## C.A.R.E.S. Pharmacy Network Newsletter

Spring 2018, Issue 5





Please visit the C.A.R.E.S. Pharmacy Network webpage at: https:// alpharmacycares.org/

Editor: Tessa Hastings, MS tjh0043@auburn.edu

I hope you are enjoying the spring season. Our team strives to increase enrollment of pharmacy network members and strengthen relationships with current network members through newsletters and a new CE program. Since the last time I communicated with you, we have several new updates.

We have launched the 2nd 1hour C.E. article that discusses the basics of Medicare. This article was written for pharmacy personnel so you will find information relevant to your practice. We offer it to our network members, as a refresher course, at no cost. The more we know about Medicare, the more we can help our patients!

Last time, we provided you with patient education materials about Annual Wellness Visit (AWV). In

#### INSIDE THIS ISSUE

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- New CE Article & Network Members New Medicare Card Poster

this issue, the Medicare Pearl Points section describes AWV in more detail. AWV is severely underutilized. Pharmacists are in a great position to recommend the use of AWV among the Medicare population. If you need more AWV educational materials from us, please let us know.

Our website, https:// alpharmacycares.org/, was recently updated. You are welcome to check out all available CE programs that we offer. Feel free to let other pharmacists and technicians know about our program if they are not yet part of the network.

I would also like to highlight our featured member, Pharmacist Eischens of Winn-Dixie. We also believe you would like to know our SHIP director, Ms. Jalieba, who oversees the implementation of local SHIP activities throughout the state.

As a reminder, you can now fax referrals to 334-242-5594 or scan and email it to

misty.Barnes@adss.alabama.gov.

These fax and email options are available in addition to our traditional method of mailing referrals in the pre-stamped envelopes provided to you as a network member.

We also have a plan that will connect your local SHIP counselors and ADRC representatives to your pharmacy. Stay tuned for this exciting development!

Our team plans to attend the annual Alabama Pharmacy Association Convention, as an exhibitor in Fairhope, AL on June 11 and 12. If you are there, please stop by to say hello.

Once again, we thank you for your continuing participation in our growing network. We welcome your suggestions to improve our network and serve your needs.



Salisa Westrick, PhD Sterling Professor **Health Outcomes** Research and Policy

### Preventive Services Offered by Medicare Part B: The Role of Pharmacists and Pharmacy Technicians

Lindsey Hohmann, PharmD

Preventive healthcare and wellness is an important part of today's medical practice. As the proportion of older adults in the US continues to rise, chronic conditions like diabetes and heart disease become more prevalent. In fact, over 100 million Americans had one or more chronic conditions in 2012, which is very concerning given the associated increased mortality and

decreased quality of life.¹ These conditions also lead to a significant economic burden on patients and the healthcare system, costing over \$200 billion in lost productivity and \$2 trillion in healthcare expenditures annually.²-⁴ Thus, measures to curtail or reduce the development or progression of chronic conditions, especially in older adults at higher risk of complications like hospitalization and nursing home placement, are sorely needed.⁵-8

Preventive screenings and services through Medicare Part B offer a solution. In 2010, the Affordable Care Act (ACA), in conjunction with the Medicare Improvement for Patients and Providers Act (MIPPA) of 2008, established a set of preventive health services for older adults and certain disabled individuals that are covered at no charge to the patient. To date, 26 preventive health services fall into this category, including diabetes screening, medical nutrition therapy, mammograms, and prostate cancer screening (Table 1). 10,11 Wellness visits, encompassing the Initial Preventive Physical Examination (IPPE; also known as the Welcome to Medicare Visit) and Annual Wellness Visits (AWV), are also included within this set of services. These wellness exams/consultations are offered during the first and subsequent years of enrollment in Medicare Part B, respectively, with the goals of identifying, providing or recommending needed preventive health services. 10,11

However, despite being offered at no cost to Medicare beneficiaries, utilization of wellness exams is low. Only 17.7% of eligible Medicare enrollees in the US, & 13.8% in Alabama, received an AWV in 2015. This low uptake may be due in part to patient unfamiliarity with AWVs & competing demands on providers' time. The may be utilize non-physician & allied healthcare professionals like pharmacists to increase patient awareness & relieve demand on physician time. The may be utilized at no cost to Medicare beneficiaries, utilization of wellness exams is low. Only 17.7% of eligible Medicare enrollees in the US, & 13.8% in Alabama, received an AWV in 2015. The competing of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time. The may be utilized as a support of the unitarity with AWVs & competing demands on providers' time.

