



GPS



NCPA<sup>®</sup>  
NATIONAL COMMUNITY  
PHARMACISTS ASSOCIATION

**Growth. Performance. Success.**

**2024 ANNUAL CONVENTION**



# LTC 101: Serving Vulnerable Communities with Customized Pharmacy Care

---

**NCPA 2024 Annual Convention and Expo**  
Columbus, Ohio

# Speaker



**Susan Rhodus, RPh**

Senior Vice President, Contracts and Advocacy  
GeriMed, Inc.

# Disclosure Statement

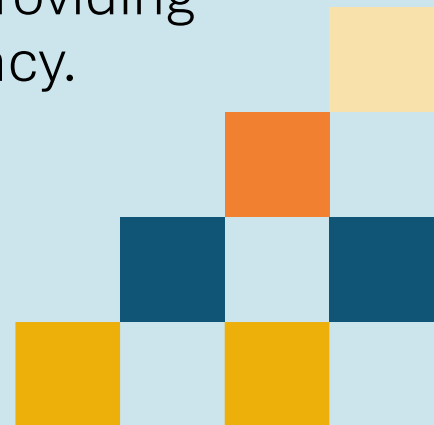
There are no relevant financial relationships with ACPE defined commercial interests for anyone who was in control of the content of the activity.

This presentation contains product names and images for educational purposes only. It is not meant to be an endorsement or advertisement of any particular product or product categories.



# Pharmacist and Technician Learning Objectives

1. Define long-term care and its importance in the health care system.
2. Explain the role of LTC pharmacies in providing customized care.
3. Understand the regulatory and policy landscape affecting LTC pharmacies.
4. Determine the investment needed to be successful in providing LTC services and how to assess the fit with your pharmacy.



# Definition of Long-Term Care - Licensed

- Nursing Homes and LTC Rehabilitation Facilities (Federal)
- Assisted Living – Personal Care – Group Homes (State)
- ICF-IID Facilities (Federal)
- Group homes for Intellectually Developmentally Disabled people (State)
- Hospice (State)
- Jails and Prisons (State and Federal)
- Drug/Alcohol Inpatient Rehabilitation Facilities (state)
- Behavioral Health/Outpatient Mental Health Centers (state)
- Chronic Psychiatric Facilities (Inpatient)



# Long Term Care Pharmacy at Home

- Patients must have difficulty leaving home on their own (no driving)
- Three or more chronic conditions
- Multiple maintenance medications (multiple = 3 or more)
- Assistance with 2 or more ADLs/IADLs
- Participation in a Medicaid Home and Community Based Waiver Program qualifies a patient automatically (PACE programs too)



The fastest-growing segment of long-term care is LTC at Home, consisting of an underserved population in excess of

