

FMDA – The Florida Society for Post-Acute and Long-Term Care Medicine

2016 FACT SHEET

MISSION STATEMENT: The mission of FMDA is to promote the highest quality care as patients transition through the long-term care continuum. FMDA is dedicated to providing leadership, professional education, and advocacy for the inter-professional team.

VISION STATEMENT: FMDA will reach out to all long-term care professionals through dissemination of information and access to resources. FMDA will become the premier organization for providing leadership and education for best care practices, evidence-based medicine, regulatory compliance, and practice management. FMDA's goal is to become a model organization that collaborates with related organizations and promotes the highest quality of care to patients in the long-term care continuum.

MEMBERSHIP: FMDA maintains a database of more than 225 members and 1,100 total contacts. Most of our members are medical directors and attending physicians of Florida skilled nursing facilities or nursing homes. The IMS Data tracking system does not track the prescribing activities of these physicians as accurately as it does through retail pharmacies. Many of our members are "flat liners" on the IMS system, even though they may have hundreds of nursing home patients taking on average, eight medicines at any one time.

NOTE: On a daily basis, IMS captures through data tracking approximately 96% of pharmaceutical sales in the U.S. from a panel of more than 500 indirect and direct sales data sources.

BACKGROUND: FMDA was founded in 1990 to help medical directors, attending physicians, physician assistants (PAs), advanced practice nurses, and other health care practitioners in post-acute care navigate their way through the continuum.

GOVERNANCE: The Board of Directors consists of the Chairman of the Board, Immediate Past-President, President, Vice President, Secretary-Treasurer, and seven other FMDA members. Each is elected for a two-year term and can be re-elected for another two-year term, except for the Immediate Past-President, President-Elect, and Chairman, who are not elected. All elections will take place at the annual meeting every two years. During a non-election year, elections will be held only for vacated offices due to unforeseen circumstances and will be good for the remaining term until the next election. Such an office will not count as a two-year term. All candidates for position as an officer must have been a physician board member within the last three years.

AFFILIATIONS: FMDA is the official state affiliate of the Columbia, Maryland-based, **AMDA – The Society for Post-Acute and Long-Term Care Medicine** and a Specialty Society of the **Florida Medical Association (FMA)**.

ANNUAL MEETING: FMDA's 25th Anniversary Conference is to be held **Oct. 13-16, 2016**, at **Disney's Grand Floridian Resort** in Lake Buena Vista, FL.

MEMBERSHIP CATEGORIES: There are multiple classes of membership in the Association: general membership, honorary membership, student, retired, lifetime, and affiliate membership. All members of this organization are also encouraged to be members of the national association, **AMDA – The Society for Post-Acute & Long-Term Care Medicine**.

a. **General:** Membership in FMDA may be granted to any physician who holds the position of medical director, or a physician, advanced practice nurse, or physician assistant who has an interest in or who provides medical services in full or in part in post-acute and long-term care. Members in this classification shall be entitled to a vote and the eligibility to be a member of the Board of Directors.

i. **Retired:** Includes physicians, advanced practice nurses, and physician assistants who are fully retired.

ii. **Lifetime:** Includes physicians, advanced practice nurses, and physician assistants who continue to work and are not retired.

b. **Organizational Affiliates:** Are organizations in the medical, regulatory, or political fields of long-term care wishing to promote the affairs of FMDA. They include vendors, other professionals, and organizations.

c. **Honorary** members can be proposed by any FMDA member and can be admitted by a vote of the Board of Directors during an annual meeting or by the executive committee at any time. Honorary members shall not be eligible to vote or hold office.

d. **Students:** Student membership is available to physicians-in-training, including interns, residents, fellows, and students enrolled in or on leave of absence from any LCME- or AOA-accredited or provisionally accredited North American allopathic or osteopathic training program. This category is also available to all American and foreign students who are in training at foreign medical institutions listed in the International Medical Education Directory (IMED) of the Educational Commission for Foreign Medical Graduates (ECFMG). It is also open to premedical students and any person engaged in graduate medical education in the U.S. Student members shall have all FMDA privileges except they shall not be eligible to vote or hold office.

ANNUAL DUES: General membership dues are \$75 annually; Organizational Affiliate member dues are \$325 annually. Corporate membership packages are available for groups of 5 or more. In 2012, we started offering multi-year memberships, including 2-year, 3-year, and Lifetime. We currently have 14 Lifetime members.

Membership Benefits and Services:

- FMDA promotes the education of its membership in issues pertaining to post-acute and long-term care (PA/LTC), with a special emphasis on scientific, legislative, regulatory, and Medicare and Medicaid reimbursement.
- Membership in FMDA links you to physicians, advanced practice nurses, and PAs and opens dialogues for problem-solving and information sharing. Networking opens opportunities to become familiar with the activities of Florida practitioners and helps you build relationships with and gain support from our members.
- FMDA represents more than 225 medical directors, attending physicians, physician assistants, and advanced practice nurses in Florida's post-acute and long-term care continuum.
- As the scope of operation for post-acute care facilities continues to evolve and expand to accommodate an aging population, practitioners face many new and complex challenges. FMDA is the only organization in the state of Florida devoted to practitioners in all specialties practicing in skilled nursing units, sub-acute, hospice, home care, assisted living facilities, as well as in continuing care retirement communities.
- FMDA hosts a highly successful and nationally-recognized annual conference and trade show every October, which features the newest trends and challenges from some of the top long-term care experts in the country.
 - This annual educational program was one of the first conferences of its kind in the country to offers continuing education contact hours for physicians (MDs and DOs), physician assistants, advance practice nurses, consultant pharmacists, directors of nursing, licensed nurses, and nursing home administrators.
 - Due to the reputation it has earned for its the high-caliber conference programming, each year it attracts attendees from dozens of other states, Puerto Rica, and Canada.
 - Convenient, online registration is available at www.bestcarepractices.org.
- FMDA has a Hospice Section and is developing other special interest groups for rehabilitation, hospital medicine, home care, and assisted living.
- **FMDA's New Journal Club:** Meetings are scheduled for 30-minutes, once a month, via conference call. The club critically analyzes recent literature using evidence-based medicine principles: patient preferences, clinician expertise, and scientific findings each weighted equally. We quickly review two to three papers and present highlights and take-aways in a concise, high-yield manner. Each paper is reviewed in 10-15 minutes, and discussions are encouraged.
- FMDA publishes a dynamic, statewide newsletter titled *Progress Report* — winner of the Apex Award for Publishing Excellence.
- The official FMDA website is www.fmda.org with a dedicated conference website at www.bestcarepractices.org/.
- FMDA has its own online "CareerCenter" job board.
- Annual update on Medicare billing strategies.
- Annual update on Medicare comparative performance reports for physicians practicing in post-acute care.
- Discounted member registration fee for educational programs — including the annual conference.
- Listing as an expert witness, upon request.
- Assistance in earning AMDA's medical director certification.

ADVOCACY:

- Networking with acute, post-acute, and long-term care trade and professional associations.
- Advocacy in Tallahassee on behalf of FMDA members.
- Representation in the House of Delegates of AMDA.
- Representation in the House of Delegates of the Florida Medical Association.
- Providing testimony at public hearings, in front of the Florida Legislature, and in developing position statements regarding issues important to clinicians in long-term care such as the availability and affordability of liability insurance, the Pill Mill Bill, "Granny Cams" in nursing homes, CMS' proposed new rules of participation for SNFs, accountable care organizations, bundled payments, value based purchasing, and other hot-button issues.
- **FMDA Quality Advocacy Coalition (FQAC) Summit:** This is an annual event hosted by FMDA and includes representation from major Florida-based stakeholders from provider, regulatory, academic, and professional organizations.

Mission Statement: The mission of the FMDA Quality Advocacy Coalition (FQAC) is to develop strategies with like-minded thought leaders to inspire innovation and proactive policies that enhance the quality of care and quality of life for residents in the post-acute and long-term care continuum. FQAC desires to build a vital statewide network of Coalition stakeholders to support this initiative.

In its 16th year and the successor to FMDA's Industry Advisory Board, FQAC is under the leadership of Chair Steven Selznick, DO, CMD; and Co-chair, Rick Foley, PharmD.

CAREERS IN LONG-TERM CARE AWARDS:

FMDA takes an active role in outreach efforts to residents, interns, fellows, and young-career physicians with an interest in long-term care. It offers opportunities for eligible medical students, interns, and residents in geriatrics, internal medicine, and family practice. In addition, advanced practice nurses and physician-assistant students who are interested in practicing in long-term care and geriatrics are eligible to apply.

FLORIDA'S LONG-TERM CARE DEMOGRAPHICS:

Florida nursing homes are serving an increasingly diverse patient base and providing a greater variety of acute care and rehabilitative and convalescent services that cannot be delivered elsewhere. According to Florida's Agency for Health Care Administration (AHCA), there are approximately 684 licensed skilled nursing facilities in Florida with a total number of 83,229 beds. With an average statewide occupancy of 85 percent — 70,700 patients — and an average of eight (8) daily medications each, Florida is providing 565,957 prescriptions per day, or an average of 206,574,378 per year — and that is just in nursing homes. There are also 3,042 licensed assisted living facilities (ALFs) with 85,000 residents. Plus there are 41 free-standing hospices and nearly 2,500 licensed home health care agencies.

Other Key Facts*

- * The median annual cost for a private room in a nursing home is \$91,615.
- * The median annual cost for a semi-private room in a nursing home is \$81,395.
- * The median annual cost for assisted living amounts to \$36,000.
- * Nearly 40 percent of long-term care spending is paid for by private funds.
- * Medicare, which covers rehabilitation services after an individual is discharged from a hospital, pays for 19 percent of all long-term care spending.
- * Medicaid, which covers health care costs for low-income individuals, pays for 60 percent of all long-term care spending.
- * Accounting for about 40 percent of total expenditures of nursing facilities, Medicaid's payments cover the care of more than half of all nursing home residents.
- * Medicare patients have short rehabilitative stays — 33 days average.
- * Medicaid and private-pay patients have long lengths of stay — 386 days average.

Economic Role of Long-Term Care Facilities in Florida*

- * Support an estimated \$20.2 billion of Florida's economy
- * Contribute to nearly 259,250 jobs and support \$9.1 billion in labor income through employment of both direct caregivers and support staff (i.e., food service, maintenance, social workers)
- * Generate \$2.3 billion in state and federal tax revenue
- * Long-term care facilities contribute to other businesses through a ripple effect, with each nursing home job resulting in two additional jobs of added economic activity within a local community.

Future Needs for Long-Term Care*

- * By 2026, the population of Americans ages 65 and older will double to 71.5 million.
- * By 2030, 57% of new residents will be ages 65 and older.
- * There is a 50% projected increase in Alzheimer's cases by 2025.
- * Among people turning 65 today, 69 percent will need some form of long-term care, whether in the community or in a residential care facility.

Source: Some of these demographics come from the Agency for Health Care Administration and Florida Health Care Association (www.fhca.org).



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400 Executive Center Drive, Suite 208
West Palm Beach, FL 33401

(561) 689-6321; Fax: (561) 689-6324

www.fmda.org * www.bestcarepractices.org