#### **Table 1. Medicare Part B Preventive Services**

- 1. Advance Care Planning (ACP) as an Optional Element of an AWV
- 2. Alcohol Misuse Screening and Counseling
- Annual Wellness Visit (AWV)
- 4. Bone Mass Measurements
- 5. Cardiovascular Disease Screening
- . Colorectal Cancer Screening
- 7. Counseling to Prevent Tobacco Use
- 8. Depression Screening
- 9. Diabetes Screening
- 10. Diabetes Self-Management Training (DSMT)
- 11. Glaucoma Screening
- 12. Hepatitis C Virus (HCV) Screening
- 13. Human Immunodeficiency Virus (HIV) Screening
- 14. Influenza, Pneumococcal, and Hepatitis B Vaccinations
- Intensive Behavioral Therapy (IBT) for Cardiovascular Disease (CVD), also known as a CVD risk reduction visit
- 16. Intensive Behavioral Therapy (IBT) for Obesity
- 17. Welcome to Medicare visit or Initial Preventive Physical Examination (IPPF)
- 18. Medical Nutrition Therapy (MNT)
- 19. Prostate Cancer Screening
- 20. Screening for Cervical Cancer w/ Human Papillomavirus (HPV) Tests
- 21. Screening for Lung Cancer with Low Dose Computed Tomography
- Screening for Sexually Transmitted Infections (STIs) and High
   Intensity Behavioral Counseling (HIBC) to Prevent STIs
- 23. Screening Mammography
- 24. Screening Pap Tests
- 25. Screening Pelvic Examination (includes clinical breast examination)
- 26. Ultrasound Screening for Abdominal Aortic Aneurysm (AAA)

References available here:

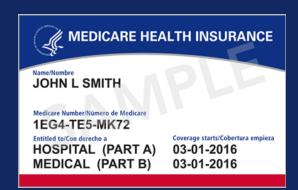


Pharmacists can help increase patient awareness of AWVs and Medicare Part B preventive services. By identifying and educating potentially eligible patients at the point of prescription drop-off, pick-up, or consultation, pharmacists and pharmacy technicians can alert patients to little-known preventive services (Table 1) and refer them to local physician offices for further assistance. Please ask a member of the C.A.R.E.S. team if you would like educational brochures for patients regarding available Medicare Part B preventive screenings and wellness visits to help start the conversation with your patients.

Pharmacists can also help to relieve demand on physician time by providing AWVs and other preventive services in their own practices. According to Medicare guidelines, IPPEs can only be provided by physicians and qualified non-physician practitioners like physician assistants and nurse practitioners; however, under the supervision of a physician, AWVs and associated preventive services can also be provided by additional allied health professionals, including pharmacists. This represents an opportunity for pharmacists to expand their scope of practice and revenue stream – although it varies by state, the average reimbursement for provision of an AWV is \$120-170, plus reimbursement from any additional preventive services resulting from the AWV. Although under current Medicare law, pharmacists cannot bill Medicare Part B for provision of these services, physician offices can bill for pharmacist-delivered services. Evans et al provides a detailed example of how a business model can be established between a physician's office and pharmacist for profit-sharing. If you are interested in reading Evans and colleagues' paper, please contact us and we will share it with you.

We hope we provided some food for thought regarding the role of pharmacists and pharmacy technicians in Medicare Part B preventive services! What are your thoughts on this topic? Do you already provide these services, and if so, what challenges do you face? Please share your thoughts with us, and we'll be happy to share your feedback in the next issue of our newsletter!

