



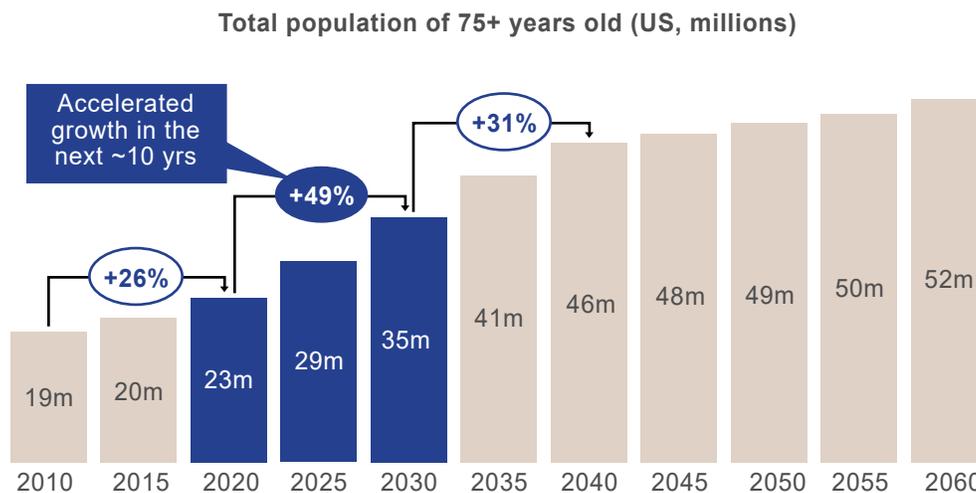
Multi-Pharmacy in Assisted Living: Challenges and Opportunities

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Overview

Seismic changes from demographic and market trends are increasing the demand for assisted living. The need is expected to continue to grow in the next decade, with the last of the baby boomers reaching age 65 in 2029. By 2030, potentially 74 million people will be seeking senior living communities, and assisted living is the fastest-growing segment of the market, multiplying at a rate of three to four percent a year.



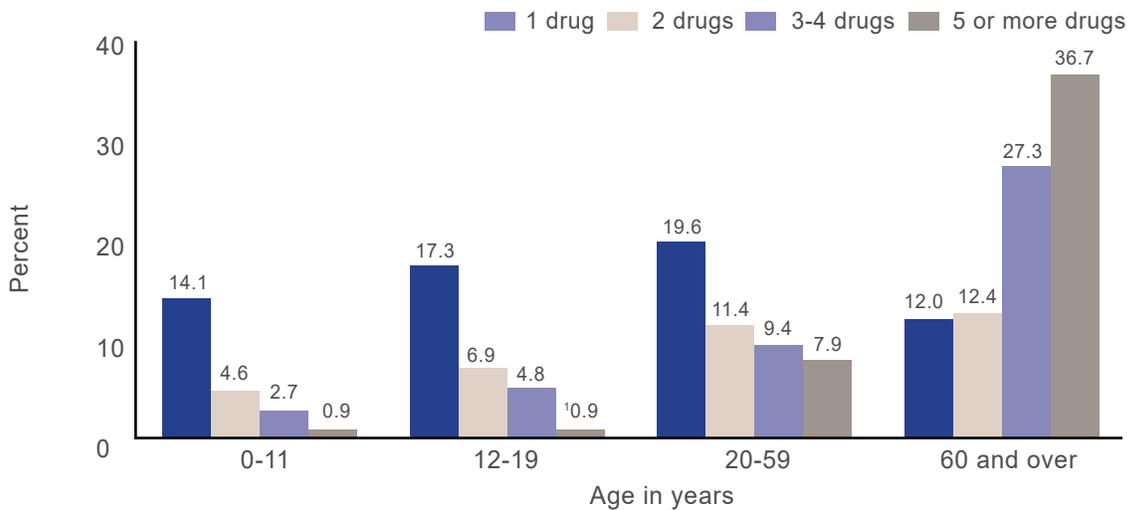
Yet rising acuity and frailty levels of the typical assisted living resident make the settings particularly challenging. Most residents take nine to 10 medications simultaneously, including two to two-and-a-half over-the-counter medications. And the majority need help managing their medications, which is an oft-cited reason for moving into an assisted living community. In fact, more than 90 percent of residents are on medication management/medication pass programs; fewer than 10 percent are deemed capable of taking their own medications.

Rather than providing pharmacy services directly, most assisted living communities rely on external experts to manage their medication needs.

Dependence on External Support

More than half of all assisted living residents are 85 or older, according to the National Center for Assisted Living. This aging population is clinically complex and medically fragile, and disproportionately uses medications. In fact, the typical assisted living resident is on nine to 10 prescription medications, which are commonly prescribed by various physicians. These residents also take a higher number of over-the-counter drugs than their counterparts in skilled nursing facilities, most of which are never charted, and many times take herbal supplements as well.

