Guideline for Committee on Nominations

To ensure that all willing and qualified potential nominees are considered for candidacy to ASHP elective office, the Committee on Nominations is charged with assembling a roster of nominees, recommended by our members and affiliated societies. A member or group submitting such a recommendation should provide a brief summary of the recommended individual's experience and accomplishments and should state why the Society would be well served by his or her election. Recommendations can come from ASHP state affiliate societies, councils, committees, or any single member or group of members.

ASHP will issue a "Call for Nominations" via various channels, to encourage affiliate societies, individual members or others to submit their recommendations at appropriate times. These may include:

- letters from Society headquarters to the membership
- letters to affiliated state chapters
- notices in Society publications including newsletters, email news services, Midyear Clinical Meeting daily newspapers, and other communication vehicles of ASHP

In addition to reviewing suggestions received from members and affiliated societies, the Committee on Nominations will also review the membership rolls for potential candidates, particularly rosters of councils, committees, and other ASHP leadership bodies. Nominees will be contacted by the Committee and provided additional information about holding elective office, and given an opportunity to formally accept or decline nomination.

Typical qualifications of a successful candidate include, but are not limited to:

- demonstrated leadership qualities and exemplary practice
- active interest in the affairs of the Society
- experience as chair or member of ASHP council(s) or committee(s)or commissions
- experience as elected official of the sections
- experience as an officer or director of a state affiliate society
- other relevant experience

Revised by the ASHP Board of Directors, September 15, 2014
Supersedes Guide for Committee on Nominations and Candidates for Elective Office approved by the ASHP Board of Directors, November 19, 1973

Guidelines for Candidates for Elective Office

Introduction

To ensure that a broad spectrum of willing and qualified potential nominees are considered for candidacy to ASHP elective offices the Board of Directors has charged the Committee on Nominations with carrying out an annual search process for the selection of candidates and assembling a roster of nominees. The source for potential nominees comes from individual members, affiliated state societies, councils, committees, and other ASHP leadership bodies. Once a slate of candidates for elective office is prepared the names are sent to the ASHP House of Delegates.

Policy

Receipt of the report from the Committee on Nominations the Society widely publicizes to voting members through all of its communication media (print and electronic) the names, background and qualification of all nominees. The *Election Bulletin* which contains information about each candidate is maintained on the ASHP website throughout the election season until voting closes.

Once the candidates for elective office are announced at the ASHP Summer Meetings it is expected that candidates for office will avoid activities that would be viewed as self-promotional or "campaigning" for election whether in print, through electronic media such as social networking forums or blogs, or actual statements by the candidate. Further, candidates should not endorse or encourage others or third parties to promote their individual candidacy for office. Any third-party announcements or other forms of broad communication that discusses the upcoming election should include all candidates for a particular office and their qualifications and should not promote the selection of a specific candidate.

Further, individuals who are candidates for office in the Society are expected to protect ASHP's image, not to engage in any activity which might bring discredit to the Society, and not to participate in discussions or votes if a personal conflict of interest is involved. These individuals are advised to review the "*ASHP Policy on accepting Corporate Support and avoiding Conflicts of Interest*" and the "*ASHP Policies on Conflict of Interest, Disclosure, and External Business/Professional Activities for Board of Directors*".

Approved by the ASHP Board of Directors, September 15, 2014

House of Delegates

REPORT OF THE

COMMITTEE ON NOMINATIONS

June 14, 2026

St. Louis, Missouri

Arpit Mehta, Chair, Pennsylvania
Nishaminy Kasbekar, Vice Chair, Philadelphia
Amy Gutierrez, California
Trisha Jordan, Ohio
William Kernan, Florida
Michael Nnadi, Texas
Martin Torres, California
Jason Wong (1st Alternate), California
Trinh Le (2nd Alternate), North Carolina

ASHP COMMITTEE ON NOMINATIONS

Mister Chair, Fellow Delegates:

The Committee on Nominations consists of seven members of ASHP who are appointed by the Immediate Past President. The Committee is charged with the task of presenting to you our best judgments about those persons who possess the tangible and intangible attributes of leadership that qualify them to serve as our officers and directors.

