**2015 Annual Convention**

<table>
<thead>
<tr>
<th>Date:</th>
<th>Tuesday, October 13, 2015</th>
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<tr>
<td>Time:</td>
<td>8:00 am – 9:30 am</td>
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<tr>
<td>Location:</td>
<td>Gaylord National Harbor Resort and Convention Center, National Harbor 11</td>
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<tr>
<td>Title:</td>
<td>LTC Niches: New and Creative Residential Settings</td>
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<tr>
<td>ACPE #</td>
<td>207-000-15-123-L04-P · 0.15 CEUs</td>
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<td>Activity Type:</td>
<td>Application-based</td>
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| Speaker:      | Reed Richardson, Vice President of Customer Experience and Sales, Simple Meds, LLC  
Dixie Leikach, RPh, MBA, FACA, Finksburg Pharmacy  
Doug Russell, RPh, Senior Vice President, Pharmacy Alternatives |

**Pharmacist and Pharmacy Technician Learning Objectives:**
Upon completion of this activity, participants will be able to:

1. Discuss new residential settings occurring in the long term care community.
2. Outline opportunities to market your senior care services, and long term care services to these settings.
3. Discuss programs that can be of use in non-traditional settings.

**Disclosures:**
Reed Richardson is the Vice President of Customer Experience and Sales with Simple Meds, LLC. The conflict of interest was resolved by peer review of the slide content.

Dixie Leikach declares no conflicts of interest or financial interest in any product or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.

Doug Russell declares no conflicts of interest or financial interest in any product or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.

NCPA’s education staff declares no conflicts of interest or financial interest in any product or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.

NCPA is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program is accredited by NCPA for 0.15 CEUs (1.5 contact hours) of continuing education credit.
LTC Niches:
New and Creative Residential Settings

Disclosure

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Learning Objectives

1. Discuss new residential settings occurring in the long term care community.
2. Outline opportunities to market your senior care services, and long term care services to these settings.
3. Discuss programs that can be of use in non-traditional settings.
**Timeline**

Catonsville Pharmacy  
Opened February 1999  
Started with local group home, assisted living, and treatment facility

Finksburg Pharmacy  
Opened October 2003  
Started with Assisted Livings nearby, added local camps and University

Paradise Professional Pharmacy  
Opened 2007  
Specializing in ALF and Group Homes  
LTC Only – same location as CP

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**NICHES – What else is out there?**

- Correctional Institutes  – regional, juvenile, detention centers
- Camps
- Non-Profits
- Universities
- Treatment Facilities
- Private Schools
- Senior Living Communities

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**Foot in the Door**

You have a combo pharmacy – Retail and Long Term Care. There is a small college nearby that is expanding to University status and building a larger campus not far from your pharmacy.

What opportunities might you find here?
Campus Service

- Contact the University to find out if another independent pharmacy is serving their students
- Contact the head of the medical center
- Offer flu vaccine clinics or other allowed vaccinations
- Offer delivery to the med center for student prescriptions
- Conversation about stock medications/emergency supplies/etc.

Discovery

- Bids
- Local business journal
- Observation
- Networking
- Volunteering
  - Owners volunteer extensively with local charity that provides services to elderly
  - Marketing Manager serves on local chamber committees and volunteers for local charities
- What else?

Dixie Leikach, RPh, MBA, FACA
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Neil and Dixie Leikach from America's Pharmacist Magazine
May 2015
Introduction to Serving Individuals with Intellectual and Developmental Disabilities

Disclosure

Doug Russell declares no conflicts of interest or financial interest in any product or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.

Learning Objectives

• Discuss the ID/DD residential setting within the long term care community
• Outline the customer, setting, caregivers, and the opportunity to market your senior services and long term care services to this setting
• Discuss programs that can be of use in the ID/DD setting
Intellectual & Developmental Disability

- **ID/DD:**
  - Intellectual Disability
  - Developmental Disability
- **MI:**
  - Mental Illness
- **MI/IDD: Dual-Diagnosis**
  - Mental Illness
  - Developmental Disability

The ID/DD Customer

**Intellectual & Developmental Disability:**

- US Prevalence: 1-3%*
- Cognitive, emotional, physical impairments
- Manifest before the age of 22yo
- Requires the need of special services, both for physical and cognitive limitations
- Four Different Categories of ID:
  - Mild (Approximately 85% of persons with ID/DD)*
  - Moderate
  - Severe
  - Profound (High prevalence of associated disorders)


The ID/DD Customer

**Typical Diagnosis/Conditions associated with ID/DD:**

- Autism Spectrum Disorder
- Fetal Alcohol Spectrum Disorders
- Down Syndrome
- Epilepsy
- Cerebral Palsy
- Prader-Willi
- Fragile X Syndrome
The MI/IDD Customer

MI/IDD: Dual-Diagnosis
- Mental Illness
- Developmental Disability

- All ages of intellectual and adaptive functioning
- Often the “Dual-Diagnosis” is missed because the person’s behavior is attributed to the Developmental Disability.

