

## Form for Pharmacy Validation of Long-Term Care

**Summary:** This form is for Pharmacies that participate in the Prime Therapeutics LLC (Prime) Medicare Part D Long-Term Care (LTC) Network. To maintain the integrity of the Prime Medicare Part D LTC network, Prime requires Pharmacies that participate in this network to validate on an annual basis that they can comply with these guidelines or requirements.

**Validation:** Please respond to the questions listed below. Sign this document validating that this Pharmacy currently participating in Prime's Medicare Part D LTC network is in compliance with the requirements established by the Center for Medicare & Medicaid Services (CMS):

**LTC Network Services:** The Pharmacy must, by itself or through subcontracts with other entities, have the capacity to perform all services outlined below, regardless of whether particular service(s) are required by the long-term care facility (LTC facility) or its residents.

1. Does the Pharmacy provide a comprehensive inventory of Plan formulary drugs commonly used in the long-term care setting?	Yes No
2. Does the Pharmacy provide a secured area for physical storage of drugs, with necessary added security as required by federal and state law for controlled substances? (This does not mean that the Pharmacy will have inventory or security measures outside of the normal business setting.)	Yes No
3. Does the Pharmacy provide services of a dispensing pharmacist to meet the requirements of Pharmacy practice for dispensing prescription drugs to LTC residents? (This includes but is not limited to the performance of drug utilization review (DUR))	Yes No
4. Does the pharmacist conduct DUR to routinely screen: <ul style="list-style-type: none"><li>• For allergies and drug interactions?</li><li>• To identify potential adverse drug reactions?</li><li>• To identify inappropriate drug usage in the LTC population?</li><li>• To promote cost effective therapy in the LTC setting?</li></ul>	Yes No
5. Is the Pharmacy equipped with Pharmacy software and systems to meet the needs of prescription drug ordering and distribution to an LTC facility?	Yes No
6. Does the Pharmacy provide written copies of the Pharmacy's procedures manual? Is the manual available at each LTC facility nurses' unit?	Yes No
7. Does the Pharmacy provide ongoing in-service training to assure that LTC facility staff is proficient in the Pharmacy's processes for ordering and receiving medications?	Yes No
8. Is the Pharmacy responsible for return and/or disposal of unused medications following discontinuance, transfer, discharge, or death as permitted by state boards of Pharmacy? (Controlled substances and out-of-date substances must be disposed of within state and federal guidelines.)	Yes No
9. Does the Pharmacy have the capacity to provide specific drugs in unit-of-use packaging, bingo cards, cassettes, unit dose or other special packaging required by LTC facilities?	Yes No
10. Does the Pharmacy have access to or arrangements with a vendor to furnish supplies and equipment including but not limited to labels, auxiliary labels, and packing machines for furnishing drugs in such special packaging required by the LTC setting?	Yes No
11. Does the Pharmacy have the capacity to provide IV medications to the LTC resident as ordered by a qualified medical professional?	Yes No
12. Does the Pharmacy have access to specialized facilities for the preparation of IV prescriptions (clean room)?	Yes No

- |  |           |
|--|-----------|
| 13. Does the Pharmacy have access to or arrangements with a vendor to furnish special equipment and supplies as well as IV trained pharmacists and technicians as required to safely provide IV medications?   | Yes<br>No |
| 14. Is the Pharmacy capable of providing specialized drug delivery formulations as required for some LTC residents? Specifically, residents unable to swallow or ingest medications through normal routes may require tablets split or crushed or provided in suspensions or gel forms, to facilitate effective drug delivery.   | Yes<br>No |
| 15. Does the Pharmacy provide on-call, 24 hours a day, 7 days a week service with a qualified pharmacist available for handling calls after hours and to provide medication dispensing available for emergencies, holidays and after hours of normal operations?   | Yes<br>No |
| 16. Does the Pharmacy provide for delivery of medications to the LTC facility up to 7 days each week (up to three times per day) and in-between regularly scheduled visits? Emergency delivery service must be available 24 hours a day, 7 days a week. Specific delivery arrangements will be determined through an agreement between the Pharmacy and the LTC facility.                      | Yes<br>No |
| 17. Does the Pharmacy provide safe and secure exchange systems for delivery of medication to the LTC facility?   | Yes<br>No |
| 18. Does the Pharmacy provide medication cassettes, or other standard delivery systems, that may be exchanged on a routine basis for automatic restocking?   | Yes<br>No |
| 19. Is the Pharmacy's delivery of medication to carts a part of routine dispensing?  | Yes<br>No |
| 20. Is the Pharmacy's or Pharmacies' NPI registered with National Plan & Provider Enumeration System (NPPES) as a long-term care Pharmacy?   | Yes<br>No |
| 21. Does the Pharmacy provide emergency supply of medications as required by the facility in compliance with State requirements?   | Yes<br>No |
| 22. Does the Pharmacy provide a system for logging and charging medication used from emergency/first dose stock?   | Yes<br>No |
| 23. Does the Pharmacy maintain a comprehensive record of a resident's medication order and drug administration?  | Yes<br>No |
| 24. Does the Pharmacy provide reports, forms and prescription ordering supplies necessary for the delivery of quality pharmacy care in the LTC setting? Such reports, forms and prescription ordering supplies may include, but will not necessarily be limited to:  | Yes<br>No |
| <ul style="list-style-type: none"> <li>• Provider order forms</li> <li>• Monthly management reports to assist the LTC facility in managing orders</li> <li>• Medication administration records</li> <li>• Treatment administration records</li> <li>• Interim order forms for new prescription orders</li> <li>• Boxes/folders for order storage and reconciliation in the facility</li> </ul> |           |

My organization validates to Prime that this Pharmacy, currently participating in Prime's Medicare Part D LTC Network, meets the criteria as outlined above.

Organization name: \_\_\_\_\_ Submitter e-signature: \_\_\_\_\_

Submitter email: \_\_\_\_\_ Submitter title: \_\_\_\_\_

Submitter phone: \_\_\_\_\_ Submitter chain code: \_\_\_\_\_

Submitter NCPDP (if applicable): \_\_\_\_\_

Disclaimer: Failure to attest to this Form for Pharmacy Validation of Long-Term Care or failure to meet the LTC requirements may result in termination from Prime's LTC Network.