-value-added or redundant tasks, opportunities for technology to add efficiency, and prioritization of patient care functions. Further, continue developing flexible work models and schedules and clear career pathways for all members of the pharmacy workforce.
- Foster an environment of psychological safety through a just culture approach to discipline, mental health training and resources, removing stigmatizing questions from applications, and prioritizing recovery and return to practice.
- Advocate for payment reform. Continue focusing on payer-specific, state, and federal efforts, and dedicate significant effort to ensuring consistency of messaging across the profession.
- Assemble tools and resources to aid pharmacy leaders in practice assessment, well-being and burnout measurement, and mental health services. Given that best practices and evidence-informed interventions are often based upon experiences in other health professions, continue to invest in pharmacy-specific research into interventions that impact well-being.

Closing Comments

As the summit neared its conclusion, organizers stressed that the group's work was not done. They emphasized that progress toward improving workplace well-being will require significant collaboration, and they asked participants to remain engaged in this process.

In closing, the convening organizations asked attendees to consider what they can do from this point forward that will make a difference and give hope to pharmacists and pharmacy personnel who are struggling with stress and burnout. They encouraged the group to communicate hope to the organizations they can influence and to continue working together to create pathways for change.

Each of the three convening organizations has made an enduring commitment to focus on workforce and workplace improvements. The original 56 actionable solutions from the 2023 summit remain important steps for organizations that are beginning their journey with workforce well-being, and the insights gained from the 2025 summit provide a deeper dive into specific actionable solutions. Importantly, participants' recommendations for frontline supervisors provide opportunities for immediate intervention. Finally, the input for areas of focus in the next 2-5 years provides the collective profession with new waypoints to work towards and areas for continued collaboration. This event was not designed to develop consensus, but the recurring themes and comments allowed the convening organizations to distill a prioritized call to action that should serve as an agenda for the entire profession to remain on course and propel the momentum forward. APhA, ASHP, and NABP have committed to continued collaboration, including a forthcoming compilation of resources organized within an assessment tool. We look forward to sharing this resource with the broader pharmacy community.



References

1. Mott DA, Bakken BK, Nadi S, et al. Final Report of The 2024 National Pharmacist Workforce Survey. *Pharmacy Workforce Center*; Washington, DC, USA: 2024. Available online: <https://www.aacp.org/article/national-pharmacist-workforce-studies>
2. Antrim, A. Pharmacists report high levels of burnout, resulting in understaffing and alternative career paths. *Pharmacy Times*. April 26, 2023. Available online: <https://www.pharmacytimes.com/view/pharmacists-report-high-levels-of-burnout-resulting-in-understaffing-and-alternative-career-paths>
3. Lee KC, Ye GY, Choflet A, et al. Longitudinal analysis of suicides among pharmacists during 2003-2018. *J Am Pharm Assoc*. 2022; 62:1165-1171.



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