

Serving Physicians, Nurse Practitioners, and Physician Assistants Practicing in Florida's Postacute Care Continuum

FMDA Hosts Successful 2013 Best Care Practices in the Geriatrics Continuum Conference

10th Annual Poster Award Winners Announced



lorida Medical Directors Association (FMDA) and newly elected President Dr. Robert Kaplan are thrilled with the success and outpouring of positive comments about the Best Care Practices in the Geriatrics Continuum

Conference this past October. The renowned geriatrics conference gathered together more than 230 physicians, nurse practitioners, pharmacists, nurses, and administrators at Disney's Contemporary Resort. Excellent speakers and a focused educational theme, "multiple morbidities," were highlights of the conference that aims to provide a great educational and networking experience for all those with an interest in long-term care and geriatric medicine.

This year's conference featured an outstanding presence from AMDA, FMDA's National Affiliate. The conference was honored to have AMDA President Dr. Jonathan Evans, AMDA Vice President and FMDA Director Dr. Naushira Pandya, and AMDA Secretary/ Treasurer Dr. Milta Little speak on a wide range of topics. In



From left: AMDA President Dr. Jonathan Evans, AGS Past-President Dr. Cheryl Phillips and GAPNA President Dr. Lisa Byrd during the national leaders presentation



From left: FL-ASCP President-Elect Dr. Rick Foley, AMDA Secretary Dr. Milta Little, FMDA President Dr. Robert Kaplan, AMDA Vice President Dr. Naushira Pandya, and Dr. Kenya Rivas

attendance were AMDA past-presidents Dr. Jim Lett, Dr. Cheryl Phillips, and Dr. Dennis Stone. Also presenting were the editor of the *Journal of the American Medical Directors Association*, Dr. John Morley, and AMDA's Senior Public Policy Manager Mr. Alex Bardakh.

FMDA President Dr. Robert Kaplan was very pleased with the success of the annual conference and thankful for all the generous support received every year.

"As the president of FMDA, we are grateful for the support we receive from AMDA and other collaborating organizations. The Best Care Practices conference would not be where it is without the help and guidance of our wonderful colleagues in geriatrics and longterm care."

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FMDA — Dedicated To Florida Long Term Care Medicine



Dedicated To Florida Long Term Care Medicine

Florida Medical **Directors Association**

Serving medical directors in Florida's postacute, subacute, skilled care, home care, hospice, and assisted living facilities.

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Letter from the President



nitially, I'd like to thank FMDA for the honor, privilege, and trust placed in me to serve as your president.

As mentioned in my address at the induction ceremony in October, these are exciting times for those of us practicing in the long-term care

(LTC) arena. We now have a seat at the transitions table and are encouraged to establish a dialogue and partnership with our acute care colleagues with a goal of reducing potentially avoidable re-hospitalizations.



At the swearing-in ceremony, AMDA President Dr. Jonathan Evans (right) congratulated both FMDA Chairman of the Board Dr. Hugh Thomas (left) and FMDA President Dr. Robert Kaplan.

There is new recognition of the value of LTC practitioners, exemplified by AMDA's recent formulation of Competencies for LTC Physicians, which will segue to a curriculum and perhaps eventual formal certification. Hopefully these competencies are eventually extended, in equivalent form, to non-physician practitioners as well.

For those of us who are medical directors. the value of certification is known to be



Friends from Alpha Physicians congratulate Dr. Kaplan on his new role as FMDA president.



evidence-based. with demonstrated improved care quality in facilities with a certified medical director. I would like to see the development and implementation of a regulation in Florida (similar to Maryland) mandating education equivalent to the

content of AMDA's Core Curriculum as a basic requirement to serve as a medical director in Florida.

Overtures have already been placed to Florida's Agency for Health Care Administration (AHCA) to drive this initiative. Other initiatives FMDA needs to continue to support include an amendment to the infamous "Pill Mill Bill," in particular, to exempt LTC physicians, and Physicians Orders for Life Sustaining Treatment (POLST), the latter perhaps in the form of a supportive position statement.