Selection of nominees for ASHP office involves a series of very challenging decisions on the part of the Committee. Ultimately, those decisions are intended to permit the membership to select leaders with the professional, intellectual, and personal qualities of leadership that will sustain the dynamism and pioneering spirit that have characterized both ASHP and its more than 60,000 members who provide patient care service across the entire spectrum of care.

First, the Committee must determine that a prospective nominee for office is an active member as required in the Charter. This is generally the easiest and most straightforward part of the Committee's work. The Committee must ascertain that each prospective nominee can perform the duties required of the office or offices to which he or she has been nominated. All nominees must be able to perform the duties of a Director, set forth in article 5 of the Bylaws. Presidential nominees must also be able to perform the duties of that office, set forth in article 4 of the Bylaws.

The more difficult part of the Committee's work is to assess those intangible qualities of emotional intelligence (empathy, self-awareness, self-regulation, social skills, and motivation), leadership, vision, engagement, and overall professional awareness that characterize the standout candidates – those truly able to provide leadership for ASHP and the profession. The Committee assesses the attributes of prospective candidates for office in areas such as:

- Professional experience, career path, and practice orientation
- Leadership skills and leadership experience, including but not limited to, the extent of leadership involvement in ASHP and its affiliates
- Knowledge of pharmacy practice and vision for practice and ASHP
- Ability to represent ASHP’s diverse membership interests and perspectives
- Communication and consensus building skills

There are no right or wrong answers to these criteria. Certain qualities may be weighed differently at various points in the evolution of the profession.

The Committee’s year-long process of receiving nominations and screening candidates is designed to solicit extensive membership input and, ultimately, to permit the Committee to candidly and confidentially assess which candidates best fit ASHP’s needs. The Committee has met three times since the last session of the House of Delegates: on December 9, 2025, at the ASHP Midyear Clinical Meeting; on February 19, 2026, via teleconference; and in person on April 22, 2026, at ASHP Headquarters. Review of nominees’ materials was conducted continuously between February and April 2026 solely via secure electronic transmissions. This process has been reviewed for quality improvement and will be repeated for the 2026–2027 nomination cycle.

As in the past, the Committee used various means to canvass ASHP members and state affiliates for candidates who they felt were most qualified to lead us. All members were invited via announcements in ASHP News and Daily Briefing, social media, online ASHP NewsLink bulletins, and the ASHP website to submit nominations for the Committee's consideration. Nominations from affiliated state societies were solicited through special mailings and the "state affiliate" edition of the online NewsLink service.

Based upon recommendations from membership, state affiliates, and ASHP staff, the Committee contacted over 900 individuals identified as possible candidates. Some individuals were invited to accept consideration for more than one office. Of the nominees who responded to the invitation to place themselves in nomination, the breakdown by office is as follows:

PRESIDENT-ELECT: 4 accepted
BOARD OF DIRECTORS: 10 accepted

A list of candidates that were slated was provided to delegates following the Committee's meeting on April 22, 2026.

The Committee is pleased to place in official nomination the following candidates for election to the indicated offices. Names, biographical data, and statements have been distributed to the House.

President-Elect (2027-2028)

- **Kristi K. Gullickson, PharmD, MBA, CPEL, DPLA, FASHP, FMSHP**, Vice President of Pharmacy Operations, Allina Health, Minneapolis, MN
- **Jennifer E. Tryon, PharmD, MS, FASHP**, Senior Vice President, Chief Pharmacy Officer, Henry Ford Health, Detroit, MI

Board of Directors (2027-2030)

- **Daniel H. Good, MS, RPh, CPEL, FASHP**, Vice President, Pharmacy, Mercy Health System, Springfield, MO
- **Todd D. Lemke, PharmD, CPEL, DPLA, FASHP**, Director of Regional Pharmacy Services, CentraCare, St. Cloud, MN
- **Katherine (Kat) A. Miller, PharmD, MHA, CPEL, DPLA, FASHP, FKCHP**, Senior Director Acute Care Pharmacy and Clinical Nutrition, The University of Kansas Health System, Kansas City, KS
- **Ian A. Orensky, PharmD, MS, 340B ACE, CPEL**, Manager, Pharmacy Business Services and 340B Program, VCU Health, Richmond, VA

Mister Chair, this completes the presentation of candidates by the Committee on Nominations. Congratulations to all the candidates.