# New Medicare Cards Coming to Alabama in June!



The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 requires the Centers for Medicare and Medicaid Services (CMS) to remove Social Security Numbers (SSNs) from all Medicare cards by April of 2019. The removal of SSNs from Medicare cards will help to protect patients' private health care and financial information. Many patients fall victim to Medicare fraud as a result of SSNs being listed on Medicare cards. SSNs will be replaced with a unique Medicare Beneficiary Identifier (MBI). This new MBI will be used for all transactions including billing, eligibility, and claims. It's important to note that the new cards and MBI will not change the benefits Medicare patients receive. The transition period began in April of this year and in Alabama, patients will be mailed their new Medicare card beginning June 1st, 2018. Throughout the transition period (April 1, 2018- December 31, 2019) both the new MBI and old numbers will be accepted. However starting January 1st, 2020 only the new number will be accepted. If you assist your patients in comparing part D plans, the medicare.gov plan finder will also accept both numbers through the transition period.

#### How can I help my patients?

- Remind them to make sure their mailing address on file with the Social Security Administration is up to date.
- 2. Patients should be reminded that CMS will not contact them via phone for personal information.
- 3. Print and display the New Medicare Card poster in your pharmacy (attached at the end of this newsletter and available to print in English and Spanish at <a href="https://www.cms.gov/Medicare/New-Medicare-Card/Providers/Providers.html">https://www.cms.gov/Medicare/New-Medicare-Card/Providers/Providers.html</a>)



## Featured Pharmacy Member Barbara Eischens, RPh Winn-Dixie Selma, AL

Barbara Eischens is the pharmacist and leader of the C.A.R.E.S. initiative at the Winn-Dixie pharmacy located in Selma, AL. Our newest member of the C.A.R.E.S. Pharmacy Network, joining this past fall, Barbara and the Winn-Dixie team have already grown to be one of our top pharmacies in terms of patients assisted through the C.A.R.E.S. referral system.

Barbara initially sought out information related to programs available for older adults to assist her own relatives. When she was able to apply this knowledge to help patients at her pharmacy, she realized that advocates helping to navigate the complicated process of enrolling in a Medicare Advantage or prescription drug plan is a necessity for most older adults. Barbara has found that assistance programs like the Low Income Subsidy (LIS) make a significant difference in her patients' ability to obtain their much needed medications thereby improving both the physical and financial health of the patients in her area. She states that practicing in an economically depressed area with a customer base at a lower income level makes her more aware and sensitive to these issues. "I make it a priority to get to know my patients. Many of my patients are single /widowed elderly people. It is important to ask each one if they are enrolled in a drug plan and if so, whether they have applied for the limited income subsidy. If there is even a chance they can qualify, I take the time to explain

the program. We fill the card out at the pharmacy and mail it for them." Barbara has involved her technicians in this process (photographed above from left to right: Micah Hutton, Kay Wilson, and Sabrina Garrett). Micah, Kay, and Sabrina begin the conversation and if the patient is receptive, Barbara will speak with them to explain the program and how they will be contacted.

Barbara and the Winn-Dixie team have always been active in assisting patient having trouble affording their medications, prior to joining the C.A.R.E.S. Network. She states, "We still help them look at plans that are most cost effective when they are planning to enroll or during open season. We still help them find patient assistance programs. This program allows us to give them access to the professionals whose actual job is to provide guidance and to screen for eligibility. It is quite efficient." The high quality care provided by the Winn-Dixie staff does not go unnoticed in the Selma community, "We have had very positive responses. Each person who has been better able to afford their medications, each one who came in not knowing what they needed to do or how to ask for help, each person who maintained their dignity while getting better healthcare has said thank you many times over. That is so heartwarming. Perhaps though, the best feedback has been when they have sent us their friends as new patients."



SHIP Spotlight

Sharon Jalieba SHIP Director Sharon Jalieba has been the State Health Insurance Assistance Program (SHIP) Director For the Alabama Department of Senior Services (ADSS), since August of 2015. She holds a Bachelor of Science in Human Services with a concentration in Social Work and a Masters in Education with a concentration in Administration & Leadership. Combined with the state of Florida and Alabama, Sharon has over twelve years of experience in the realm of Social Services (children & adults).

