FMDA Introduces New Name and Membership Eligibility

— New Bylaws in Effect

By Matthew Reese, Senior Manager of Association Services

On March 20, 2015, FMDA President Dr. Robert Kaplan officially announced that the membership had overwhelmingly voted for an organizational name change to FMDA – The Florida Society for Post-Acute and Long-Term Care Medicine. FMDA also expanded full membership to include advance practice nurses (NPs) and physician assistants (PAs), which gives them full voting rights as members of the association. Both of these changes mimic what AMDA – The Society for Post-Acute and Long-Term Care Medicine, our national affiliate, has done to expand their reach and be more inclusive across the continuum of post-acute and long-term care.

FMDA’s name change reflects the increasing prominence of post-acute care in the long-term care continuum, and the long-standing presence of attending physicians and other practitioners in FMDA’s membership, in addition to medical directors. NPs and PAs will now be able to participate fully in the life of the organization, to serve on and chair committees, and to participate as members of the Board. All five of FMDA’s officers will remain physicians; however, NP & PA members are now able to serve as a Director on the Board. This is a significant step towards a more inclusive membership and governance structure, echoing how the inter-professional team works together in the field.

FMDA President Robert Kaplan, MD, CMD, commented, “These changes to FMDA’s bylaws fall in line with what’s happening on the ground floor in post-acute and long-term care facilities. All health care providers work together and need to be properly trained and supported, including medical directors, attending physicians, advance practice nurses, and physician assistants, to ensure that the highest quality of care is provided. FMDA will serve as the professional home for this team as we work together to improve the quality of care for both our post-acute patients and long-term care residents.”

“General” membership in FMDA is now 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.

There used to be three classes of dues-paying FMDA members, however, we have replaced both “Regular” and “Professional Affiliate” members with “General” membership.

FMDA will be holding its next Town Meeting & Luncheon at FSU’s College of Medicine on Friday, August 28, 2015 in Tallahassee. For more information or to RSVP, please contact Cindi Taylor, Membership Services Manager, at (561) 689-6321.
It is hard to believe that we’re already into summer. It’s been an extremely busy and exciting spring for FMDA. In March the Board was pleased to learn that two specific proposed By-Laws changes related to name change and membership were approved by strong consensus. In particular, FMDA’s name became FMDA, The Florida Society for Post-Acute and Long-Term Care (PA/LTC) Medicine, and full membership privileges were extended to nurse practitioners and physician assistants. With this expanded membership came governance modification to include re-allocation of seats on the Board of Directors.

On the flip side, I am disappointed to report that, to my surprise, both of our Resolutions presented to the AMDA House of Delegates (HoD) in March failed to pass, in particular, requirement for minimum educational standards for medical directors, and minimum credentials for the practice of PA/LTC medicine in Florida. Nonetheless, at our recent FMDA Board meeting, given the Board’s resolve as to their merit, decision was made to submit both Resolutions to the Florida Medical Association (FMA) for consideration by its House of Delegates, in addition to possibly the Florida Osteopathic Medical Association. More to come.

Our recent Town Hall meeting on April 24 in Orlando was well attended. FMDA acknowledges Greg Chaires for an interesting and enlightening presentation on potential risk management pitfalls of the Electronic Medical Record (EMR). Earlier that day, FMDA hosted the 2015 Industry Advisory Board (IAB) meeting, likewise well attended. Once again, I was so impressed with the expertise and insight demonstrated by this multi-stakeholder group. Many thanks are extended to Dr. Steve Selznick, chair, and Scott Peterson, co-chair for their efforts contributing to the ongoing success of this annual forum. Some early discussion centered around a potential shift in the eventual focus of this group, perhaps consisting of a collaborative approach to quality, including even a Quality Summit hosted by FMDA dedicated to PA/LTC in Florida. Regarding future Town Hall meetings, plans are under-way to link a Town Hall event in Tallahassee to the arrival of Dr. Paul Katz, an AMDA past-president, to the position of chair, Dept of Geriatrics at FSU. I am delighted at the opportunity to increase the awareness of FMDA in this area of Florida, historically a region devoid of FMDA presence.

On another positive note, the medical community at-large, including those of us in PA/LTC, were pleased to learn of the recent repeal of the SGR (Sustainable Growth Rate) formula. The alphabet soup of acronyms in healthcare continues, as providers will now have an eventual choice to participate in either MIPS (Merit-Based Incentive Payment Systems) vs. a second track, APM (Alternate Payment Models). The implications for those of us practicing solely in the PA/LTC arena is certainly to be determined. Stay tuned.

