



Care Points

Omnicare[®]
a CVSHealth company

Welcome to Care Points

Welcome to the 4th Quarter 2016 edition of the *Care Points* Newsletter. This quarter's newsletter will focus on the following items:

Industry Hot Points

- CMS Update
- Nebraska CMS Approves Medicaid Managed Care Rollout

Customer Focus Point

- CVS Backup Program
- Medicare Part D and OmniPlanFinder
- Omnicare Can Service Tricare/Kaiser Residents

Industry Hot Points

► CMS Publishes 'Megarule' Changing LTC Facility Requirements

The Center for Medicare & Medicaid Services (CMS) recently released a [Final Rule](#) making comprehensive changes to requirements that long-term care (LTC) facilities must meet to participate in the Medicare and Medicaid programs. These revised requirements reflect the first overhaul of facility "Conditions of Participation" since 1991.

Broadly speaking, the final rule aims to enhance comprehensive care planning; improve quality of care; reduce infection and hospital readmissions; bolster training; among other priorities. Medication-related policy changes are also a major focus area. For example, the CMS Final Rule requires medication reconciliation at discharge; revises drug regimen review (DRR) policies; imposes new psychotropic drug restrictions; and adds new infection control and quality improvement requirements that involve medication care.

The revised requirements in the Final Rule take effect in three phases, over three years, as follows:

Phase	Effective Date
Phase 1 Changes	November 28, 2016
Phase 2 Changes	November 28, 2017
Phase 3 Changes	November 28, 2019

We draw particular attention to the Phase 1 requirement that LTC facilities provide medication reconciliation as part of a discharge summary for a discharged LTC resident.

With regard to DRR, the Final Rule requires that additional recipients (the Medical Director and Director of Nursing) receive Consultant Pharmacist reports. In addition, the attending physician must document what, if any, actions were taken to address irregularities, among other new requirements. Facilities also must update their DRR policies in several key ways. These changes took effect on November 28, 2016.



Additional Phase 1 medication-related requirements involve infection control and vaccine policies, resident self-administration of medication when clinically-appropriate, and pain management.

Under Phase 2, CMS is imposing new restrictions on use of psychotropic drugs, which includes anti-psychotics, anti-depressants, anti-anxieties, and hypnotics. The rule directs that residents do not receive these medications unless necessary to treat a diagnosed specific condition; and residents receive gradual dose reductions, unless clinically contraindicated. Also, PRN orders for psychotropic drugs are limited to 14 days, subject to exemptions. PRN renewal orders for psychotropic drugs are also limited.

Facilities must have an antibiotic stewardship program in place by the Phase 2 effective date. By the Phase 3 effective date, a facility must develop a comprehensive, data-driven Quality Assurance and Performance Improvement Program (QAPI), which includes some medication-related requirements.

Look for additional information in the upcoming weeks on the new medication-related requirements in the Final Rule from your Omnicare Consultant Pharmacist.

> **Nebraska CMS Approval Allows Medicaid Managed Care Rollout to Proceed**

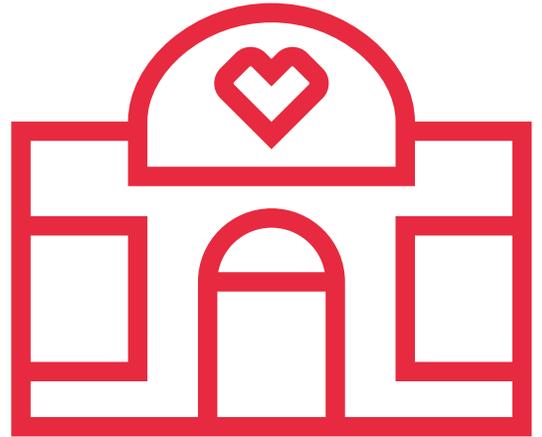
The *Omaha World-Herald* reported on October 4, 2016, that Nebraska has received federal approval to carve behavioral health and pharmacy benefits into Medicaid managed care and expand the program statewide. Nebraska awarded statewide contracts to three health plans earlier this year: United Healthcare Community Plan, Nebraska Total Care (Centene), and WellCare of Nebraska. Eligible members had until December 1 to make a plan selection or be auto-assigned. Under the revamped program, called Heritage Health, all three plans will operate statewide effective January 1, 2017.