The ID/DD Setting

Olmstead v. LC:
- 1999 US Supreme Court decision based on the ADA.
- People with Disabilities have a qualified right to receive state funded supports and services in the community rather than institutions.

The ID/DD Setting

Service Environments:
- Nursing Facilities
- State Institutions
- Public ICF/ID
- Private ICF/ID
- Waiver Settings
  - Community Supported Living
  - Family Home Provider (FHP), Host Home (HH)
  - Adult Day Training, Home, School, work
  - Independent Living
The ID/DD Setting

Service Environments: 634,509 Individuals

- 16+ Persons
  - Nursing Facilities
  - State Institutions
  - Private ICF/DD
  - Total: 73,609

- 7-15 Persons
  - Public ICF/DD
  - Private ICF/DD
  - Other Residential
  - Total: 56,003

- ≤ 6 Persons
  - Public ICF/DD
  - Private ICF/DD
  - Waiver - Supported Living
  - Total: 504,897

Source: Braddock et al., Coleman Institute and Department of Psychiatry, University of Colorado, 2014. http://stateofthestates.org
### The ID/DD Caregiver

**Caregivers:**

**Operational Support Team:**
- Executive Director
- Quality Team
- Residential Manager
- Nursing Team (incl. DON)
- Physician / Psychiatrist
- Pharmacist
- Behavioral Team
- Direct Care Staff (DSP)

**Regulatory Support Team:**
- Family / Friends
- Guardian
- Case Manager
- Dept. for ID/DD Services
- Inspector General
- Adult Protective Services
- Protection and Advocacy

**Committees:**
- Interdisciplinary
- Person-Centered Planning
- Human Rights
- Psychotropic-Medication
- Safety

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### The ID/DD Pharmacy Opportunity

**Dispensing Opportunity:**
- Birth to End of Life
- Packaging Options
  - Vials
  - Med Minders
  - Punch Cards (Unit of Use)
  - Multi-Dose
- Local, Regional, National
- For-Profit, Not-for-Profit
- Religious Affiliations
- Medical Records (Paper & Electronic)
- Billing Support

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### Clinical / Educational Opportunity:

- Medication Management Program
- Disease State Management
- Pharmacy Consulting
- Speaker Programs
- Newsletter
- Social Media
Resources

State of the States
www.stateofthestates.org

American Association of Intellectual and Developmental Disabilities
www.aaidd.org

ANCOR Foundation
www.ancor.org

Developmental Disabilities Nurses Organization
www.ddna.org

Thank You

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Medical At Home
Aging in Place
Disclosure

Reed Richardson is the Vice President of Customer Experience and Sales with Simple Meds, LLC. The conflict of interest was resolved by peer review of the slide content.

Think Differently About Pharmacy

- Aging Population
- Results driven reimbursement model
- Narrowed networks and preferred providers
- Industry consolidation

More and more seniors plan to age in place
Where do You plan to age?

90% of seniors plan to age in their own home.*

46% of seniors entering nursing homes do so because they are unable to self medicate.*

Why is this important?

15,401 Certified nursing facilities in the U.S.

55,000,000 Seniors by 2020


Why is this important?

Certified nursing facilities in the U.S.

Seniors by 2020

15,401

55,000,000

http://kff.org/medicaid/report/nursing‐facilities‐staffing‐residents‐and‐facility‐deficiencies‐2009‐through‐2014/

Medical at Home

What is Medical at Home

A model or philosophy of primary care that is patient-centered, comprehensive, team-based, coordinated, accessible, and focused on quality and safety.

Senior Issues

- Seniors own Home
- Family Members Home
- Assisted Living Facility
- Independent Living
- Skilled Nursing Facility
- Traditional Nursing Home
- Group Homes
- Therapy-Related
- Condition-Related
- Patient-Related
- Socioeconomics
- Healthcare access
Collaborative effort by pharmacy to provide high level services to a patient aging in place

**Medical at Home – Pharmacy**

Hybrid Pharmacy Concept

- Adjust needs from traditional dispensing
- Taking care of the residential senior

**Defining the Hybrid Model**

- Communication
- Focus on Quality and Outcomes
- Ease of Use
- Learn and Develop
One solution to the challenge

- All medications dispensed together
- Packaged according to date, day and event time
- Monthly communication

Medical at Home

Medical Objective
Enhance the Lives of Aging Adults and Their Families

Medical Solution
Caregiver + Medication Management

Structure

- Offer medical at home services to patients struggling to manage multiple medications
- Medication reconciliation on all the patients
- Rx Alignment
- Physician engagement
- MTM services
- Communication with Caregiver and/or Family
Outcomes

High Engagement Utilization

Currently Reviewing Data
- Adherence
- Customer satisfaction
- Reduction in HRM’s
- Completion of CMR’s
- Reviewing reduction in hospitalizations
- Extended period of time at home

Keys to Success

- High Touch
- High Tech
- MTM Services
- Rx Alignment
- Communication with Physicians

Thinking Outside the Box

- Thought Leadership
- Transitional Care
- Sharing Results
“The secret of change is to focus all of your energy, not on fighting the old, but on building the new”
- Socrates