In closing, as summer is upon us, our annual FMDA BCP (Best Care Practices) conference is rapidly approaching. FMDA remains extremely appreciative of both Dr. Angel Tafur and Dr. Claudia Marcelo, Chair and Vice Chair of the CME/Education Committee, respectively, and their efforts to ensure that BCP 2015 once again fulfills expectations as FMDA’s premier educational offering.

As usual, if not already, I encourage you to become active in FMDA. And, as always, your input, suggestions, and comments are always welcome. Thanks, and have a great summer! Hope to see you in Tallahassee in August.
This issue of the Progress Report was compiled during Older Americans Month. The month of May was first given this designation in 1963 by President John F. Kennedy and the National Council of Senior Citizens. This is a time to acknowledge the contributions of older persons in the United States, and is marked by community events throughout the nation. Marking the 50th anniversary of the Older Americans Act, this year’s theme is “Get into the Act.” There is a focus on the involvement and empowerment of older adults in their healthcare decision making and in disease prevention through wellness education and activities. Increasing participation in community events, whether in an independent living situation, or in a post-acute / long-term care environment, is encouraged. The prevention of elder abuse is also an initiative of this year’s educational events.

The Older Americans Act (OAA) of 1965 was the first federal legislation for the formalized provision of services to older adults. The OAA created the National Aging Network, which includes the Administration on Aging (AOA), State Units on Aging, and Area Agencies on Aging (AAA) (which support Aging and Disability Resource Centers — ADRCs). The funding for local organizations is based on the percent of the population over the age of 60 in the defined geographic area. Some of the central goals of these federal-, state-, and community-based programs include health promotion and disease prevention through education and outreach. Nutrition is a core paradigm, as evidenced by networks of congregate meal sites and home meal delivery programs in most communities. Advocacy for elder rights is carried out through the Vulnerable Elders Protection Program, Longterm Care Ombudsman Program, Senior Community Service Employment Program, and National Family Caregiver Support Program. The OAA is overdue for reauthorization by Congress. The National Council on Aging (NCOA, a charitable organization that provides a national voice for older adults by dealing with service providers and policymakers) began a week of advocacy on May 18, to promote the OAA reauthorization. Stay informed at www.ncoa.gov. A week of The Reauthorization Act of 2015 includes bills that address economic need and security for older adults through research, education, and outreach. A call for evidence-based health promotion and disease prevention initiatives is a part of the draft. Stronger elder justice programs and more provision of legal services to this sector are also goals of the revised OAA.

Conversations reflecting these goals continue at the local, state, and national level. The Whitehouse Conference on Aging (WHCOA), through regional forums and online dialogue, is a platform for innovation in healthy aging, long-term services and supports, elder justice, and retirement security. Join the experience at www.whitehouseconferenceonaging.gov. FMDA’s Dr. Naushira Pandya and current president of AMDA, recently spoke at the WHCOA forum in Tampa, FL, and attended a reception at the White House.

FMDA, as the Florida Society for Post-Acute and Long-Term Care Medicine, will continue to bring you current policy and practice updates during this dynamic time.
FMDA hosted a well-attended Town Meeting & Dinner on Friday, April 24, 2015, in Orlando. We wish to thank our exhibitors: Actavis; Boehringer Ingelheim Pharmaceuticals; Janssen Pharmaceutical Companies of Johnson & Johnson; Retirement Plan Specialists; Thrive for Healthcare, Alpha Bridge Connections; Chaires, Brooderson & Guerro, P.L.; Novo Nordisk; Sanofi US; and VanGorder Insurance Services for their generous support of the Town Meeting Dinner & Program!

More than 70 medical directors, attending physicians, nurse practitioners, consultant pharmacists, directors of nursing, and nursing home administrators were in attendance and listened to Greg Chaires’s presentation on EHRs and EMRs. Please watch for your invitation for our next Town Meeting in Tallahassee in August.

Reserve Your Disney Hotel Rooms Now!

HOTEL RESERVATIONS: FMDA has reserved a block of rooms at Disney’s Yacht & Beach Club Resort. The group rate is $195 plus tax for single/double occupancy, complimentary self-parking, and no daily resort fee. To make a reservation, please call Disney’s Group Reservations, (407) 939-4686, and mention you are attending the FMDA’s Best Care Practices conference. To guarantee rate and room availability, you must make your reservations no later than Sept. 25, 2015. This special group rate will be applicable three (3) days prior to and three (3) days following the main program dates, subject to availability. You may also reserve your hotel room at bestcarepractices.org/venue.html.
Download our custom mobile application designed for use on smart phones, tablets, Apple devices, and personal computers. The app is intended to better connect people with the association and give members a helpful resource that they can use on-the-go. It contains many useful features, as well as tabs for this annual conference, including the handouts. The app is available as a free download from iTunes and Android stores by searching for “FMDA.”
AMDA President Dr. Naushira Pandya (left) with the Florida Delegation at AMDA’s House of Delegates in Louisville in March 2015, including (from left): Dr. John Symeonides, Dr. Angel Tafur, Dr. Rhonda Randall, Dr. Robert Kaplan, Dr. Brian Kiedrowski, Dr. Daniel Fortier, Dr. Kenya Rivas and Dr. Elizabeth Hames.

