

In collaboration with the University of
North Carolina Eshelman School of Pharmacy

Health Care Reform and the Future of Medicare & MTM: Pharmacists' Opportunities

Thursday, March 1, 2012

6:00 - 8:15pm

The William F. Andrews Conference Center

Program Description

Medicare medication benefits are confusing and the provisions of health care reform complicate the issue further. Yet, patients frequently turn to pharmacists and pharmacy staff for answers to medication payment questions. This program will clarify the elements of Medicare pharmacy benefits and the implications of health care reform, emphasizing the role and opportunities for pharmacists and pharmacy staff.

Target Audience

Pharmacists and pharmacy technicians in community and hospital settings

Objectives

At the conclusion of this knowledge based activity, pharmacists and pharmacy technicians should be able to:

1. Describe the basic elements of Medicare A, B, C and D.
2. Discuss the impact of health care reform on Medicare.
3. Review MTM requirements with Medicare.
4. Review numerous MTM models in North Carolina, including programs affiliated with Part D plans, CheckMeds NC, CCNC and others.
5. Discuss potential changes in Medicare policy and implications for patients and pharmacists.

Agenda

- 5:30 - 6:00pm Registration and dinner (provided)
6:00 - 7:00 Medicare and health care reform
7:00 - 7:15 Break
7:15 - 8:15pm Medicare and health care reform (continued)

Speaker

GINA UPCHURCH, RPh, MPH
Executive Director, Senior PharmAssist
Durham, NC

Location

The William F. Andrews Conference Center
3024 New Bern Ave., Raleigh, NC 27610
Directions and parking information will be sent with your confirmation letter.

Wake AHEC is fully committed to the principle of equal educational opportunities for all individuals and does not discriminate on the basis of any characteristic protected by federal or state law. If you require any of the auxiliary aids or services identified in the Americans with Disabilities Act in order to participate in this program, please call us at 919-350-0469 no later than ten business days before the program.

Call 919-350-8547 for the inclement weather schedule.

Credit



The University of North Carolina Eshelman School of Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. To receive CE credit attendance must be acknowledged at the registration desk upon arrival at the program. Statements of credit will be mailed upon completion and evaluation of the programs. No partial credit will be given. Contact Kimberly Kornegay at 919-350-0469 or kkornegay@wakemed.org if you have questions.

Program Coordinator:

Diana Bond, PhD, RN-BC, Director
Continuing Medical & Pharmacy Education & Library/
Quality Services
Wake AHEC

Pharmacists: 2.0 contact hours
ACPE #0046-9999-12-012-L01-P

Pharmacy Technicians: 2.0 contact hours
ACPE #0046-9999-12-012-L01-T

To receive credit, participants must attend 100% of the session and participate in the learning activities. Partial credit will not be given.

Registration Information on next page!

Fees include credit, dinner and online handouts.

Register Today!

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Wake AHEC

Educating present and future healthcare providers

Part of the North Carolina AHEC Program

Health Care Reform and the Future of Medicare & MTM: Pharmacists' Opportunities

Thursday, March 1, 2012

- Registration (Pharmacists): \$50; after 2/23/12 - \$60
- Registration (Pharmacy Technicians): \$25; after 2/23/12 - \$35

No refunds will be issued. Substitutes are encouraged.

Vouchers not accepted.

NABP e-Profile ID: _____ Pharmacists and Pharm Techs only

Birth-MMDD: _____ Pharmacists and Pharm Techs only

First Name _____ MI _____ Last _____

Social Security # (last 4 digits only)

Dr. Mr. Ms. Mrs. Degree(s) (e.g., MD, PharmD, MS, BS) _____

Clinical Specialty _____

Home Address _____ City _____

State _____ Zip _____ Home County _____ Home Phone (____) _____

Employer _____ Job Title _____

Work Address _____ City _____

State _____ Zip _____ Work Fax _____ Work Phone (____) _____

Department _____ Work E-mail _____

By providing your fax number, email address and telephone number, you have granted permission for us to contact you via the numbers and address indicated.

Payment Options Payment or supervisor signature must accompany registration.

Check enclosed. (Make check payable to Wake AHEC.)

Charge my: Corporate Card Personal Card
 Mastercard Visa AMEX Discover

If this program provides a meal, do you require a vegetarian option? Yes No

Card # _____ Exp. Date _____

Authorized Signature _____ Name as it appears on card _____

Employer will make payment. Fax registration now.

Supervisor's name printed _____ Title _____

Supervisor's Signature _____ Phone _____

By signing, I am certifying that agency payment will follow.

WakeMed Employees ONLY: -
(REQUIRED for all WakeMed Employees.) WakeMed Hospital #/Department # _____

Register Today!
Online: www.wakeahec.org * **Fax:** 919-350-0467
Mail: Wake AHEC, Attn: Kim Kornegay
3261 Atlantic Ave., Ste 212 Raleigh, NC 27604
For questions, please contact Kim Kornegay at 919-350-0460 or kkornegay@wakemed.org.