Percentage of prescription drugs used in the past month, by age: United States 2007-2008



¹Estimate is unstable, the relative standard error is greater than 30%
SOURCE: CDC/NCHS National Health and Nutrition Examination Survey.

With greater than 90 percent of residents incapable of self-administering their medications, communities rely heavily on staff. However, medication management expertise is usually low in assisted living communities, where eighty-two percent of caregivers today are aide-level employees.

Exacerbating the issue is that these employees as a group have the highest turnover rate in the industry, and workforce shortages are a serious problem, especially because assisted living is competing with hospitals and other higher-paying sectors inside and outside of healthcare for a limited well-trained applicant pool. Frequent staff changes cause disruptions in the continuity of care that pose serious concerns to assisted living populations, among them a significant risk of medication errors and adverse drug interactions.

Moreover, in some states, the aides at assisted living communities cannot administer medications, a restriction that has prompted many facilities to seek support from external pharmacies. In some cases, a preferred pharmacy is stipulated by the facility or its corporate ownership, but other communities are able to choose among community pharmacies or mail order.

And it is not just the facilities that utilize outside providers but residents as well – and oftentimes multiple pharmacies. By regulation, assisted living residents have the freedom to source medications from their pharmacy of choice, or from various retail pharmacies, and often do in order to price shop. Unfortunately, a multi-pharmacy approach can lead to redundancies, duplication, and overlap. And this lack of coordination can cause a host of unforeseen problems.

Multi-Pharmacy Risks

An assisted living community's or resident's use of multiple pharmacies creates difficulties around medication coordination—but also a number of other dangerous safety issues. These include:

- Prescribing and monitoring errors
- Lack of communication between pharmacists, providers, and residents about the best treatment approach, often resulting in more medications than are necessary
- Problems with the appropriateness of each drug, benefits, and risks because medication information is not centralized in one record
- Debilitating issues like a higher incidence of impaired cognitive function, falls, and even fatal consequences because medications are not properly managed—a problem often directly proportionate to the number of medications and their sources
- Dangerous interactions between over-the-counter medication and prescription drugs
- Poor adherence because medications are not always filled on time, especially when residents or their families must drive to different locations

These dangers can have serious health consequences: up to 30 percent of geriatric hospital admissions are the result of adverse drug events. In addition, having multiple pharmacies is also complex and expensive. Staff waste time having to deal with ordering, deliveries, issue resolution, and other activities at various providers, and must also learn different systems for packaging, billing, and more. The result is higher labor costs and a focus on administrative tasks that reduces face-to-face care and, potentially, its quality.

To address these challenges, many assisted living communities are centralizing their external pharmacy support and entering into preferred or exclusive pharmacy provider relationships. According to a study published in *Consultant Pharmacist*¹, administrators indicate they would prefer to use a single pharmacy in order to reduce complexity.

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3769993/>

The Role of a Preferred Provider in Mitigating Threats

By using one pharmacy, communities know they will receive professional medication management and pharmacist reviews to reduce errors and adverse drug interactions, even with over-the-counter medications or supplements. In addition to improved safety, having a single point of contact offers several other advantages:

- **Efficiency:** A preferred pharmacy reduces operational complexity and administrative burden, and provides faster emergency response. With centralization, facilities also gain access to additional integrated services like billing and clinical consulting.
- **Technology:** A dedicated IT team can provide seamless integration of systems like EHR, eMAR, bedside, bar-coded administration, and others to advance resident safety.
- **Convenience:** A preferred pharmacy provider delivers medications on site and provides the ease of compliance packaging.
- **Education:** Working with a pharmacy partner, facilities can utilize consultant pharmacist services to train staff on medication basics, vital for communities with unskilled workers or high staff turnover to ensure the delivery of high-quality care.
- **Cost Savings:** Having a larger patient volume allows providers to offer value-added services. Plus, working with a single pharmacy reduces labor expenses and the hidden cost that can result from polypharmacy: poor health outcomes.
- **Community Reputation:** A central pharmacy offers convenience for residents and their families, seamless billing, and fast customer service, yielding fewer complaints and boosting a facility's reputation in the community.

About ValueMed

~~ValueMed was developed by PharMerica, the long-term care pharmacy expert with 30 years of experience. PharMerica partners with long-term care communities to create customized pharmacy solutions that ensure improved clinical outcomes, more accurate and efficient billing, and better served staff and residents. That means ValueMed brings you extensive experience providing sage, effective care to seniors.~~

To learn more about the advantages of partnering with a single pharmacy and how ValueMed streamlines medication management and enhances communication to reduce errors and improve outcomes, contact us at ValueMed@PharMerica.com or 866-628-2583.