AMDA President Dr. Len Gelman hands over the presidency to FMDA Director Dr. Naushira Pandya at AMDA’s Annual Conference in Louisville in March 2015.

FMDA Progress Report has a circulation of more than 1,100 physicians, physician assistants, nurse practitioners, directors of nursing, administrators, and other Post-Acute & LTC professionals. Progress Report is a trademark of FMDA. Progress Report editor Elizabeth Hames, DO, welcomes letters, original articles, and photos. If you would like to contribute to this newsletter, please email your material to icordes@bellsouth.net.

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FMDA Hosts 15th Annual Industry Advisory Board

This year’s annual IAB meeting was hosted on April 24 in Orlando by Chair Dr. Steven Selznick and Co-Chair Scott Petersen with Allergan. Founded in 2001 by FMDA past-president and former chairman of the board Dr. Malcolm Fraser, the IAB celebrated its 15th anniversary. The IAB was established as a way for FMDA and other allied organizations to enhance lines of communication and to work together to become part of the process to develop solutions for our common challenges.

After brief introductions, participants were asked to share the biggest challenges facing their organizations.

Then, FMDA President Dr. Robert Kaplan provided an overview and update on FMDA, the year in review, and current goals, vision, and future directions.

The extensive agenda featured invited presentations from experts across the spectrum.

• Attorney Gregory A. Chaires with Chaires, Brooderson & Guerrero covered Pending Legislation and Current Issues.
• FMDA President-Elect Dr. Leonard Hock discussed Future Trends & Opportunities in the Post-Acute and Long-Term Care Continuum.
• LuMarie Polivka-West, president of the Florida Council on Aging and Senior Vice President with Florida Health Care Association shared her thoughts on Transitions of Care: End-of-life care; post-acute acuities; and complexities with multiple care managers.
• Patches Bryan, CECO, Greystone Health Care Management, discussed the challenges of Hospital Cooperation: Impact on PASRR and Medicaid.
• Amy Osborn with the Health Services Advisory Group presented an Update on Florida’s Partnership to Individualize Dementia Care in Florida Nursing Homes.
• Dr. Rick Foley, president-elect, FL-ASCP, presented Current Issues for Consultant Pharmacists in LTC.
• Dr. Marva Edwards-Marshall, president, FL-GAPNA, presented Trends in LTC for Advance Practice Nurses.
• Polly Weaver, assistant deputy secretary - HQA, state survey agency director, Agency for Health Care Administration, discussed Quality Care and Prescriber Training.
• FMDA Executive Director Ian Cordes discussed the future of the IAB and FMDA Quality Initiatives. Specifically, the leadership of both FMDA and the Industry Advisory Board are considering whether FMDA should lead its own statewide quality initiative to promote quality projects to fellow practitioners, other stakeholders, related organizations, politicians, regulators, etc. This would allow the Industry Advisory Board to transform into a more proactive role and take a leadership position with a statewide impact.

The IAB is an invitation-only forum of interdisciplinary experts. In addition to those mentioned above, the following organizations were also represented: Astellas Pharma, Boehringer Ingelheim Pharmaceuticals, FADONA, Florida Gulf Coast GAPNA, Florida Osteopathic Medical Association, Optum, Sanofi, Thrive For Healthcare, and UnitedHealthcare Retiree Solutions.

Roadmap to Quality: Ahead of the Curve
Another Outstanding Optional Preconference Lineup on Thursday, Oct. 22, 2015!

We are offering the three (3) mandatory licensure renewal courses — the only LIVE courses currently listed on CEBroker.com. This is followed by a 3-hour, state-of-the-technology risk management workshop on Electronic Health Records and Electronic Medical Records from a panel of experts.