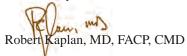
To accomplish any one of the above, we need a strong voice to persuasively articulate our position. This can only occur with a larger, engaged membership. As a result, the Board will be looking at implementing innovative strategies to increase membership.

As president, and with the assistance of our Executive Director Ian Cordes, I plan to reach out to areas of Florida historically devoid of FMDA membership, demonstrating value in partnering with FMDA. We'll explore additional strategies as well, to include expansion of full membership to other disciplines, for example, non-physician practitioners. We are also re-examining the value of our town meetings, looking at innovative restructuring to stimulate interest, enhance attendance, and hopefully grow membership.

On a closing note, I would like to thank everyone who contributed to the huge success of FMDA's Best Care Practices Conference. Some evaluations

> characterized this year's symposium as one of, if not our best ever. These truly are exciting times. I encourage each of you to remain or become involved, help us to grow, and strengthen FMDA, ensuring its position as one of AMDA's premier state chapters. I welcome the challenges and encourage your input, ideas, and advice.

> Thanks very much and have a safe Holiday Season!



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FMDA Working with FMA to Cut Insurance Red Tape



he Florida Medical Association (FMA) is working on priority legislation for 2014 that will cut insurance red tape for physicians, e.g., reforming Fail First/Step Therapy requirements and streamlining prior authorization protocols.

FMA has organized a coalition of patient groups like Elder Care Advocates and specialty groups like FOMA, FMDA, and the Florida Academy of Family Physicians to make our voices even stronger.

FMDA has signed on to a letter of support that will be sent to legislative leaders. Here are some excerpts:

"We, the signed patient, physician and business organizations, are writing to express our strong support to expand and strengthen the patient protections currently in Florida statute. On behalf of Florida's most vulnerable citizens, we are seeking your leadership and legislative action to address concerns in the areas of continuity of care, formulary requirements, access to medicines, streamline prior authorization, and step therapy/fail first restrictions.

"Physicians have the expertise to know what is best for patients and must have access to a full range of therapeutic options to use as they see fit for their patients. They should not be burdened with administrative hoops to jump through to secure the most appropriate therapy. Ultimately physicians, not bureaucrats, should make the determination of the best course of treatment and medications for a patient.

"We seek your assistance in protecting patient access to needed medicines. Access restrictions can prohibit a provider from prescribing what they believe is the best therapy option for a patient. It is imperative certain access protections be implemented. Protections such as continuity of care, adequate product selection, and ensuring a clear and simple path for physicians to navigate the prior authorization process are essential to patient health. Patients already face many challenges in remaining compliant with their medication regimens. Without these protections, unnecessary barriers to needed drug therapies could deter patients from adhering to their therapeutic regimens.

"Respectfully, we ask that you and your fellow members of the Florida House and Senate implement these critical recommendations this legislative session."

Here are some of the supporting organizations:

Amigos por la Salud Arthritis Foundation Florida Chapter Central Florida Behavioral Health Network Community Health Charities of Florida Depression and Bipolar Support Alliance Florida Inc. Depression and Bipolar Support Alliance Tampa Bay Inc. Elder Care Advocacy of Florida Epilepsy Association of the Big Bend Florida Academy of Family Physicians Florida Legal Services, Inc. Florida Medical Directors Association Florida Osteopathic Medical Association Florida Partners in Crisis Florida Podiatric Medical Association Florida Society of Clinical Oncology Florida State Hispanic Chamber of Commerce Florida Transplant Survivor Coalition H.E.A.L.S. of the South Hispanic Health Initiatives Interamerican College of Physicians and Surgeons Leukemia & Lymphoma Society Lupus Foundation of Florida Medicare Rx Access Network of Florida NAMI Florida Partnership for Prescription Assistance Florida Patient Access for Florida PhRMA Physicians for Reform The AIDS Institute

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FMDA Progress Report has a circulation of more than 1,100 physicians, physician assistants, nurse practitioners, directors of nursing, administrators, and other LTC professionals. Progress Report is a trademark of FMDA. The Progress Report welcomes letters, original articles, and photos. If you would like to contribute to this newsletter, please email your article to ian.cordes@fmda.org.