CANDIDATES FOR PRESIDENT-ELECT 2027–2028

Kristi K. Gullickson, PharmD, MBA, CPEL, DPLA, FASHP, FMSHP (kristi.gullickson@allina.com), is vice president, pharmacy operations at Allina Health in Minneapolis, Minnesota. She completed her pharmacy degrees at North Dakota State University and pharmacy practice residency at Abbott Northwestern Hospital. She earned an MBA in healthcare administration from New England College. With over 30 years of experience leading health-system pharmacy practice, her passion is developing others, collaborating with healthcare teams, and supporting those who care for patients. Kristi is currently serving on the ASHP Pharmacy Practice Accreditation Commission (PPAC), PAI Advisory Committee, and Health System 340B and Reimbursement Work Group. She is an ASHP certified pharmacy executive leader (CPEL) and diplomate of the ASHP Pharmacy Leadership Academy. Her prior ASHP service includes member, Board of Directors (2023-2025); chair, Section of Pharmacy Practice Leaders (SPPL) Executive Committee; chair, Council on Pharmacy Practice; multi-year delegate, ASHP House of Delegates; alternate, ASHP Committee on Nominations; chair, SPPL Committee on Nominations; contributor, ASHP Leadership Basics Certificate; faculty, ASHP Manager Boot Camp and expert panel member, ASHP Guidelines on Preventing Diversion of Controlled Substances and the ASHP/APhA Medication Management in Care Transitions project. Gullickson is a past president of the Minnesota Society of Health-System Pharmacists (MSHP) and a fellow of ASHP and MSHP. She has been recognized for her contributions to pharmacy practice, including the ASHP SPPL Distinguished Service Award, MSHP Hallie Bruce Memorial Lecture Award, MSHP Tom Kohout Meritorious Service Award, MSHP Hugh F. Kabat Award, and ASHP Best Practices Award.

Statement:

Health-system pharmacy is a critical strategic lever for access, quality, and financial sustainability. As medication-use experts, patient advocates, and essential care team partners, pharmacists and the pharmacy workforce are uniquely positioned to deliver measurable clinical and economic value across the continuum of care. My vision is for pharmacy to be fully integrated into evolving care models, with pharmacists practicing under a standard of care model to improve clinical outcomes, patient experience, and affordability across all care settings. The pharmacy workforce must be supported by digital tools, artificial intelligence, and data-driven decision-making that enhance patient care, reduce administrative burdens, and mitigate burnout. Equally important is cultivating service-oriented, collaborative, and resilient teams through workforce wellbeing, inclusivity, and meaningful professional growth across all pharmacy roles. The pharmacy workforce will be recognized as essential drivers of health equity and affordability by identifying and removing barriers to medication access and adherence for all patients. Integration of pharmacy into population health strategies and payer contracts will further enable improved care and cost outcomes for the communities we serve. ASHP has been my professional home and external compass for more than 30 years. At this pivotal moment for the profession, I believe pharmacy must lead disruption from within by leveraging ASHP's updated strategic plan and the incredible talent across our membership to accelerate innovation, strengthen accountability for outcomes, and elevate the pharmacist's role. It would be an honor of a lifetime to help guide the profession forward during this critical time.

Jennifer E. Tryon, PharmD, MS, FASHP (jtryon2@hfhs.edu), is the senior vice president and chief pharmacy officer at Henry Ford Health in Detroit, Michigan. She leads pharmacy services across Henry Ford Health's integrated delivery network, advancing an enterprise pharmacy model that connects care settings, standardizes medication-use work, and positions pharmacy as a driver of patient care and health-system value. Her practice experience spans community hospitals, academic health systems, and integrated delivery networks, giving her broad perspective on the opportunities and challenges facing health-system pharmacy.

Committed to teaching, Tryon has lectured at multiple schools of pharmacy and is faculty for the ASHP Foundation's Pharmacy Leadership Academy. She has been the residency program director for HSPAL and postgraduate year one residency programs and has enjoyed training over 100 pharmacy residents. Jennifer received her MS from the University of Wisconsin, her PharmD from the University of Iowa College of Pharmacy, and a two-year health-system pharmacy administration residency at the University of Wisconsin Hospital and Clinics.