**Mandatory Licensure Renewal Courses**

8:30-9:30 a.m.——Update on HIV/AIDS
9:40-11:40 a.m.——Preventing Medical Errors
11:50 a.m.-12:50 p.m.——Boehringer-Ingelheim Product Theater Lunch Program (non-CME/CPE/CE)
1-3 p.m.——Domestic Violence

1-4:15 p.m.——State-of-the-Technology Risk Management Workshop for EMRs and EHRs

◆ Rod Baird, MS; Founder and President, Geriatric Practice Management
◆ Greg Chaires, Esq.; Managing Partner/Attorney at Law, Chaires, Brooderson & Guerrero, P.L.
◆ Denise Wassenaar; Chief Clinical Officer at MatrixCare

~ Note: Includes a 15-minute break

6:30-7:45 p.m.——Sunovion Product Theater Dinner Program (non-CME/CPE/CE)

See registration form on page 10 for more information!
Lessons Learned
— An Ongoing Series

By Hugh W. Thomas, DO, FAAFP, CMD; Chairman of the Board

I would like to apologize for the recent hiatus in this recurring column. It has been a very busy fall and winter for me. I recently took my Family Practice boards, a pleasantry that family physicians must undertake every 10 years as long as they wish to remain board certified. I actually took a week-long refresher course in preparation for the exam this year. We’ll see if it helped when I get my results in 8 weeks. I also decided to dive into intense training for competing in a marathon. I was able to complete the Boston Marathon on April 20th despite horrible New England weather and a pulled groin on Heartbreak Hill. Check that off of the bucket list.

So, now that I look back at completing my boards I realize that I may not take the boards again. Not sure I will need to recertify at age 70. The whole board taking experience sort of forces the physician to study, at least prior to taking the exam. Of course the longer it has been since residency the more you will need to study. I even had to bone up on OB/GYN and pediatrics. All of this makes me think about how we as providers maintain our level of knowledge. Do we rest on our laurels and never crack a book again or do we constantly have our noses stuck in a textbook or journal? Maybe we just go to an occasional conference at an exotic resort and hope this keeps us up to date.

This reminds me of a story. Years ago, one of our new, young doctors, who would later become one of our partners, had just finished her residency. One day, a particularly difficult patient came to our practice. We both evaluated the patient and could not immediately come up with the diagnosis from our differential. I told her I would research the patient’s signs and symptoms that night. This is my common practice when I run across difficult patients. She informed me she had completed her residency and she was done with studying. She truly believed that she had all the knowledge she would need. Of course she soon found out that all good providers are constantly learning. She now is one of the hardest studying physicians in our group and is also currently working on her MBA.

I want the younger physicians to know how good they have had it. When I went through internship and residency I had to rely on textbooks, journals, and Medsearch. How many of you remember using Medsearch for up-to-date reviews? It was always fun at 2 a.m. in the hospital when you had a very difficult patient come in through the ER and your only source of knowledge was in some old textbooks in the ER, the Washington manual in your lab coat, or what little was stored in your brain. The library was closed and Medsearch was of no help after hours. So now we zoom to the 21st century. Now we all have smartphones, tablets, and instant access to the web. If you’re not using an app like Epocrates for medication searches and interactions you may be causing potential harm when writing that new prescription. Of course many of our EMRs do that for us automatically. What a great way to learn and stay on top of any subject.

Lessons Learned

1. Commit to a regular learning habit. Jot down those interesting cases/diagnoses and make a point to study them in a relaxed setting.

2. Don’t be afraid to use your portable device while in the room with the patient. I find my patients appreciate the fact that I take interest in their case.

3. Don’t ever think you are done learning. Even as you approach the twilight of your career you always want to be able to deliver the best possible care.

Next time we will delve into the use of EMR in LTC. If interested, FMDA is offering a pre-conference intensive on Oct. 20 during our 24th Annual Conference, Best Care Practices in the Geriatrics Continuum 2015 — Roadmap to Quality: Ahead of the Curve.

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Gene Windom, Pharm.D., R.Ph.
Pharmacist/Owner

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CLERMONT, FL 34711
(352) 243-6340
FMDA – The Florida Society for Post-Acute and Long-Term Care Medicine is enthused about Best Care Practices in the Geriatrics Continuum (BCP) 2015, its 24th annual conference, taking place at Disney’s Yacht & Beach Club, October 22-25 in Orlando. It will feature an outstanding line-up of top-notch educational programming and faculty designed to facilitate best care practices in the care and delivery of long-term care medicine. This nationally recognized conference is intended for health care practitioners who have an interest in geriatrics. The underlying theme for this year’s conference is Roadmap to Quality: Ahead of the Curve. With health care evolving so rapidly, especially the landscape of long-term care, practitioners must do what they can to stay ahead of the curve.

