



**NCPA is the voice of  
independent pharmacy  
on Capitol Hill**

**March/April 2018**

### **LTC pharmacy protections in opioid bills advance with NCPA LTC Division's advocacy**

Exemptions for long-term care, as well as language that would ensure electronic prescribing will not infringe on a patient's right to go to their pharmacy of choice, were included in proposed federal legislation, thanks to NCPA's LTC Division advocacy.

Last week, both chambers of Congress took the first steps in advancing legislation to address the opioid crisis. The Senate Health, Education, Labor, and Pensions Committee unanimously advanced the bipartisan, comprehensive *Opioid Crisis Response Act of 2018*. NCPA worked with the committee to ensure that a provision encouraging states to have authorized users check PDMPs would not be a federal mandate on pharmacists.

The House Energy and Commerce Subcommittee on Health reviewed 64 bills to address the opioid crisis, advancing 57 of them. Two bills supported by NCPA advanced to the full committee. H.R. 4275, *The Empowering Pharmacists in the Fight Against Opioid Abuse Act*, would require HHS to develop and disseminate education materials to provide pharmacists greater understanding and ability to detect prescriptions that are fraudulent, forged, or appear to be for abuse or diversion. H.R. 3528, *Every Prescription Conveyed Securely Act*, would require electronic prescribing for coverage of prescribed controlled substances under the Medicare Part D program. NCPA was instrumental in ensuring that long-term care patients will be exempted from the requirement for electronic prescriptions for controlled substances.

The full committee mark-up of opioid legislation is expected in May and NCPA LTC Division Advocacy will be there, watching out for you and the patients you serve.

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### **2019 CMS Final Call Letter Includes Important Changes for Pharmacies**

CMS is improving drug utilization review controls in Medicare Part D for the 2019 contract year. The following are important changes for pharmacies:

- **There is a new hard safety edit for opioids.** All Part D sponsors must implement a hard safety edit to limit initial opioid prescription fills for the treatment of acute pain to no more than a seven-day supply.

### **Sponsor Spotlight**



GeriMed is a group services organization, that for over 35 years, has been committed to equipping independent LTC (closed-door and combo) pharmacies with exceptional tools and services to enable their business growth and the provision of quality care to the LTC patients they service. GeriMed's vast LTC pharmacy expertise, combined with a unique suite of profitability and technological solutions, result in the strategic positioning of independent pharmacies in the competitive LTC marketplace without sacrificing any of the personable relationships that make independent pharmacies great. To learn more, visit [www.gerimedgso.com](http://www.gerimedgso.com), or contact us at 1-800-456-4374, [info@gerimedgso.com](mailto:info@gerimedgso.com).

### **ICYMI: Marketing your pharmacy to LTC facilities webinar available online**

In case you missed Jeff Ehlan from Vanzari Solutions discussing marketing and sales strategies for growing your LTC business, you can check out the recording under [business resources](#) on the LTC page.

### **Proud sponsors of the NCPA LTC Division:**

- **All Part D sponsors must implement a real-time safety edit at 90 MME per day at the time of dispensing.** This formulary-level safety edit would trigger when a beneficiary's cumulative MME per day across their opioid prescriptions reaches or exceeds 90 MME.

It is important to note the CMS explicitly states that "Sponsors should exclude beneficiaries who are residents of a long-term care facility, in hospice care or receiving palliative or end-of-life care or being treated for active cancer-related pain."

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### New Part D Rule Moves Closer to Point-of-Sale DIR Fees

In a 1,000-page final 2019 Medicare Part D rule released recently, the Centers for Medicare & Medicaid Services asserted its statutory authority to require that some portion of rebates and all pharmacy DIR fees be applied at point of sale. The final rule stops short of requiring such a change, instead stating that "any new requirements regarding the application of rebates at the point of sale would be proposed through notice and comment rule-making in the future."

CMS' recognition of the need to address the issue at all is largely the result of NCPA's forceful lobbying and input.

The final rule also reflects NCPA's input on a handful of other Part D issues important to LTC pharmacists, including:

- **Transition fills:** The transition fill supply policy effective for plan year 2019 requires Part D sponsors to provide as a minimum (unless prescriptions are written for fewer days) an approved month's supply for enrollees in both the LTC and outpatient settings. Of note: This policy is not applicable in cases in which a Part D sponsor substitutes a generic drug for a brand-name drug.
- **Treatment of accreditation:** The rule clarifies that Part D sponsors cannot limit dispensing of certain drugs (such as "specialty" drugs) or drugs for certain disease states to a subset of network pharmacies if a pharmacy is capable of and appropriately licensed under applicable laws and agrees to meet the sponsor's standard terms and conditions.
- **Standard terms and conditions:** The final rule requires Part D plan sponsors to develop standard terms and conditions and make them ready for distribution by Sept. 15 each year. Part D plans must provide the applicable standard terms and conditions to a requesting pharmacy within seven business days of receipt of request.



- **Any willing pharmacy:** Although Part D plan sponsors may continue to tailor their standard terms and conditions for various types of pharmacies, the final rule clarifies that Part D plan sponsors may not exclude pharmacies with unique or innovative business or care delivery models from participating in their contracted pharmacy network simply on the basis of not fitting in a Part D plan sponsor's particular pharmacy type classification.
- **CMS is finalizing the CARA drug management program that includes a prescriber/pharmacy "lock-in."** The drug management program could limit an at-risk beneficiary's access to coverage of frequently abused drugs beginning in 2019 through a beneficiary specific point-of-sale claim edit and/or by requiring the beneficiary to obtain frequently abused drugs from a selected pharmacy(ies) and/or prescriber(s) after case management and notice to the beneficiary. Note that nursing home patients will be exempt from any lock-in.




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### Medicare plans to roll out new nursing home payment system

Medicare is rolling out a new payment system for nursing homes that's based on patients' clinical needs instead of the amount of therapy received, CMS recently announced in a proposed payment rule. Changes with the new system, called the Patient Driven Payment Model, would take effect next October. The new model will move away from volume of services delivered. CMS is seeking feedback on whether it should make sharing patient information a condition for post-acute facilities like nursing homes and rehabilitation centers to participate in Medicare. The NCPA LTC Division will closely track and comment on any changes that could impact access to LTC pharmacy services. Nursing homes will receive a 2.4 percent increase in Medicare payments for FY19 under the proposed rule. See more info [here](#).

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### House committee continues probe of abuse, neglect, and patient harm at nursing homes

On April 2, leaders of the Energy and Commerce Committee sent a [letter](#) to CMS to request information and documents about CMS's role overseeing all SNF and NFs participating in the Medicare and Medicaid programs. The letter was sent in response to media reports detailing instances of abuse, neglect, and patient harm.

The letter follows an [October 2017](#) letter to the owner of the Rehabilitation Center at Hollywood Hills, LLC, the Florida nursing

home that lost 14 residents in the wake of Hurricane Irma, after the facility's air conditioning failed.

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## May brings marketing opportunities for your LTC business

Celebrate May as **Older Americans Month** by hosting a wellness event at your local facility. Free resources can be found [here](#). Don't forget to show your appreciation to the directors of nursing and nursing staffs during **National Nurses Week, May 6-12**.

To unsubscribe from promotional emails and surveys but continue to receive important updates about community pharmacy issues, [click here to manage your subscription preferences](#).

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