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FMDA News from Around the State

Lifetime Memberships

FMDA offers two-year, three-year, and lifetime memberships and we encourage new and renewing members to join at one of these new categories. For more information about membership, please contact **Mary Cay Swenson**, membership services manager, at (561) 689-6321.

Please join us in welcoming our newest lifetime member, Dr. Ian Levy Chua, who recently moved from Indiana to Lady Lake, Fla., with his wife, Sofy Sendoya, MD.

FMDA Thanks Its Lifetime Members

Owen A. Barruw, MD Ian Levy Chua, MD Marigel Constantiner, RPh Moustafa Eldick, MD F. Michael Gloth III, MD, CMD Bernard Jasmin, MD, CMD John Pirrello, MD Dennis Stone, MD Hugh Thomas, DO, FAAFP, CMD

Florida Partnership to Individualize Dementia Care in Florida Nursing Homes

Unnecessary antipsychotic drug use has been identified as a significant challenge in ensuring appropriate dementia care. A 2011 report by the Health and Human Services Office of the Inspector General found that 22 percent of the atypical antipsychotic drugs were not administered in compliance with CMS standards, and a CMS study found that over 17 percent of nursing home patients had daily doses exceeding recommended levels.

The Florida Partnership to Individualize Dementia Care in Nursing Homes is a collaborative of long-term care stakeholders working to refine dementia care in nursing homes throughout the state of Florida. Collaboration should allow this partnership to reduce duplication of effort, pool resources, and work together to ensure this initiative is successful in Florida.

The partnership currently includes the following organizations: Agency for Health Care Administration, Florida Health Care Association, Florida Medical Directors Association, Florida Ombudsman, Florida Pioneer Network, FMQAI, LeadingAge Florida, and the University of South Florida's College of Behavioral and Community Sciences (visit <u>www.fmda.org</u> for more information).

FMDA has taken a leadership role in this statewide initiative under the guidance of Dr. Diane Sanders-Cepeda.

Next FMDA Town Meeting & Dinner: March 21, 2014, in Daytona Beach

FMDA will hold its next Town Meeting & Dinner on Friday, March 21, 2014, in the Daytona Beach area. We wish to thank our Grand Sponsor, Avanir Pharmaceuticals, for sponsoring the reception as well as its generous support of the Town Meeting Dinner Program!

Medical directors, attending physicians, physician assistants, nurse practitioners, directors of nursing, nursing home administrators, and all health care practitioners with an interest in long-term care & geriatrics are invited to attend. Please watch for your email invitation, and RSVP to Matt Reese at mattr@fmda.org or by calling the business office at (561) 689-6321.

Volunteer Leaders Needed

FMDA is currently recruiting a chair for the Membership Development Committee, as well as a new editor for the *Progress Report* newsletter.

FMDA Call for Presentations & Posters

FMDA has officially opened the submission process for its 4th Annual "Call for Speaker Presentations" for Best Care Practices in the Geriatrics Continuum 2014, October 16-19, 2014, at Disney's *Grand Floridian* Resort in Lake Buena Vista (Orlando). We invite you 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. The submission deadline for all applicants is March 29, 2014.

FMDA's 11th Annual Poster Session will take place during the 2014 Best Care Practices conference. There are two categories for poster submissions: Case Reports, and Studies and/or Research.

To learn more about FMDA's "Call for Presentations," and "Call for Posters," or to submit a proposal, go to www.fmda.org. Matt Reese, the Communications Manager for FMDA, can be reached by telephone at (561) 689-6321. For more information visit <u>http://www.bestcarepractices.org/call-presentations.html</u>.

AMDA Annual Conference – February 27-March 2, 2014 – Nashville, TN

AMDA will hold its 37th Annual Symposium in Nashville, TN, February 27-March 2, 2014. We hope that many of our Florida members will be able to join us. FMDA's CME/Education and Board meetings will take place on Feb. 28. There will be a working lunch from 11:30 a.m. to 1 p.m. All members are welcome to attend — we ask you to RSVP to the business office so we can plan accordingly.

