

### **CMS Playbook:** **What are the new rules for 2025?**

CMS has announced another multitude of regulation revisions to be effective with the April 28, 2025 surveys.\* Regulations that include medications or pharmacy have not seen such a change since the Fall of 2022, with the addition of medications being used to treat a psychotropic purpose, but do not fall under the classic psychotropic medication classes, to include the requirements just like the standard classes. Several major areas have received enhancements for CMS to enhance quality oversight and streamline compliance procedures.

### **Important Pharmacy-Related Areas**

#### **Psychotropic Medications:**

Consolidation of psychotropic medication requirements under F605 Respect and Dignity.

- New definitions include convenience and discipline in the surveyor guidance. For convenience, this means that the use of medications that cause (either intentional or unintentional) a change in the resident's behavior (e.g., sedation) such that the resident is subdued and/or requires less effort from staff for care. For discipline, this means any action, such as the administration of a medication, taken by the facility staff for the purpose of punishing or penalizing residents (examples: wandering, bathing difficulties).

*New regulations are changing delivery of care, reimbursement, and compliance requirements in long-term care. We're here to help you stay informed and be proactive!*

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Important elements to review regarding psychotropic medication use:

- Comprehensive Assessment and Behavioral (Non-Pharmacological) Interventions completed and documented
- Ensuring that resident behaviors or symptoms are not upsetting to the resident or a safety concern to self or others, not due to an underlying medical condition or problem that is expected to resolve by treating condition or offending medication is discontinued, not due to environmental or psychological stressors
- Medical record must reflect the resident's right to be informed for any new or increase in dose for a psychotropic medication, this includes documented communication of the benefits, risks, and proposed alternatives to treatment and if the resident chooses to continue with treatment plan.

## Pain Management

- Updated definitions of Acute, Chronic, and Subacute pain to align with the CDC definitions
- Opioid treatment needs to be appropriately assessed and individualized
- When initiating therapy, clinicians may consider immediate-release opioids instead of longer acting opioids

## COVID-19 Vaccination:

Previously announced in a CMS Memo from May 2021, but now officially included in the SOM Appendix PP. Facilities must develop and implement policies and procedures to ensure the following:

- When the COVID-19 vaccine is available to the facility, each resident and staff member is offered the vaccine, unless medically contraindicated or has already received immunization
- Before offering, each resident and staff member receive education regarding benefits and risks of vaccination, and potential side effects of the vaccine
- Resident or resident representative has the opportunity to accept or refuse the vaccine and/or change their decision; and
- Resident's medical record includes documentation of:
  - That education was provided and to whom on benefits, risks, and potential side effects of the vaccine
  - Each dose administered to the resident
  - If resident did not receive the vaccine due to medical contraindication or refusal
- Facility maintains documentation related to staff vaccination that includes:
  - Staff were provided with education regarding benefits, risk, and potential side effects of the vaccine
  - Staff were offered the vaccine or information on obtaining the vaccine
  - COVID-19 vaccine status of staff and related information as indicated by the NHSN (CDC's National Healthcare Safety Network)



For more information, please review the advanced copy of the Guidance to Surveyors at: [CMS-QSO-25-12-NH](#)

*\*The information provided in this article reflects our understanding of current CMS regulations and guidelines. However, CMS regulations and survey requirements are subject to change, and effective dates may be updated. Stay informed by regularly reviewing official CMS communications and regulatory updates to ensure compliance.*



# PAXCESS™

## Patient Support Program

## Program Extension!

Paxlovid PAXCESS Program Extended through 2025

### PAXCESS

- Residents must be uninsured or have government insurance and be 18 years of age or older (Medicare, Medicaid, TRICARE, or any other state or federal medical pharmacy benefit program)
- Primary diagnosis must be for an FDA- approved indication
- Enrollment application must be completed online by the Facility/Community ([iAssist](#)) or the resident/resident's family or designee ([PAXCESS Patient Support Program \(iassist.com\)](#))
- Eligibility is confirmed or denied when the online application is submitted. Eligible residents must download a PAXCESS card
- The PAXCESS card must accompany the Paxlovid order submitted to the pharmacy
- Program enrollment must be completed on or prior to the date of dispense for Remedi to submit the claim on the resident's behalf

### PAXCESS Co-Pay Savings Program

- Resident must have private insurance and be 18 years of age or older
- Primary diagnosis must be for an FDA- approved indication
- Enrollment for this program must be done online at [Co-Pay Programs | PAXLOVID™](#) or <https://www.paxlovid.com/enroll-in-co-pay-program>
- Eligible residents must download a co-pay card that the facility staff must send with the Paxlovid order to the pharmacy
- Program enrollment must be completed on or prior to the date of dispense for Remedi to submit the claim on the resident's behalf