Tryon has served on the ASHP Board of Directors and previously held leadership roles as the chair of the Section of Pharmacy Practice Leaders, the Council on Pharmacy Management, section advisory groups, and served in the House of Delegates. She is a past president of the Oregon Society of Health-System Pharmacists and has held other elected leadership roles in pharmacy associations. Tryon is a frequent national and international speaker on pharmacy leadership, innovative practice models, technology, and health-system transformation. She received the 2021 ASHP Section of Pharmacy Practice Leaders Distinguished Service Award.

Statement:

The headwinds facing healthcare today require pharmacy to think differently about our work, our workforce, and our role in patient care. For pharmacy to rise to this moment and meet its full potential as the medication expert profession, we must be willing to lead transformational change. This is both an exciting and challenging time. New technology, automation, data, and artificial intelligence are rapidly changing what is possible, while also creating understandable skepticism about how these tools will be used. I believe pharmacy has an opportunity and an obligation to help shape that future. Technology should not distance us from patients or replace the judgment of pharmacists. It should instead help us reimagine a future with technology-enabled medication management solutions that are highly reliable and support pharmacists and technicians spending more time doing the work that improves care, advances outcomes, and supports patients across the continuum.

ASHP has an important role in helping the profession lead through this period of change. Through advocacy, policy, education, and the sharing of best-practice models, ASHP can help ensure pharmacy professionals are empowered to respond to workforce pressures, rising drug costs, value-based care, medication access challenges, supply chain disruption, and the growing complexity of therapies. Throughout my career, ASHP has been my professional home. I would be honored to serve its members as the ASHP president and help advance a future where pharmacy is more connected to patients, more accountable for outcomes, and more fully recognized for the value we bring to healthcare.

CANDIDATES FOR BOARD OF DIRECTORS 2027-2030

Daniel H. Good, MS, RPh, CPEL, FASHP (danielhgood@gmail.com), is vice president of pharmacy for Mercy Health, a top five integrated delivery network serving urban and critical-access communities across Missouri, Kansas, Oklahoma, and Arkansas. In this role, he has provided strategic oversight for acute care, ambulatory, home infusion, retail pharmacy, residency training, pharmacy automation, central services center, and 340B programs. Good is a respected health-system pharmacy executive with three decades of leadership experience advancing pharmacy practice, developing future leaders, and strengthening health systems across the country. His University of Washington degree was strengthened by a master's degree and residency in health-system pharmacy leadership at the University of Kansas.

Good is a champion of innovation, workforce sustainability, and patient-centered care. His leadership has driven the expansion of accredited residency programs, modernized service delivery models, strengthened pharmacist and technician career pathways, and supported stewardship efforts that improve access, quality, and long-term system performance.

A strong believer in leadership formation, Good is a graduate of the Boston University–ASHP Foundation Pharmacy Leadership Institute and serves as adjunct faculty for the University of Missouri–Kansas City (UMKC) and St. Louis College of Pharmacy. He also serves on UMKC's Dean's Advisory Council.

A fellow of ASHP, Good has held leadership roles within state affiliates in Washington, Texas, Missouri, and Kansas, and currently chairs ASHP's Multi-Hospital-Pharmacy-Executives Committee.

An Eagle Scout, he is deeply committed to community service through Scouting-America and values time with his family, including his wife and two children, who are also in the medical field, reflecting a shared commitment to service and leadership.

Statement:

My vision is to shape a future in which pharmacy is fully integrated into healthcare delivery, technologically enabled, and universally recognized as an essential driver of clinical excellence, safety, and population health. I believe every patient should benefit from coordinated, advanced pharmacy services; every clinician should practice within a culture of trust, accountability, and continuous learning; and every pharmacy professional should have a clear, supported pathway for growth and leadership. A sustainable and resilient profession requires innovation, data-informed decision-making, and intentional investment in the workforce to meet the evolving needs of patients and communities.