This year’s Best Care Practices 2015 features an astonishing array of high-level programming with nationally known speakers covering a wide variety of topics in the areas of geriatrics and long-term care. Aside from the main program, the president from AMDA – Society for Post-Acute and Long-Term Care Medicine, Naushira Pandya, MD, CMD, and the president of the American Academy of Hospice & Palliative Medicine, Christine Richie, MD, MSPH, will present during the National Leaders Forum. This highly anticipated program focuses on the challenges facing each of our related organizations and what lies ahead.

Dr. Robert Kaplan, FMDA’s president, is very excited about the theme of this year’s conference and how strongly it fits into the current picture of long-term care and geriatrics, and the association’s overall vision.

“As long-term medicine and health care delivery hurtles into the future, practitioners should be prepared for what lies ahead,” said Dr. Kaplan. “By focusing on the delivery of quality care and staying ‘ahead of the curve’, practitioners will be able to provide sound and compassionate care to their residents.”

FMDA is still accepting submissions for its 12th Annual “Call for Posters” for Best Care Practices in the Geriatrics Continuum 2015. Presenters who wish to present at the conference are encouraged to visit FMDA’s website to submit an online proposal. Submissions should be based on issues related to long-term care and geriatrics, or the health care field in general.

If you are planning on submitting an online poster proposal, the deadline for all applicants is August 2015. More information can be found on the FMDA website.

This year’s conference is being held at the splendid Disney’s Yacht & Beach Club Resort, with an idyllic location just minutes from Disney attractions. Delight in the formal grace of a grand New England-style yacht club at this lakeside hotel. Relax in the inviting elegance of a plush lobby replete with nautical touches, explore the whimsical Stormalong Bay and rent a variety of watercraft from Bayside Marina. Sharing many amenities with its pastel-toned sister, Disney’s Beach Club Resort, Disney’s Yacht Club Resort is walking distance to Epcot and a convenient boat ride to Disney’s Hollywood Studios.

If you would like any more information on the conference itself or making reservations at the hotel, please visit www.bestcarepractices.org, or call Matt Reese, Senior Manager of Association Services at (561) 689-6321.

Do you have some mileage in the business, some successes as well as scars? Then you have a lot to offer newcomers attending their first annual conference.

So, whether you are a physician, pharmacist, nurse practitioner, physician assistant, director of nursing, or nursing home administrator, please sign up to be an “Ambassador” to newcomers at the upcoming “Best Care Practices in the Geriatrics Continuum 2015” conference. This year’s conference will be at Disney’s Yacht & Beach Club Resort in Lake Buena Vista, Oct. 22-25.

Being an Ambassador is actually pretty light duty, says FMDA President Robert Kaplan, MD, CMD. Volunteers will be assigned to a newcomer prior to the conference, and will be asked to touch base with that person throughout the conference.

“This is a way to get new people engaged,” says Dr. Kaplan. Ambassadors will also be asked to follow up with the newcomer after the conference, to find out what value he or she derived from it, and to explore how FMDA can benefit him or her on an ongoing basis.

You can sign up to be an Ambassador when you receive your conference registration materials, which will arrive at your desk very soon. Watch your emails and mail for the complete conference brochure and registration form, call the office at (561) 689-6321, or visit www.bestcarepractices.org.
2015 REGISTRATION FORM

Early-bird DEADLINE is Sept. 18, 2015

Yes, I would like to register now!

Name: ___________________________ Title: _______________ License #___________ State____
Facility Name/Affiliation: ______________________________________________________________
Mailing Address:  ____________________________________________________________________
Fax: ____________________ E-mail:_________________________ Amount enclosed:  $__________
City: ___________________________________ State/ZIP: ________ Phone: ____________________
Expiration Date: ______________ Security code from the front or back of card: ________________
Name on Card: _________________________ Card Number: ________________________________
Billing Address:  ____________________________________________________________________
Signature: ___________________________ Date: ________________ Amount: $____________

Please Help us Better Process Your Registration (agenda subject to change)
1. _____ Yes, I would like to make a special meal request, so please contact me.  2. New FMDA members: What is the name of the FMDA member who referred you?  3. _____ Yes, I am a 1st-time attendee.  6. Would you like to volunteer to be a conference “Ambassador”? Volunteers will each be assigned to a newcomer prior to the conference, and will be asked to touch base with that person throughout the conference. Ambassadors will also be asked to follow up with the newcomer after the conference, to find out what value he or she derived from it, and to explore how FMDA can benefit him or her on an ongoing basis.  7. NOTE: Due to space limitations, planned conference meals are provided only to registrants. *Confirm your attendance with the product theaters when you arrive at the conference – first come, first served – as space is limited.

There will be a $50 administration fee for all written cancellation requests received on or prior to Oct. 2, 2015. There will be no refunds after Oct. 2, 2015. There is a $35 charge for all returned checks.