## CMS EPCS | Electronic Prescribing for Controlled Substances

### NEW DATE!



The Federal SUPPORT Act requires licensed healthcare providers to electronically prescribe controlled substance prescriptions (EPCS) for Medicare Part D beneficiaries in community and non-skilled settings. CMS has extended the deadline for LTC facilities to January 1, 2028. This is an update from the original timeline of January 1, 2025. Details can be found at: [CMS Electronic Prescribing for Controlled Substances \(EPCS\) Program](#)

Remember, electronic prescribing is the fastest and most compliant method of communication for controlled substance prescriptions!

# Oral Phosphate Binders

## Added to CMS Medicare Bundled Payment to Dialysis Centers

Effective January 1, 2025, CMS added oral phosphate binder medications to this all-inclusive bundle to dialysis centers. Previously the most common examples of medications in this bundle were Sensipar, Procrit, Epogen, and Retacrit. For Medicare residents on hemodialysis, the following medications should **not** be ordered from Remedi SeniorCare and should be coordinated with and/or supplied by the dialysis center. Orders dispensed for medications listed below by Remedi SeniorCare are no longer covered by the Medicare drug benefit and will be charged to your facility.

GENERIC NAME	BRAND NAME
Sevelamer carbonate	N/A
Sevelamer hydrochloride	Renagel / Renvela
Sucroferric oxyhydroxide	Velphoro*
Lanthanum carbonate	Fosrenol
Ferric citrate	Auryxia
Calcium acetate	PhosLo / Phoslyra / Eliphos
Tenapanor	Xphozah

\*Velphoro is only indicated in hemodialysis patients and drug access can only be supplied through the dialysis center.



[CMS: ESRD & Acute Kidney Injury Dialysis: CY 2025 Updates; CMS: Calendar Year 2025 End-Stage Renal Disease \(ESRD\) Prospective Payment System \(PPS\) Final Rule \(CMS-1805-F\)](#)

## SAVE A PHONE CALL OR EMAIL!

VISIT THE [MYREMEDI WEB PORTAL](#) FOR TOOLS & RESOURCES.

- Drug price quote tool
- Vaccine information
- Invoice approvals
- Pharmacy policies and procedures

AND MUCH MORE!



Available 24/7/365 with a personalized login for select roles.

Contact your Account Manager for access.



Clinical resources at your fingertips!

# Remedi Superstar Nurse



## Kathryn Sandaker, LPN

**Clinical Support Specialist**  
The Legacy at North Augusta  
Staunton, Virginia

Congratulations to Kathryn Sandaker, LPN, Clinical Support Specialist, at The Legacy at North Augusta - A National Lutheran Community in Staunton, Virginia, for being chosen as the Remedi Superstar Nurse. Kathryn was nominated by her Executive Director, Denise Kozlowski RN. Per Denise, "Kate has worked at The Legacy for two years and has 16 years of experience. She consistently demonstrates exceptional qualities that make her an outstanding candidate for this recognition. Kate is a true team player. She actively engages with colleagues, fostering an environment of mutual respect and cooperation. Kate embodies leadership. Her calm demeanor inspires confidence in both residents and team members. She leads by example demonstrating empathy, resilience, and adaptability. Whether administering medications, assessing a resident with dementia following a fall, or providing end-of-life care, Kate approaches each task with compassion and precision. Her ability to connect with seniors and their families is remarkable. Kate actively seeks opportunities to enhance the care of our residents. She proposes innovative solutions to community challenges. In her role at the Legacy, Kate takes charge during emergencies effectively delegating tasks and ensuring smooth operations. Kate's commitment to seniors, combined with her exceptional teamwork, leadership, and clinical skills, makes her a deserving candidate for the Remedi Superstar Nurse Award."