Florida Chapter Reception: Also on Feb. 28, FMDA will host the Florida Chapter Reception from 6:30 to 7:30 p.m. During the reception, Dr. Kaplan will present AMDA Foundation Chair Dr. Daniel Swagerty with a \$3,000 check to benefit AMDA's Future's Program.

We will send out an additional notice with more information at a later date.

Florida Delegates: We are seeking Florida delegates/alternates to AMDA's House of Delegates. Contact the FMDA business office for more information. All delegates and alternates must be voting members of AMDA.

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Congress Poised to Permanently Fix Its Medicare Payment Glitch



he two-year budget deal approved by the Senate on Dec. 18 aims to prevent another government shutdown.

It also includes a familiar annual rider — language to avert a steep pay cut to doctors who treat Medicare

patients. But this time might be different, with a fix that lasts. After more than a decade of temporary solutions, it appears Congress may be on the verge of permanently solving its persistent problem in the way it makes Medicare payments to doctors.

The problem was actually created by Congress itself, back in 1997, through a flawed formula called the Sustainable Growth Rate, or SGR. And every year since 2002, when the formula first began calling for cuts, the SGR has created political and fiscal fits for lawmakers.

Indeed, the so-called Medicare doc fix, unlike the Affordable Care Act, is one of the few health issues that has enjoyed near unanimous bipartisan agreement. Neither Republicans nor Democrats have had the stomach to allow cuts in pay that, in recent years, would have topped 20 percent. Yet no matter which party has been in charge, the annual — and sometimes monthly — exercise to cancel the cuts has been painful.

The current patch cancels a scheduled 24 percent cut in doctor pay — at a cost of around \$7 billion. And that's just for three months. This Congress is poised to do something significant. It appears ready to repeal the flawed payment formula and replace it with a whole new system — one that pays doctors according to the quality of results they produce, rather than the quantity of services they provide.

All three committees in the House and Senate that oversee the Medicare program have now approved such legislation. The House Energy and Commerce Committee approved a bill last summer; and the House Ways and Means and Senate Finance committees recently followed suit. In the normally more partisan House of Representatives, the votes on the bills were approved unanimously.

Statement The mission of FMDA is to promote the highest quality care as patients

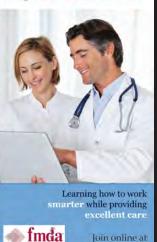
Mission

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

FMDA is 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 reportinuum Florida Medical Directors Association APPLICATION FOR MEMBERSHIP

Dedicated to supporting physicians and other practitioners in **Geriatrics** & Long-Term Care Medicine



Join online at www.fmda.org

CAREER-ORIENTED PROGRAMMING:

What do practitioners see as valuable? They can find clinical talks anywhere, but should they come to Best Care Practices for career guidance information, regulatory, and administrative talks? Why should doctors join FMDA and attend our conference? Answer = Career Competitive Advancement. What topics or burning questions would you like to see featured at future educational programs? Become a member today!



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Lessons Learned

— An Ongoing Series

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



his edition of Lessons Learned is mainly directed to the medical directors who read this; however, I believe most providers will benefit from reading it. This article is not meant to be legal advice and whenever reviewing a

contract, you may want to seek legal counsel. We are trained in the practice of medicine and not jurisprudence, but we are required to sign all sorts of

agreements, contracts, and other legal instruments. We rarely read every paragraph of every page and happily sign away, especially if we are to receive a stipend for services rendered. As medical directors we generally know what is expected of us. AMDA has outlined the duties of the medical director and AHCA has its regulations concerning the medical director. But what are the specific duties we have contracted with the nursing facility to perform?

Has any medical director actually gone over all of these duties with the executive director prior to signing the contract? I suspect generalities are discussed.

I currently serve as medical director of several facilities in central Florida, some for more than 20 years. Like most medical directors, I also have served as an attending physician for many of the residents. The line between medical director and attending physician many times is blurred. This, however, doesn't seem to be

a problem as long as quality care is provided and positive outcomes occur.