(561) 689-6321 • Fax: (561) 689-6324 • www.bestcarepractices.org • Email: ian.cordes@fmda.org

FMDA is a not-for-profit corporation. Its federal tax identification number is 59-3079300.
Call for Nominations & Volunteers

At FMDA’s annual membership meeting on October 23, 2015, there will be an election of officers and directors. The positions of vice president and secretary/treasurer will become vacant along with seven board of director positions.

As a result of our recent bylaws changes, advance practice nurses and physicians assistants are now able to participate fully in the life of our organization, to serve on and chair committees, and to participate as members of the Board. All five of FMDA’s officers will remain physicians; however NP & PA members are now able to serve as a Director on the Board.

The responsibilities of the Board of Directors include conducting the business affairs, educational seminars, and other meetings, and to foster and promote the purposes of the Association. The Board of Directors shall consist of the Chairman of the Board, Immediate Past-President, President, Vice President, Secretary-Treasurer, and seven (7) other FMDA members. At any point in time, a maximum of two (2) advanced practice nurses or physician assistants may occupy a director’s position of the Board. Each is elected for a two-year term and can be re-elected for another two-year term, except for the Immediate Past-President and President-Elect, who are not elected. The office of the Chairman of the Board will be held by the Immediate Past-President. All elections will take place at the annual meeting every two years. All candidates for position as an officer must have been a board member or a member of FMDA within the last two (2) years and must be a physician.

The Nominating Committee consists of the Executive Committee and will be chaired by the Chairman of the Board, Dr. Hugh Thomas. In the event that any office is vacated due to unforeseen circumstances, the Executive Committee can elect any board member to fill that position and will not count as a two-year term.

If you are interested in serving the association in a committee or leadership position, please indicate your preference(s) below, then fax this form and your CV to the FMDA business office along with a brief statement outlining your interests and why you want to serve. The FMDA Nominations Committee will then make its recommendations for the slate of officers and directors; voting by ballot will take place on Oct. 23, during the Best Care Practices conference.

☐ Vice President (President-Elect) ☐ Secretary/Treasurer ☐ Board Member

In addition, the following FMDA committees need your help in 2015-2016. I am interested in joining for a 1-year term (check as many as you like):

☐ CME/Education (annual conference planning) ☐ Newsletter/Communications
☐ Government Affairs ☐ Hospice Section
☐ Membership Development ☐ Careers in Long-Term Care & Poster Review
☐ Call for Presentations Review ☐ Technology Readiness
☐ Partnership to Improve Dementia Care in SNFs

Name: __________________________________________ Title: __________________________

Organization: ________________________________________________________________

Mailing Address: ______________________________________________________________

City: __________________________ State: ___________ ZIP: __________________________

Daytime Phone: (____) __________________ Fax: ________________________________

Email: ____________________________________________________________

Thank you for supporting your association."
FMDA Submits Resolutions to Both AMDA’s and FMA’s Houses of Delegates

By Robert G. Kaplan, MD, FACP, CMD; President

In the interest of the highest quality of care for residents in the post-acute/long-term care (PA/LTC) continuum, the FMDA board of directors approved a position statement regarding the need for minimum training standards for medical directors of skilled nursing facilities in Florida.

FMDA President Dr. Robert Kaplan presented two Florida resolutions at AMDA’s House of Delegates in Louisville based on these position statements. Although they did not pass, we were encouraged by the response we received and as result, we moved forward and submitted them to the Florida Medical Association’s House of Delegates, which will convene in July during its annual conference.

Physicians and others providing medical care to residents of PA/LTC facilities must possess a unique set of knowledge and skills. This includes understanding the principles and practice of geriatric medicine, drug prescribing for older, vulnerable patients, familiarity with pertinent regulations governing PA/LTC facilities, understanding systems of care delivery, and the ability to work effectively as part of an interdisciplinary team. Likewise, in PA/LTC facilities providing care to non-elderly residents (children, young and middle-aged adults with lifelong disabilities), an intimate understanding of the special needs of this population, and the skill set to meet those needs, is vital.

Please see the following two proposed resolutions, which were considered at FMA’s Annual Conference in July.