**3 MILLION +**



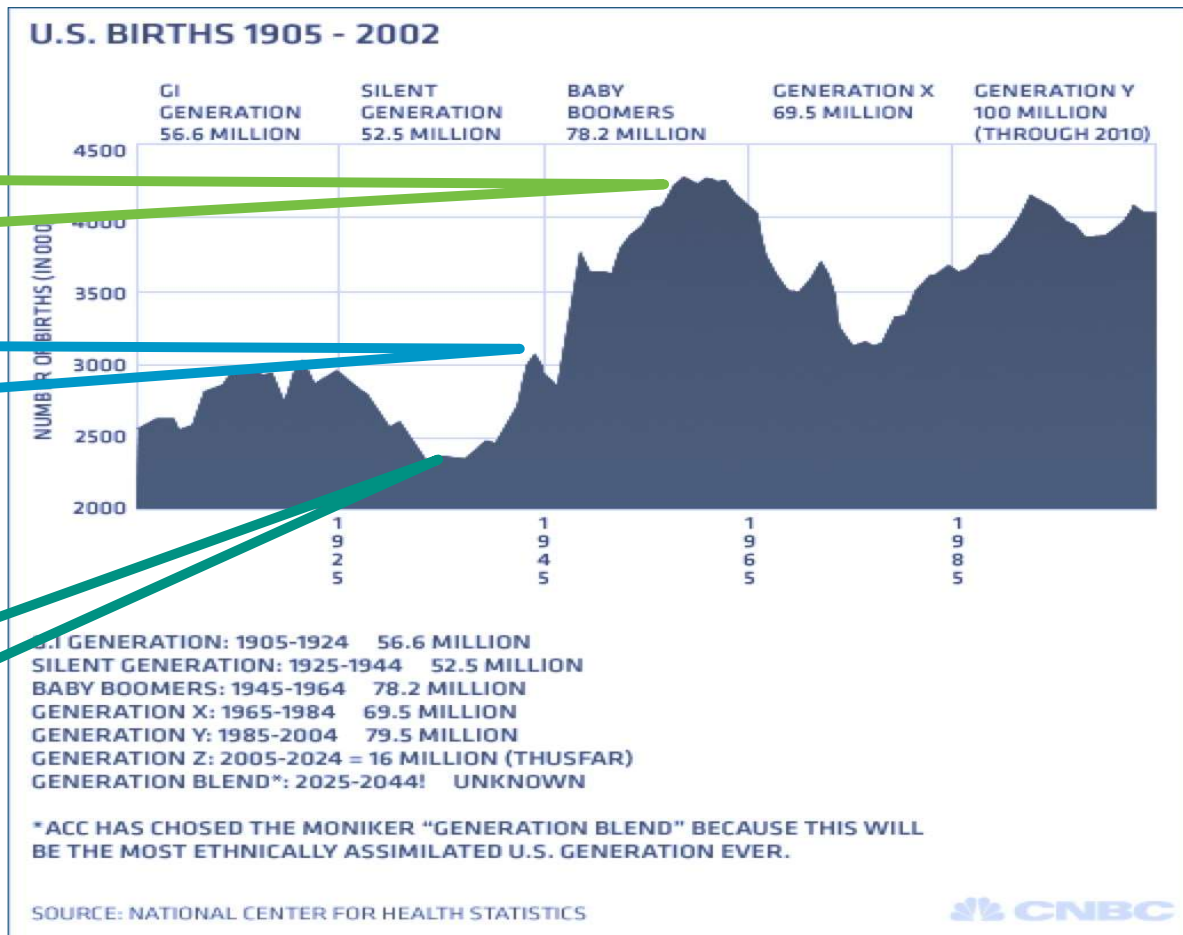


# US Population > 80 Years of Age

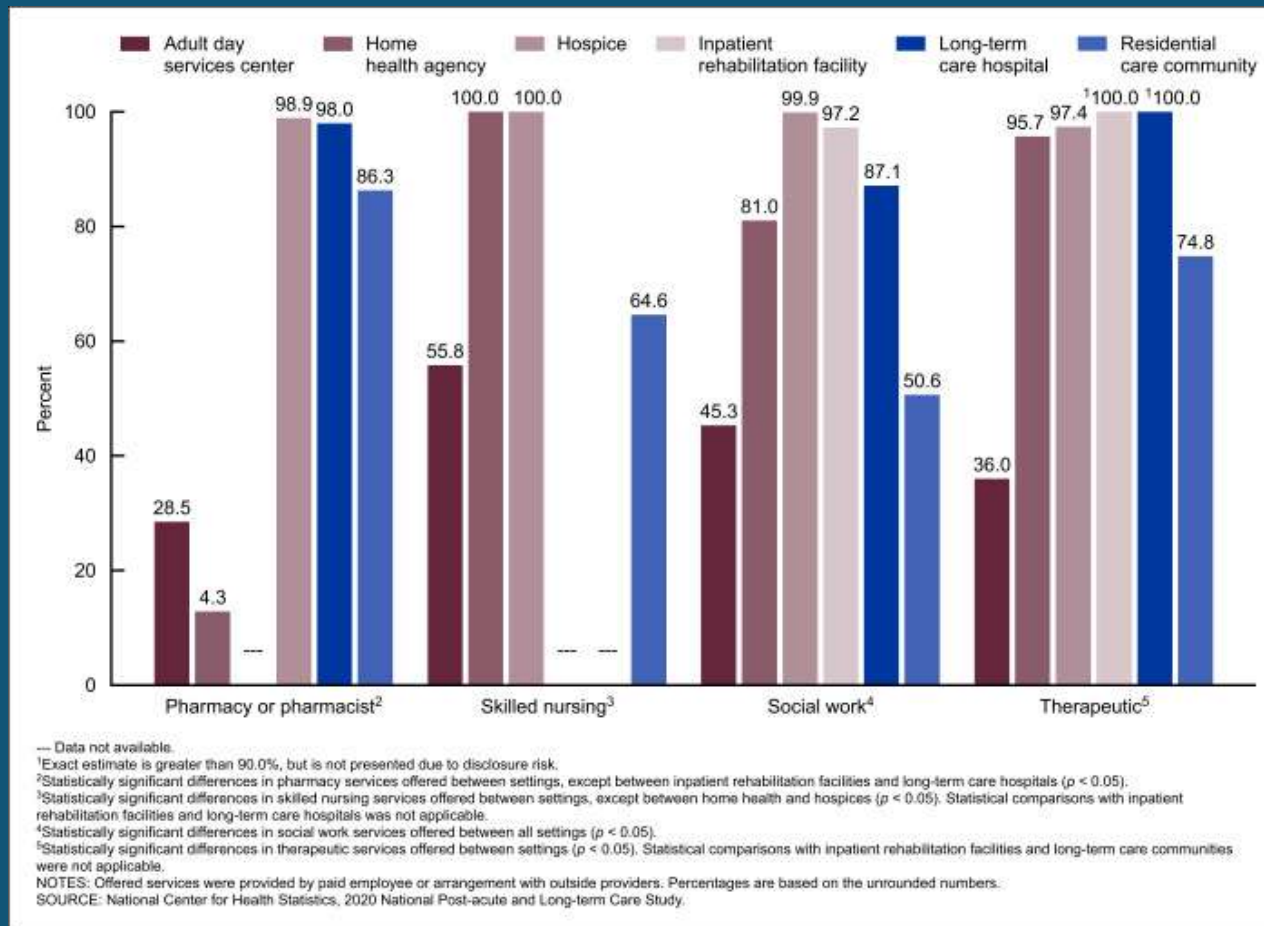
2040  
Born 1960  
80 yoa

2023  
Born 1943  
80 yoa

2018  
Born 1938  
80 yoa

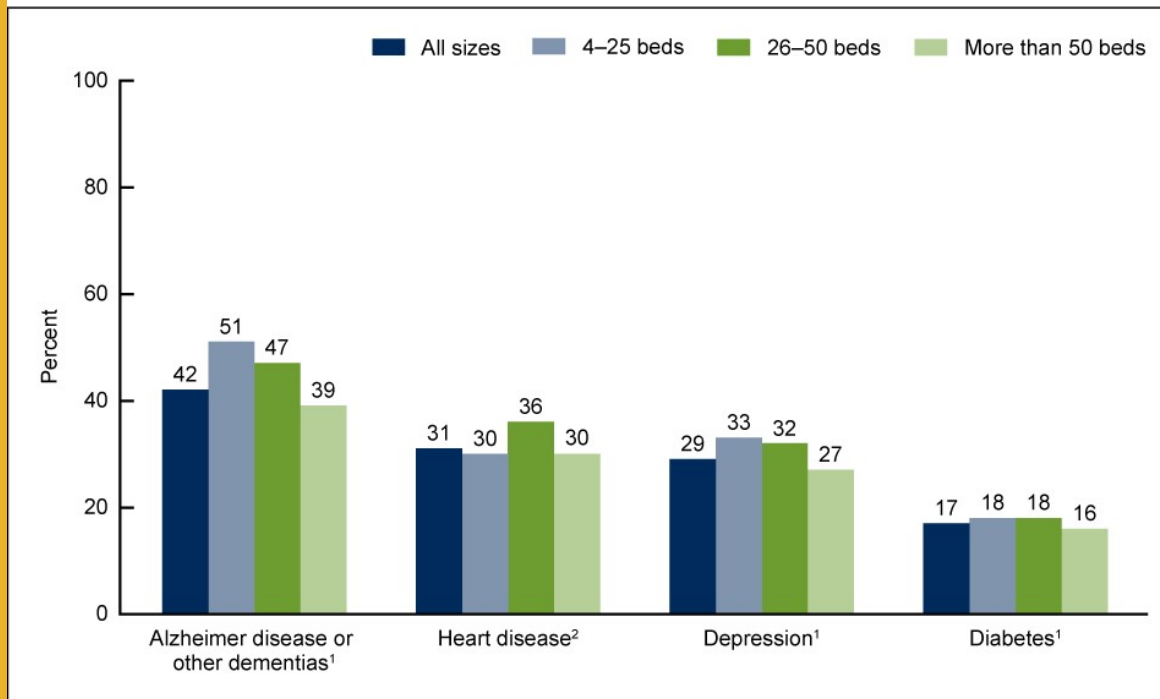


# Pharmacy Services (Other Services)



# Medical Conditions in Assisted Living

Figure 3. Selected diagnosed medical conditions among residential care residents, by community size: United States, 2020



<sup>1</sup>Significantly decreasing linear trend by community size.

<sup>2</sup>Significant difference between communities with 26-50 beds and other community sizes ( $p < 0.05$ ).

NOTES: Cases with missing data are excluded. The four diagnosed medical conditions each had 11.3% missing; see "Data source and methods" for details. Changes in question wording may have contributed to a difference in the estimates from earlier National Post-acute and Long-term Care Study surveys. Access data table for Figure 3 at: <https://www.cdc.gov/nchs/data/databriefs/db454-tables.pdf#3>.