This year I made a decision to make a change in my practice and provide less direct patient care and intensify my efforts as medical director. Care was to be provided by one of our new physicians (geriatric fellowship trained). This would afford more time for education, chart reviews, and ability to update policies pertaining to the medical staff. To me it seemed like a win-win and I felt the administrators would be elated. Ouch, was I wrong. It became quite clear that what was expected of me had very little to do with what was in the paper I had signed.

Now, we all know we are not contracted to provide admissions to the facility as that would be construed as a type of kick-back. But, an unwritten agreement is that we will attempt to help attract patients to our facilities. After all, we are the medical directors and are responsible for the medical care and outcome of our residents.

I think most medical directors believe good care and outcomes will fill a building as well as other marketing efforts. It's too bad that these referral statistics are monitored at some homes and are, at times, used to determine who will be the medical director regardless of



I have tried to remind those

in charge that I don't have

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upon referrals.

care or outcomes. We at FMDA are fighting to raise the standards by attempting to change legislation requiring advanced training for medical directors, but that's a topic for a future edition.

Since increasing my efforts in my role as medical director I have been challenged with providing more referrals in hopes of filling more beds. I have tried to remind those in charge that I don't have a degree in marketing and my contract specifically states that my

employ is not dependent upon referrals. I am afraid my role as medical director may be at risk.

So now we come to the Lessons Learned. Sometimes doing what you feel is right ends up biting you.

• Read your entire contracts. Seek legal counsel if too confusing.

• Clarify areas you are uncertain about. Go over the agreement

with all parties and make sure you understand what the unwritten rules are.

• A medical director's job should not be expected to direct referrals — beware of the perception of kick-backs.

• Change affects everyone. I now see that my decision to change my practice had an effect on the perception the administrators had. I should have involved them in my potential decisions, then the idea would have been their idea.

I challenge medical directors to review their current contracts and discuss these issues with their administrators prior to problems arising. Have a healthy 2014!

FMDA News from Around the State Continued from page 4

Call for Articles for FMDA's Progress Report

FMDA is currently accepting articles for future issues of its awardwinning publication, Progress Report. If you would like to submit an article, or get more information, please contact Matt Reese at mattr@fmda.org. Watch for our post-convention issue - it's due out soon.

Annual Contributions

We need your help in order to continue to provide much-needed financial support to FMDA's Careers in LTC Program, student scholarships, and AMDA's Futures Program. We kindly ask that you make a contribution in the amount of your choosing when you join and/or renew your membership. You may also make an annual contribution online at www.fmda.org.

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Progress Report Wins APEX 2013 Award of Excellence!

By Matthew Reese, Education and Communications Manager



lorida Medical Directors Association (FMDA) — a chapter of the Columbia, MD-based AMDA – Dedicated To Long Term Care Medicine, and a specialty society of the Florida Medical Association — has been awarded

the APEX 2013 Award of Excellence in the category of Newsletters – Electronic & Web for FMDA's statewide newsletter *Progress Report*.

APEX 2013 — the 25th Annual Awards for Publication Excellence — recognized outstanding publications including not only newsletters and magazines, but also annual reports, brochures, and websites.

According to the APEX 2013 judges, "APEX 2013 awards were based on excellence in graphic design, editorial content and the success of the entry in achieving overall communications effectiveness and excellence. Naturally, entries in design categories were judged solely on the basis of their graphic design, and writing entries were evaluated primarily on the basis of editorial quality."

"We have worked diligently to publish a newsletter that is reader-friendly and provides the kind of relevant information we hope our membership finds useful."

Robert Kaplan, MD, CMD, president of FMDA, said, "We have worked diligently to publish a newsletter that is reader-friendly and provides the kind of relevant information we hope our membership finds useful."

Karl Dhana, MD, CMD, the former editor of *Progress Report*, had this to add, "As editor, it is very gratifying to be recognized, but



FMDA Executive Director Ian Cordes with former Editor Dr. Karl Dhana, MD, CMD

it is a team effort, and I would be remiss if I did not thank the rest of the board and staff for their ongoing support of *Progress Report*."

The APEX Awards for Publication Excellence is an annual competition for writers, editors, publication staffs, and business and nonprofit communicators. It is sponsored by Communications Concepts Inc., publishers of business communication reports for professional communicators.