> CVS Backup Program

As part of CVS Health, we have rapidly embraced our role as a pharmacy innovation company and remain committed to reinventing pharmacy for the benefit of our customers. The CVS Backup Program is an integrated effort across CVS Retail and Long Term Care Pharmacy and provides an enhanced offering for Omnicare customers.

Nursing staff continues to interact with your respective Omnicare Pharmacy regarding stat/urgent requests. Your Omnicare pharmacy will determine if the medication requires delivery from a CVS Pharmacy retail location in closer proximity and will coordinate delivery as well as communicate the estimated delivery time.

Through the CVS Backup Program, both Omnicare and CVS Pharmacy retail locations are utilized to better coordinate service and extend our pharmacy network. By engaging CVS Pharmacy's ~9,600 retail locations to provide medications in urgent situations, we are able to streamline delivery of urgent prescriptions to long-term care facilities. This is the first of many integrated Omnicare and CVS services to become available to customers.



> Medicare Part D and OmniPlanFinder

The 2017 Annual Enrollment Period for Medicare Part D continues this fall through December 7, 2016. OmniPlanFinder is an excellent tool that can assist your residents in finding a Prescription Drug Plan (PDP) or Medicare Advantage Plan that best meets their needs.

By accessing the OmniPlanFinder tool through Omniview or MyOmniview, pertinent resident information and all of their medications are pre-populated into the tool to streamline the evaluation of available plans and allow for an efficient enrollment process. For more information about OmniPlanFinder, please visit www.omnicare.com/omniplanfinder.

As we move towards the end of 2016, please watch for additional information from your Omnicare representative regarding your dual-eligible beneficiaries and the Prescription Drug Plans in which they are enrolled in for 2017. As we have seen in most years, several of the dual-eligible beneficiaries will still need to choose a Zero Premium plan for 2017 to avoid any out of pocket expenses.

> Did You Know That Omnicare Can Service Your Tricare/Kaiser Residents?



Are you having any of these issues?

- Are you frustrated dealing with 90-day supplies for TRICARE/KAISER residents?
- Are your TRICARE/KAISER resident's medications in bottles and not part of your normal system?
- Does the labeling match your MAR to ensure resident safety?
- Are direction changes difficult to manage with a 90-day supply?
- Do these items take up critical space within your medication cart?
- Does staff spend extra time managing your TRICARE/KAISER resident's medications?
- Are resident's confused by their pharmacy options when filling their TRICARE/KAISER prescriptions?



If you can answer YES to more than one of the questions above, Omnicare may have a solution for you!

- TRICARE/KAISER residents residing in a skilled nursing facility may be eligible for the same co-pay cost as they would receive at a retail pharmacy
- Their medications can be filled with a 30-day supply in the preferred packaging system
- Pharmacists that specialize in senior care are available 24 hours a day/7 days a week
- Medications are delivered daily and on an emergency basis when needed
- Ability to receive electronic prescriptions
- Residents are conveniently billed on a monthly basis for any of their medication needs
- Ongoing medication reviews to ensure appropriateness of the drug regimen, including potential negative drug or allergic interactions when using the local Omnicare Pharmacy



The next steps are easy.

1. Identify any new or existing TRICARE/KAISER resident
2. Share the benefits of utilizing Omnicare through their retail network
3. Provide their insurance information to your Omnicare Pharmacy (highlighting TRICARE/KAISER)
4. Increase resident safety and convenience while improving staff efficiency

You may also reach out to your Omnicare representative if you have additional questions.

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