SOURCE: National Center for Health Statistics, National Post-acute and Long-term Care Study, 2020.

# CMS Requirements for Network Long Term Care Pharmacies

- Instituted in 2006 as part of the Medicare Part D criteria for insurance sponsors to provide access to residents of nursing homes for Part D prescriptions.
- CMS recognized that long term care residents required more services than community Medicare Part D beneficiaries
- “To qualify as a LTC pharmacy for a Part D sponsor’s LTC pharmacy network, a pharmacy must currently have the capacity – either by itself or through subcontracts with other entities- to meet all of these performance and service criteria, even if an LTC facility that pharmacy serves does not need a particular service subsumed under those performance and service criteria.” *Medicare Part D Manual Chapter 5*

# CMS Performance and Service Criteria for Network LTC Pharmacies (NLTCs)

- Comprehensive Inventory and Inventory Capacity
- Pharmacy Operations and Prescription Orders
- Special Packaging
- IV Medications
- Compounding/Alternative Forms of Drug Composition
- Pharmacist On-Call Service 24/7
- Delivery Service
- Miscellaneous Reports, Forms and Prescription Ordering Supplies
- Emergency Boxes
- Emergency Log Books

<https://www.cms.gov/files/document/chapter-5-benefits-and-beneficiary-protection-v92011.pdf>

# Comprehensive Inventory and Inventory Capacity

- Medications not normally stocked in a retail pharmacy such as liquid formulations of drugs usually dispensed in as tablets or capsules, IV medications such as antibiotics, etc.
- Pharmacy must have adequate stock to fulfill orders and prescriptions daily – urgent orders are normally delivered within four hours and new maintenance orders within 24 hours
- OTC medications should be available as well – some can be “floor stock” in some states while others should be individually packaged
- Prescriptions or chart orders must be written for OTCs and prescription medications