Resolution 15-106 (Proposed and not yet passed)

Minimum Credentials for the Practice of Post-Acute and Long-Term Care Medicine

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

Whereas, the Post-Acute and Long-Term Care (PA/LTC) continuum is and has been the center of care for the frail and the elderly; and

Whereas, the importance of quality and cost (Value-based Care) in the PA/LTC continuum is increasingly being recognized by the Centers for Medicare & Medicaid Services (CMS) and medical providers; and

Whereas, at many PA/LTC facilities (e.g., Nursing Homes and/or Assisted Living) nationwide, including the State of Florida, no credentials are necessary for a physician and/or non-physician practitioner to enter and provide potentially billable medical services and devices without regard to medical necessity; and

Whereas, patients should be protected from services that may not be medically necessary, but have the potential to significantly compromise their quality of care; and

Whereas, it is FMA's (Florida Medical Association) goal to promote integrity and the highest quality of care to Florida residents in the PA/LTC continuum; therefore be it

RESOLVED, That the FMA supports a standard of minimum credentials (e.g., government-issued identification, and proof of medical licensure) shall be required to provide primary care and consultative services in a Post-Acute and Long-Term Care facility in the State of Florida.

Fiscal Note:

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<td>$700</td>
<td>Can be accomplished with current staff</td>
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<td>Total</td>
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Fiscal notes are an estimate of the cost to implement a given Resolution. All Resolutions that are adopted by the House of Delegates will be referred to the FMA Committee on Finance and Appropriations for fiscal consideration.

Reference Committee:  I – Health, Education and Public Policy
Resolution 15-107 (Proposed and not yet passed)
Requirement for Minimum Educational Standards for Medical Directors in the Post-Acute and Long-Term Care Continuum

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

Whereas, it is well established that physician Medical Directors in Post-Acute and Long-Term Care (PA/LTC) must possess an adequate fund of knowledge and unique skill set to optimally perform the functions and tasks mandated by this position; and

Whereas, There exists evidence-based literature (Journal of American Medical Directors Association, JAMDA, 2009) demonstrating that the presence of a Medical Director with additional training (certified) improves care quality by approximately 15 percent; and

Whereas, In the past several years there has been an influx/migration of other specialties (e.g., Hospitalists) into the PA/LTC arena serving in the role of Medical Director, often without any formal supplemental training specific to this position; and

Whereas, It is FMA’s fundamental goal to promote the highest quality of care to vulnerable residents of Florida in the PA/LTC setting; therefore be it

RESOLVED, That the Florida Medical Association supports The Florida Society for Post-Acute and Long Term-Care Medicine (formerly the Florida Medical Directors Association) position that medical directors in Florida PA/LTC facilities be required, within one year of assuming the medical director position, to initiate formal training and activity on an educational track with content comparable to that of the AMDA Core Curriculum, with completion mandated within 3 years.

Fiscal Note:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
<th>Budget Narrative</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 staff hours</td>
<td>$700</td>
<td>Can be accomplished with current staff</td>
</tr>
<tr>
<td>Total</td>
<td>$700</td>
<td>$0 added to the operating budget</td>
</tr>
</tbody>
</table>

Fiscal notes are an estimate of the cost to implement a given Resolution. All Resolutions that are adopted by the House of Delegates will be referred to the FMA Committee on Finance and Appropriations for fiscal consideration.

Reference Committee:  I – Health, Education and Public Policy

Stand Up & Be Counted!

We invite each member to become more involved in the Florida Medical Directors Association (FMDA) by becoming a volunteer. Numerous opportunities are available to serve for a year, a month, or a day. You can help guide our organization through committees, task forces, and subsections that advise the board of directors, provide advice, facilitate or lead various programs, or even start a new subsection.

Volunteers are the heart of FMDA. Our strength is a result of the time and effort provided by those who volunteer their time and knowledge to serve their colleagues and to further all practitioners in post-acute and long-term care.

Participating as a volunteer provides a gateway to develop and hone leadership skills, increase professional contacts, and give back to the profession. Let us know what types of volunteer opportunities interest you.

We look forward to your participation in FMDA. Should you have any questions, please contact Dr. Robert Kaplan, president (rgk.md@aol.com); or Ian Cordes, executive director, at (561) 689-6321 or icordes@bellsouth.net.
FMDA Membership Application

There are multiple classes of membership in the Association: general membership, student, retired, lifetime, and affiliate membership. All members of this organization will be encouraged to be members of the national association, AMDA – The Society for Post-Acute and 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 PA/LTC. 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. Allied Health Professional Relations Committee: Health care practitioners who provide essential services to patients in the PA/LTC setting are eligible to join, including consultant pharmacists, senior care pharmacists, dental professionals, podiatrists, opticians, psychologists, therapists (PT/OT/ST), etc. Committee members are non-voting and may be appointed by the Board of Directors to serve on other FMDA committees.

c. Organizational Affiliates: Are organizations in the medical, regulatory, or political fields of PA/LTC wishing to promote the affairs of FMDA. They include vendors, other professionals, and organizations.

d. Students: Student membership is available to physicians/PAs/NPs-in-training, including interns, residents, fellows, and to premedical students and any person engaged in graduate medical/NP/PA education in the U.S. Student members shall have all FMDA privileges except they shall not be eligible to vote or hold office.