With more than 2,400 entries this year, competition was exceptionally intense. Grand Awards were presented to honor outstanding work in 12 major categories, while Awards of Excellence recognized exceptional entries in 138 subcategories.

Stay Connected to FMDA and Each Other



MDA rolled out its brand new app at this year's Best Care Practices in the Geriatrics Continuum conference. The app contains many exciting features and

is available throughout the year. It may be downloaded for free in iTunes and Android stores, and will work on tablets and smartphones.



Please download the app today by searching for "Florida Medical Directors Association" or "FMDA."

You can follow FMDA at <u>www.fmda.org</u> and <u>www.bestcarepractices.org</u>. Visit us on LinkedIn and "Like" us on Facebook today!

FMDA — Dedicated To Florida Long Term Care Medicine

FMDA Hosts Successful 2013 Best Care Practices in the Geriatrics Continuum Conference Continued from page 1

At the President's Wine & Cheese Reception, new board members and officers were sworn in office by AMDA President Dr. Jonathan Evans. Assuming office for the term of 2013-2015 is President Dr. Robert Kaplan, Vice President Dr. Leonard Hock, Secretary/Treasurer Dr. Rhonda Randall, Chairman of the Board Dr. Hugh Thomas, and Immediate Past-President Dr. John Symeonides.

FMDA directors for 2013-2015 are Dr. John Potomski, Dr. Carl Suchar, Dr. Daniel Fortier, Dr. Claudia Marcelo, Dr. Michael Foley, Dr. Karl Dhana, and Dr. Naushira Pandya. Michelle Lewis is the

NP/PA voting member on the board.

Lastly, during the Annual Awards Luncheon at this year's conference, winners of the 10th Annual Posters Session were announced. Susan Waterbury, ARNP, took home first prize, with Sweta Tewary, PhD, finishing in second place, and Sofy Sendoya, MD,



Dr. Barbara Phillips (left) and Karen Jones, both with FL-GAPNA, enjoy some libations during this year's trade show.

in third place. The quality of posters was excellent this year, and Dr. Pandya is excited about the continued success of the program.



From left: VP of Operations for Optum Florida, Mark Lilly; FMDA President and Associate Medical Director for Optum Florida Dr. Robert Kaplan; Medical Director for Optum Florida Dr. Gregory James; and FMDA Treasurer Dr. Rhonda Randall, Chief Medical Officer & EVP at UnitedHealthcare Medicare & Retirement

For more information about next year's Best Care Practices Conference taking place at Disney's *Grand Floridian* Resort, October 16-19, 2014, please contact FMDA's Communications Manager Matt Reese, at (**561**) **689-6321**.



FMDA officers and directors being sworn in (from left): FMDA Director Dr. Naushira Pandya, FMDA Director Dr. John Potomksi, FMDA Vice President Dr. Leonard Hock, FMDA Treasurer Dr. Rhonda Randall, and NP/PA representative Michelle Lewis



From left: FMDA Immediate Past-President Dr. John Symeonides, 2013 First-Place Poster Winner Susan Waterbury, ARNP; and AMDA Vice President and FMDA Poster Review Committee Chair Dr. Naushira Pandya



From left: Dr. Marc Agronin from Miami Jewish Health System; attorney Karen Goldsmith, regulatory consultant for Florida Health Care Association; and Dr. Brian Kiedrowski, Medical Director for Miami Jewish Health System

View the conference photo gallery online at www.fmda.org.

24th Annual Long-Term Care Symposium Held in Brevard County

By Jeffrey W. Fisher, Executive Director, Brevard County Medical Directors Association



he 24th Annual Long-Term Care Symposium was held at the Hilton Melbourne Rialto Place November 6, with more than

450 guests in attendance who enjoyed an evening full of great information and entertainment for the long-term care industry of Brevard County.

"This has been a great event and we are very pleased that so many friends from our industry came out," said Dr. John Potomski.

The evening began with a collection of exhibitors sharing their latest products and services while the attendees mingled and strolled through the medical village.