# Pharmacy Operations and Prescription Orders

- Must meet the requirements of pharmacy practice for dispensing prescription drugs to LTC residents, including but not limited to the performance of drug utilization review (DUR)
- Must have pharmacy software to accept and process both electronic and written prescriptions
- In SNF facilities, the pharmacy is required to perform necessary tasks in the facility and follow the State Operation Manual Appendix PP <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf>
- Pharmacy section 483.45 is what you need to follow



# Pharmacy Operations

- Need to have policy and procedures for both the pharmacy and each facility (nursing home, assisted living, group homes, etc) available for review with PBMs
- Policy and Procedures must include when orders need to sent to pharmacy, when they are delivered, how controlled medications are ordered and delivered, etc. Sample policy and procedure manuals are available through associations
- Follow state rules for assisted living and group homes  
<https://www.ahcancal.org/Assisted-Living/Policy/Pages/state-regulations.aspx>





# Special Packaging

- Compliance Packaging must be provided in 30 days or less (31 days will process in nursing homes with one copay but certain plans will charge two copays for assisted living and group home resident prescriptions)
- Short cycle fill of 14 days or less must be provided for brand oral solids in nursing homes (assisted living and group homes and ICF-IID are exempt from this requirement)
- Oral solids with the exception of products that must be dispensed in original containers must be dispensed in compliance packaging



# Special Packaging (continued)

- Options include punch or bingo cards, medication cards (multiple medications in each bubble), pouch or pillow packages with one or multiple medication in each package
- Patients with unstable chronic conditions may need to have medication dispensed for less than 30 days to avoid delivery of separate packaging for new orders and repackaging of other medications
- Other products like insulin, creams and ointments, and ophthalmic products may need to be dispensed in more than 30 day supply



# Packaging is Very Important for Adherence



# IV Medications



- Must have capacity to provide IV medications regardless of setting (I.E. assisted living, LTC pharmacy at home, etc.)
- Ready to use products like Advantage products or IV Plus
- Put in a clean hood in your pharmacy
- Subcontract with a hospital, home infusion, or company that provides after hours services

# Compounding/Alternative Forms of Drug Composition

- Most compounds used in long term care are not sterile and are fairly easy to make (i.e. combining two creams)
- More complex compounds can be subcontracted with a pharmacy specializing in compounding or sterile compounds if they are required
- Again, pharmacy must have the capacity to provide ordered compounds



# Pharmacist On-Call Service

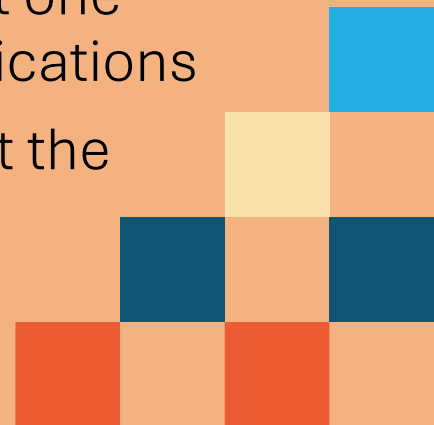


- Must have a phone service to be answered after hours
- PBMs are calling the after hours numbers to verify that the pharmacy is available
- Can have pharmacists take call - \$\$\$\$
- Services are available to take calls and set up delivery of emergency medications with 24 hour pharmacies in your area - \$\$
- You need to have this service including answering questions, delivery of emergency medications, etc for all LTC patients including LTC Pharmacy at Home



# Delivery Service

- Must have at least daily delivery available to all facilities
- Most nursing homes have two delivery services daily (stats in the am or early afternoon and regular delivery in the late afternoon or early evening)
- Delivery should be tailored to the facility's needs
- Most LTC pharmacy at home patients should have at least one delivery per month plus any deliveries for changes in medications
- Deliveries must have a manifest signed off by personnel at the facility either electronically or on paper