Her position as SHIP Director entails management of SHIP grants and contractual activities including grant management of Medicare Improvements

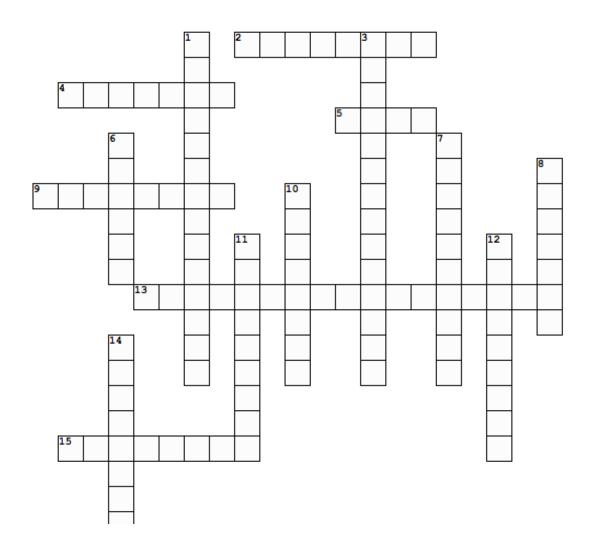
for Patients and Providers (MIPPA), evaluating and monitoring SHIP, MIPPA, and Senior Medicare Patrol (SMP) programs, reporting and grant activity. She is responsible for understanding all



performance measures as well as providing training and technical assistance to project partners/coordinators,

and guidance for SHIP and SMP. She also raises awareness of ADSS, SHIP, SMP, and other aging programs. Sharon regularly drafts, compiles, completes, and submits reports to ADSS' Federal Partners Administration for Community Living (ACL).

Sharon stated that one of her inner most passions is serving/assisting others. Her motivation to continue to serve/advocate for Alabama's seniors is that she thinks of each senior as if he/she were her parent/grandparent/loved one. "How would I want them to be treated" I would want them to be treated with kindness, patience, respect, and dignity.



#### Across

2. THE SECOND 1-HOUR CE ARTICLE IS NOW AVAILABLE AT NO COST AND DISCUSSES THE BASICS OF MEDICARE FOR PERSONNEL. 4. COUNSELING TO PREVENT USE IS JUST ONE OF THE 26 SERVICES OFFERED AT NO CHARGE THROUGH MEDICARE PART B. 5. NEW MEDICARE CARDS ARE SCHEDULED TO BE SENT TO ALABAMA MEDICARE BENEFICIARIES BEGINNING IN 2018. 9. AWV STANDS FOR ANNUAL VISIT. 13. OVER 100 MILLION AMERICANS HAD ONE OR MORE \_IN 2012. 15. OUR TEAM HOPES TO SEE YOU AT THE ANNUAL ALABAMA PHARMACY ASSOCIATION CONVENTION

LOCATED IN \_\_\_\_\_, AL.

#### Down

 THE NEW MEDICARE CARDS WILL NO LONGER INCLUDE NUMBER. 3. THE AVERAGE REIMBURSEMENT FOR PROVISION OF VISIT IS \$120-170. 6. PREVENTIVE SERVICES CAN BE PROVIDED BY HEALTH PROFESSIONALS UNDER THE SUPERVISION OF A PHYSICIAN. 7. CERTAIN SCREENINGS AND SERVICES ARE OFFERED AT NO CHARGE THROUGH MEDICARE PART B. 8. PATIENTS SHOULD BE REMINDED TO UPDATE THEIR \_ WITH THE SOCIAL SECURITY ADMINISTRATION. 10. SHARON JALIEBA IS ALABAMA'S SHIP 11. BARBARA EISCHENS, OUR FEATURED PHARMACIST, IS LOCATED AT \_\_\_\_\_\_ PHARMACY IN SELMA, AL. 12. MIPPA STANDS FOR MEDICARE IMPROVEMENT FOR PATIENTS AND 14. IPPE STANDS FOR INTITIAL PREVENTIVE \_ EXAMINATION.

#### **NEW CE ARTICLE AVAILABLE!!**

In partnership with Alabama Department of Senior Services (ADSS), the Harrison School of Pharmacy has developed a new ACPE approved one credit hour CE article available at no cost to you or your technician. As a network member, we are offering this to you as a refresher course.