Name: ____________________________ Title: ____________________________
The mailing address below is for ☐ the facility, or ☐ my office address. Referred by FMDA member: ____________________________
Facility Name/Affiliation: ____________________________
Organization: ____________________________
Mailing Address: ____________________________
City: ____________________________ State: ___________ ZIP: ___________
Daytime Phone: (________) ___________ Fax: ____________________________
E-mail Address: ____________________________

Yes! I would like to join FMDA. Enclosed is my check for membership dues for the following category (check one):
☐ a. General Membership for Physicians, Advance Practice Nurses, and Physician Assistants.
☐ b. Allied Health Professional Relations Committee
☐ d. Students
Dues: ☐ 1-year ($75); or ☐ 2-year ($125); or 3-year ($190); or Lifetime ($750)

☐ c. Organizational Affiliate members are $325 per year.

☐ Voluntary contribution to support FMDA’s Careers in LTC program, student scholarships, and AMDA’s Futures Program.

____________________ $ __________________

Total Amount Enclosed: $ __________________

Make checks payable to:
FMDA, 400 Executive Center Drive Suite 208, West Palm Beach, FL 33401

Please share this information with a colleague who would benefit from membership in FMDA!
FMDA is a non-profit corporation. Its federal tax ID number is 59-3079300.

(561) 689-6321 | Fax: (561) 689-6324 | www.fmda.org | www.bestcarepractices.org
FMDA is hosting its 12th Annual Poster Session during the Best Care Practices Conference, Oct. 23-24, 2015. The first 10 applicants who are accepted by the review committee will receive complimentary registration to the 2015 conference (only one applicant per poster presentation will be considered).

Poster sessions provide an opportunity for practicing physicians, pharmacists, and nurse practitioners to share with colleagues the results of research, best practices, and outcomes. The sessions are visual presentations using diagrams, charts, and figures. Poster presentations may be on any aspect of the following categories: clinical care, pharmacology of medicine, medical education, history of medicine, medical direction, medical care delivery, medical ethics, economics of medicine, and pediatric long-term care — and in any long-term care setting.

The first 10 applicants who are accepted by the review committee will receive complimentary registration to FMDA’s 24th Anniversary Program.

All poster abstract proposals must be submitted online on our website at www.fmda.org. All submissions that are complete and follow the Criteria for Acceptance of Posters will be considered and reviewed based on the content contained within the proposal.

Submission of a proposal is a commitment by at least one author to be present at the designated times to discuss the information in the poster with symposium participants. We have arranged the schedule so that there is no overlap between educational sessions and poster exhibit times. The primary presenter listed on the proposal will be informed of its status no later than Sept. 18, 2015. Guidelines for presentation and preparation of visual material will be sent to the primary presenter upon acceptance.

Authors whose abstracts are accepted for presentation at the symposium will have their abstracts submitted for publication in the Journal of the American Medical Directors Association (JAMDA).

To learn more, or to submit a proposal, go to www.fmda.org, or call Matt Reese, Senior Manager for Association Services, at (561) 689-6321.

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### 2015 Poster Sessions
Disney’s Yacht & Beach Club Resort
Lake Buena Vista, Florida

<table>
<thead>
<tr>
<th>Schedule*</th>
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<tbody>
<tr>
<td><strong>POSTER SET-UP</strong></td>
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<tr>
<td>FRIDAY, Oct. 23, 11 a.m.-1 p.m.</td>
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<tr>
<td><strong>POSTER VIEWING</strong></td>
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<tr>
<td>FRIDAY, Oct. 23</td>
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<tr>
<td>1-2:30 p.m.; 5:15-7:15 p.m.</td>
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<tr>
<td>SATURDAY, Oct. 24</td>
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<tr>
<td>8-9 a.m., 11:45 a.m.-12:30 p.m., Luncheon: Poster Recognition–12:45-2:15 p.m.</td>
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<tr>
<td><strong>POSTER TEAR DOWN</strong></td>
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<tr>
<td>SATURDAY, Oct. 24</td>
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<tr>
<td>12:30-4:15 p.m.</td>
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</table>

*Subject to change. Presenters are not required to be present during all viewing hours.
Reserve your hotel room today before the hotel is sold out. Call Disney’s Yacht and Beach Club at (407) 939-4686!

Another Magical Conference at Disney!

Roadmap to Quality – Ahead of the Curve