# Misc Reports, Forms, and Prescription Ordering Supplies

- More of these reports are now electronic but many assisted living and group homes may still have paper medication administration records
- Pharmacy and facility records should match as to what is dispensed by the pharmacy and what on the medication administration record
- Many facilities order by sending in copies of the labels for reorders and send back with the delivery drivers
- Controlled medications need to be counted and accounted for on a shift by shift basis so forms need to be provided to the facility





# Emergency boxes and logs

- Emergency boxes are required in all nursing homes (federal) – what can be placed in the emergency boxes is determined by state public health or nursing home rules (check your state)
- You do not need emergency boxes or logs for LTC Pharmacy at Home
- Most states do not require emergency boxes in assisted living
- Can use least expensive choice of a tackle box or tool box with plastic locks to automated cabinets that allow the nurses to open the cabinet after the pharmacist authorizes a medication



# Other Services

- Consulting Pharmacist services including drug regimen reviews, education of personnel on administration of medications and how to recognize side effects, etc.
- Coordination of care – for both assisted living and LTC Pharmacy at Home – speaking with both prescribers and either caregivers or the patient to ensure care is appropriate for the patient monthly
- Synching of medications (cycle fills for facilities)
- Reconciliation for patients returning from hospitals or nursing homes



# Exploring LTC pharmacy services

- Vaccines – many closed door pharmacies especially large corporate pharmacies may not provide vaccine administration
- Offer to fill prescriptions for patients being discharged from a Part A stay in a nursing home – level of care change
  - Facility is not paid for the day of discharge for a Part A stay (short stay)
  - CMS is looking to ensure that patients have their medications when changing their level of care
  - Pharmacy can provide a 14 day supply of brand and generic medications and bill Medicare Part D as a nursing home patient if the medication is delivered on the day of discharge



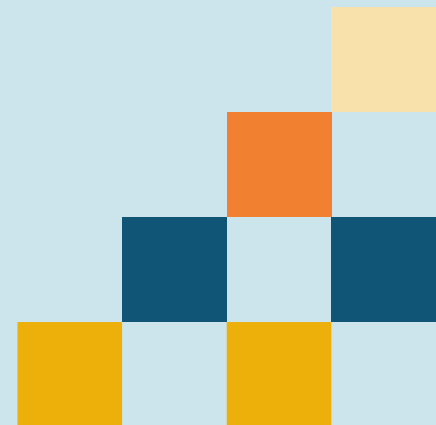
# Explore facilities in your area

- Find group homes and assisted living facilities in your area without great pharmacy service and meet with the administrator or person in charge of the facility
- Review nursing home compare <https://www.medicare.gov/care-compare/?redirect=true&providerType=NursingHome> to see what deficiencies the pharmacy has received during surveys
- Offer to meet with the administrator or director of nursing to offer services to assist them with their issues
- Review patients having caregivers come to get their medications to see if they qualify for LTC Pharmacy at Home services



# Talk to GPOs/PSAOs specializing in LTC Pharmacy

- How do I get LTC reimbursement?
- Who can assist me with decreased costs on brand drugs?
- How about supplies, equipment, and other needs like medication carts?
- Who can assist me with ensuring I am following LTC criteria for CMS and PBMs to make sure I am in a LTC network?
- How do I know if I am billing properly?
- What other services are available to my pharmacy?



# LTC Pharmacy helping vulnerable patients

- More and more people are aging and will need assistance with care and pharmacy services
- Pharmacy services including prescribing the right drug, taking the right drug, right time, right dose, right route
- Coordinating care to ensure the patient does not have duplicate drugs, needs new medications, needs assistance with other care such as food preparation or other services, etc.
- You, at the local pharmacy, are the medical providers able to assist the patient to have the best quality of life



Questions?



# Contact Information

## **Susan Rhodus, RPh**

Senior Vice President, Contracts and  
Advocacy, GeriMed, Inc.

[srhodus@gerimedgso.com](mailto:srhodus@gerimedgso.com)