I am positioned to contribute to this future as a member of the ASHP Board of Directors. With experience spanning health-system leadership, workforce development, and practice transformation, I bring a systems-level perspective grounded in frontline realities and national priorities.

I believe pharmacy's greatest opportunity lies at the intersection of advocacy, practice advancement, and connection. Strong, forward-looking advocacy is essential as the profession navigates workforce shortages, reimbursement challenges, and rapidly evolving care models on both state and national platforms.

Equally critical is strengthening professional networks that connect pharmacists and technicians

across settings, fostering collaboration, mentorship, and the development of shared solutions using the ASHP Best Practice tools and established networking communities. As a board member, I would work to ensure ASHP continues to be both a bold voice for the profession and a catalyst for innovation, positioning pharmacy not only to quickly adapt to healthcare transformation but to lead it.

Todd D. Lemke, PharmD, CPEL, DPLA, FASHP (Todd.Lemke@CentraCare.com), is the regional director of pharmacy services for seven rural hospitals. He graduated from the University of Minnesota College of Pharmacy in 1999. He completed a postgraduate year one patient care residency through the University of Minnesota at a rural health system in Paynesville, Minnesota, focusing on ambulatory care management of patients with chronic diseases.

Lemke's first role was building a pharmacy department in a critical access hospital. He maintains a presence at this first hospital and has led expansions of the system's medication therapy management program to 30 clinics and the anticoagulation program to cover over 3,000 patients. Lemke is integrating pharmacy services at the seven hospitals in his latest role.

This rural background led him to be part of the Section Advisory Group on Small and Rural Hospitals as a young practitioner, leading this group as vice chair and chair, as well as planning the Midyear small and rural programming. Todd was later elected to the Section of Inpatient Care Practitioners (SICP) executive committee and served as vice chair, chair, and past chair. Most recently, he has served on the Council of Pharmacy Practice as vice chair and chair, finishing up his three-year term this June. Besides serving on sections and councils, Todd has been active in ASHP through Midyear presentations, podcasts, and virtual roundtables. He has served on the SICP Committee on Nominations, two ASHP advisory committees, as a student mentor, residency preceptor, poster judge, and "the guy they call to ask questions about rural pharmacy."

Statement:

These are the philosophies that ground me as I tackle each new day:

- *Rural care is exceptional care. I am committed to creating excellent patient-centered care experiences for every member of our community through innovative use of resources and the strength of our rural spirit.*
- *Grab the opportunity and make it yours. All that I have and have achieved has come from seeing an opportunity and not being afraid to say, "Let me try!"*
- *I am only as good as the people who work with me. Building up others and providing leadership opportunities at all levels creates forward momentum and enhances the engaged culture.*

Katherine (Kat) A. Miller, PharmD, MHA, CPEL, DPLA, FASHP, FKCHP (kmiller30@kumc.edu), serves as the senior director for acute care pharmacy and clinical nutrition and residency programs executive at the University of Kansas Health System, where she leads enterprise-wide clinical and operational initiatives. She earned her Doctor of Pharmacy from the University of Wisconsin and completed both postgraduate year 1 (PGY1) pharmacy practice and PGY2 health-system pharmacy

administration residencies at Oregon Health and Sciences University. She also holds a Master of Health Administration from Simmons College.

A recognized leader in pharmacy practice advancement, Miller is both a graduate and faculty member for the ASHP Foundation Pharmacy Leadership Academy (PLA), contributing to the development of future pharmacy leaders worldwide.

Miller has an extensive record of service to ASHP, most recently serving as the chair of the Section of Pharmacy Practice Leaders. She has also served as chair of the ASHP Council on Pharmacy Management and as advisory group chair for both the ASHP Section of Pharmacy Practice Managers (Innovation Management) and the New Practitioners Forum (Leadership and Career Development). Her broader engagement includes multiple advisory and workgroup contributions across ASHP and the ASHP Foundation. Miller was recognized as a fellow of ASHP and has received her Certified Pharmacy Executive Leader (CPEL) designation.

At the state level, Miller is a past president of the Kansas Council of Health-System Pharmacy (KCHP) and was designated as a fellow of KCHP. She has served as a Kansas delegate to the ASHP House of Delegates and on ASHP-affiliate boards in Kansas, Illinois, and Minnesota.