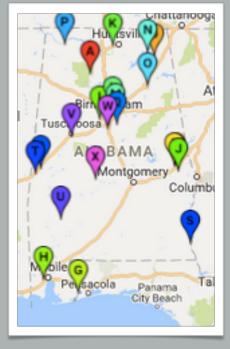
If you would like to complete this course and receive credit, simply review the educational material and complete the post-test and evaluation in the next month or so. You can access the CE at https://alpharmacycares.org/ where it is available as a downloadable pdf. The assessment is included within the CE pdf and upon completion, can be faxed to 334-844-8307, or emailed to Tessa Hastings at tjh0043@auburn.edu. Alternatively, you may complete the assessment online at https://alpharmacycares.org/.

For non-network members this course is offered as an introduction prior to completion of the 3 credit hour training required for enrollment in the C.A.R.E.S. Pharmacy Network. If additional staff at your pharmacy are interested, please pass this information along. Further, the online continuing education (CE) program is still available at no cost for any Alabama pharmacists or technicians. The program will provide 3 ACPE approved credit hours and can be completed at their convenience. This program will provide updated information regarding programs for Medicare patients with limited income and

how to efficiently and effectively assist these patients.

#### **Network Members**

- A) Addison Discount Pharmacy | Addison, AL
- B) Kroger Pharmacy | Opelika, AL
- C) Walgreens Pharmacy #6955 | Hueytown, AL
- D) Rainsville Drugs | Rainsville, AL
- E) Walmart Neighborhood Market | East University location, Auburn, AL
- F) Walgreens Pharmacy #4589 | Pelham, AL
- G) Lillian Pharmacy | Lillian, AL
- H) Pharmacy Services of Mobile | Mobile, AL
- l) Weldon Pharmacy | Hueytown, AL
- J) Beauregard Drugs | Auburn, AL
- K) Rite Aid Pharmacy #07054 | Madison, AL
- L) Rite Aid Pharmacy #07013 | Birmingham, AL
- M) Continuity of Care Internal Medicine Clinics-Brookwood Baptist Health | Birmingham, AL
- N) Section Pharmacy | Section, AL
- O) Gadsden City Pharmacy | Gadsden, AL
- P) Fred's Pharmacy #3056 | Tuscumbia, AL
- Q) Walmart Pharmacy #4330 | Chelsea, AL
- R) The Drug Store | Livingston, AL
- S) Beasley Pharmacy | Columbia, AL
- T) York Drug | York, AL
- U) City Drugs | Grove Hill, AL
- V) Walgreens Pharmacy #10525 | Tuscaloosa, AL
- W) Walgreens Pharmacy #9427 | Pelham, AL
- X) Winn-Dixie Pharmacy #0543 | Selma, AL



If you are interested or want more information about either CE program, please visit https:// alpharmacycares.org/

### Crossword Puzzle Key:

DOWN:

1. SOCIALSECURITY
3. ANNUALWELLUESS
6. ALLIED
7. PREVENTIVE
8. ADDRESS
8. ADDRESS
9. ANNUALWELLUESS
9. ANNUALWELL

ACTOSS:

2. PHARMACY
5. UNUE
5. UNUE
7. TOBACCO
13. CHRONICCONDITIONS
15. FAIRHOPE

## **New Card! New Number!**



### **Current Medicare Card**

HEALTH IN **MEDICARE** 1-800-MEDICARE (1-800-633-42)

**FEMALE** 

EFFECTIVE DATE

07-0

07-0

NAME OF BENEFICIARY

JANE DOE

MEDICARE CLAIM NUMBER

000-00-0000-A IS ENTITLED TO

HOSPITAL

(PART A) MEDICAL (PART B)

**NEW Medicare Card** 



## MEDICARE HEALTH INSURANCE

Name/Nombre

JOHN L SMITH

Medicare Number/Número de Medicare

1EG4-TE5-MK72

Entitled to/Con derecho a

HOSPITAL (PART A) MEDICAL (PART B)

Coverage starts/Cobertura empieza

03-01-2016

03-01-2016



CMS Product No. 12009-P

## You're Getting a New Medicare Card!



Medicare will mail new Medicare cards between April 2018 - April 2019. Your card will have a new Medicare Number instead of a Social Security Number.

Make sure your mailing address is up to date so you get your new card. Visit ssa.gov/myaccount or call 1-800-772-1213 (TTY:1-800-325-0778) to correct your mailing address.

Visit **Medicare.gov** for the latest updates.