During the dinner program in the main ballroom, the major sponsors Avanir, Gentiva, and Johnson & Johnson were recognized. The platinum sponsors were recognized as well by receiving plaques and an opportunity to speak about their organization.

The dinner presentation began with Sherriff Wayne Ivey leading the audience through the Pledge of Allegiance to the flag. Sheriff Ivey was also the first guest speaker who addressed how elderly people are often targeted by criminals with scams and thefts. "Everyone in this room cares about the elderly and we must all be highly vigilant as there are unsuspecting seniors being victimized frequently," said Ivey.

Following the pledge, Father Robert Bruckhart, director of Pastoral Care at Health First, gave a wonderful invocation.

Dr. Potomski, the founder and organizer of the annual event, thanked Executive Director Jeffrey Fisher, who has organized several of the events of the annual Space Coast Medicine Week."A big thanks to Jeffery Fisher for all his work with this," said Potomski.

The second speaker, Chris McGinnis of Gentiva, spoke eloquently about the latest trends and statistics in the long-term care industry focusing on transitions of care.

Following Mr. McGinnis' presentation, Dr. Potomski introduced the world-famous acrobat Carla Wallenda, who spoke about how she has remained so active in her later years.

At 78 years old, Wallenda still performs and thrilled crowds at this year's Space Coast State Fair by climbing a 125-foot-high sway pole twice daily. A video clip from last year was shown to inspire the audience. "On my days off from performing, I practice on my baby pole, which is only 80 feet high," said the living legend of the entertainment industry.

The fourth speaker, Dr. Ted Clontz, spoke about "Understanding Pseudobulbar Affect" and explained how the latest drugs are helping to fight the condition.



Dr. John Potomski presents the Long-Term Care Achievement Award to Francine Gordon, LPN.

Dr. Bruce Stein presented an update on anticoagulation using the newer drug options available to patients and physicians today.

Joanne Fisher with Brevard Geriatrics spoke about the strength of Brevard's longterm care community and the tremendous options that the elderly have in Brevard.

The highlight of the evening, the annual Long-Term Care Achievement Award, was presented to Francine Gordon, LPN, for her many years of exemplary service to the elderly in Brevard.

The evening culminated with many valuable door prizes being given away to

lucky ticket holders by Dr. Potomski and Jeffrey Fisher.

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For more information, call (813) 974-2161 or email bcs-hcrm@usf.edu

Training Academy on Aging at the Florida Policy Exchange Center on Aging in the School of Aging Studies







STAND UP AND 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 medical directors in 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 **lan Cordes**, executive director, at (561) 689-6321 or **ian.cordes@fmda.org**.

FMDA MEMBERSHIP APPLICATION

There are three classes of dues-paying FMDA members. A. Regular membership: Every medical director or attending physician of a long-term care medical facility or organization in the state of Florida and neighboring states shall be eligible for regular membership in FMDA. Members in this classification shall be entitled to a vote, shall be eligible to be a member of the Board of Directors and to hold office. B. Affiliate members: Composed of two categories, Affiliates may be any individual or organization in the medical, regulatory, or political fields of long-term care and wishing to promote the affairs of FMDA. There are two subcategories, which include: B1. Professional Affiliate members: This category is composed of physician assistants and nurse practitioners. Professional Affiliate members, other professionals, and organizations. Members shall have all FMDA privileges except shall not be eligible to vote nor hold elected office and may be appointed by the Board of Directors to serve on FMDA committees. C. Allied Health Professional Relations Committee: Health care practitioners who provide essential services to patients in the postacute setting are eligible to join, including dental professionals, podiatrists, opticians, psychiatrists, senior care pharmacists, psychologists, etc. Committee members are non-voting and may be appointed by the Board of Directors to serve on other FMDA committees.

Name:	Title:					
The mailing address belo	w is for the facility, or my o	office address. Referred	by FMDA m	nember:		
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Organization's Name: _				_		
Mailing Address:		City:		State/ZIP:	County:	
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	50 contribution to support FMDA's Car	eers in LTC program stu	dent echolarch	ine and AMDA's	Euturos Program	\$ 50
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