Statement:

As healthcare continues to evolve in the post-pandemic era, pharmacy is uniquely positioned to showcase its strengths and expand its impact. We must proactively continue to identify and address the gaps present in healthcare, while advancing our roles as both medication experts and healthcare providers. Through my practice experiences across the country in academic medical centers, community hospitals, and health systems, I understand and empathize with the diverse challenges facing ASHP members across all sites of care.

As chair of the Section of Pharmacy Practice Leaders, I led the strategic refinement of the section's priorities to align with the future of pharmacy practice. Central to this work is increasing and improving workforce pipelines while maintaining focus on intentional succession planning for current and emerging pharmacist leaders. We must also champion innovative practices to enable all pharmacy members the ability to perform at the top of their license. Preparing our leaders to balance multiple, complex responsibilities, including supporting teams through operational and personal crises, is key to our success.

My personal leadership style focuses on mentoring, making connections, and removing barriers to success. If elected, I will bring a forward-thinking, solutions-oriented perspective to the ASHP Board of Directors and work collaboratively to advance innovation, strengthen advocacy, and address workforce sustainability. It is an honor to be considered; I would welcome the opportunity to contribute to the continued advancement of our profession.

Ian A. Orensky, PharmD, MS, 340B ACE, CPEL (ian.orensky@vcuhealth.org), is the manager of pharmacy business services and 340B program at Virginia Commonwealth University (VCU) Health System in Richmond, VA. Orensky leads the VCU 340B Compliance team and oversees pharmacy analytics and financial stewardship initiatives for the largest safety-net health system in central Virginia.

Orensky has spent over two decades building high-functioning pharmacy programs across Virginia and beyond. He began his career at the VCU Medical Center as a staff pharmacist and pharmacy supervisor supporting automation and technology (2003-2010). He then transitioned to faith-based community health-system practice at Bon Secours Mercy Health, where he served as pharmacy operations manager, pharmacy director, administrative director of pharmacy, and system director of medication safety and policy (2011-2022). Orensky then joined HealthTrust as vice president of pharmacy services over HCA's Capital Division, where he supported the pharmacy operations of 19 for-profit hospitals and central distribution logistics.

Orensky obtained his bachelor's degree from the College of William and Mary in 1998. He obtained both a Doctor of Pharmacy and Master of Science in pharmacy administration from VCU in 2003.

He has been an active member of both ASHP and VSHP since 2003. He obtained the ASHP Certified Pharmacy Executive Leader (CPEL) credential in 2024. He is a VSHP Region 4 past-president and received a VSHP Collaboration Award for his work on the Virginia EMS box transition plan. Orensky has advocated before the Virginia General Assembly against white bagging and on Capitol Hill in support of the 340B program.

Statement:

I have had the privilege of supporting pharmacy teams of an urban academic medical center, a large for-profit integrated delivery network, and a multi-state, non-profit Catholic health system. Each setting has offered unique opportunities to expand pharmacy's impact, along with distinct challenges in achieving that aim. Despite these differences, several consistent leadership principles have guided my success across diverse practice environments.

As a servant leader, I focus on empowering teams to perform at their best by removing barriers, improving communication, fostering accountability, encouraging professional growth, celebrating achievements, and prioritizing team wellbeing.

I have vigorously fought to advance the pharmacy profession by promoting practice models that enable team members to work to their fullest ability. This includes implementing novel programs, policies, protocols, and technologies that support efficient, high-quality patient care while maximizing medication safety.

I value evidence-based decision-making and encourage constructive debate to identify the best solutions to complex problems. I also believe in building consensus and leveraging diverse perspectives to strengthen outcomes.

Collaboration is essential. I work closely with patients, clinicians, administrators, legislators, payors, and regulatory bodies to achieve shared goals, including improved patient outcomes, expanded access to care, and financial sustainability.

I envision a future where health-system pharmacy professionals in all practice venues feel supported, practice at the top of their license, and deliver safe, accessible, and affordable patient care.

I am honored to be slated as a candidate for the Board of Directors and for the opportunity to share my experience in support of ASHP's mission and members.