*Congratulations!*

**NOMINATE A FUTURE REMEDI NURSE SUPERSTAR!**



[SuperStar.Nurse@remedirx.com](mailto:SuperStar.Nurse@remedirx.com)

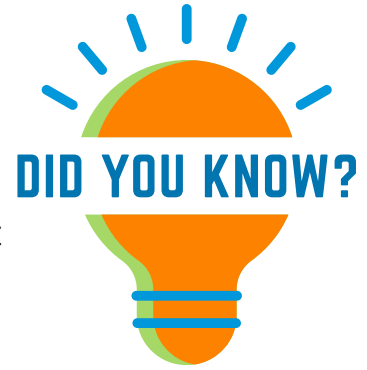


# DOSE OF FUN

*Here's a 'Dose of Fun' to give you a break from the daily grind - enjoy these fun facts and games. Laughter is the best medicine!*

## Why Do Some Medications End in "-mab"?

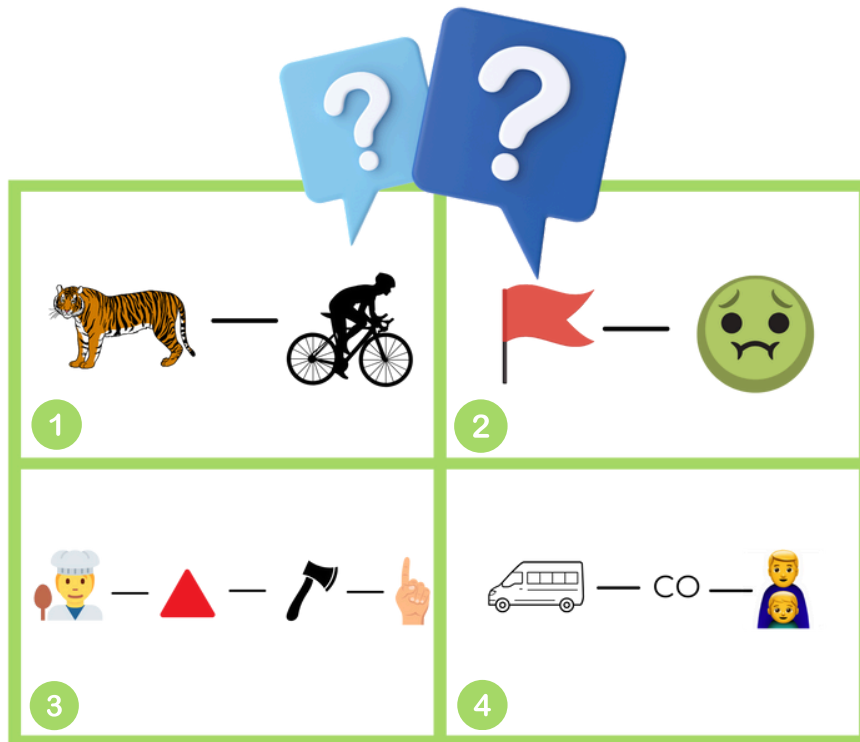
If you've seen drugs like Adalimumab (Humira) or Trastuzumab (Herceptin), you might wonder about the "-mab" ending. It stands for monoclonal antibody, a type of biologic drug designed to target specific cells in the body!



## Pepto-Bismol's Pink Power

The active ingredient in Pepto-Bismol, bismuth subsalicylate, has been soothing upset stomachs for over 100 years! Fun fact: Its signature pink color was originally just a branding choice, but people came to associate it with relief.

## Can you GUESS the Medication?



Answers on page 7

Answers to the previous drug emojis in the 2024 v3 edition.

-6  
Lasix

-P-😄  
Metropolol

-🌊🚲  
Doxycycline



## **Welcome to Pharm Phresh!**

*This new section is your go-to source for the latest updates from the world of pharmacy. Stay fresh with insights, trends, and advice!*

On January 30, 2025, the FDA approved the medication, JOURNAVX™ (Suzetrigine), an oral, non-opioid, highly selective analgesic for the treatment of adults with moderate to severe acute pain. This is the first new class of pain medicine approved in 20 years.

It works by targeting a pain-signaling pathway involving sodium channels in the peripheral nervous system before pain signals reach the brain. Most common side effects noted in clinical trials were itching, muscle spasms, increased levels of creatine phosphokinase, and rash. Patients should not take food or consume grapefruit juice while taking Journavx, and the tablet should not be crushed or chewed. Patients on contraception or trying to conceive have further guidance and should discuss it with their healthcare provider. Journavx is anticipated to be available in mid-March. Utilize the MyRemedi Drug Price Quote Tool for pricing. Coverage is determined by individual insurance providers.



### **Don't Miss Our Latest Educational Resources!**

Below are some recent educational resources released by our clinical team to help you stay up to date on the latest in medication management and pharmacy best practices. Copies can be accessed through your Consultant Pharmacist or by visiting MyRemedi > Resources.

#### **OCTOBER 2024**

- Updated MDS Section N High-Risk Medications to include Anticonvulsants
- Shortened Expiration Dates Quick Reference Guide
- Medication Storage form
- Medication Pass form
- Controlled Substance form

#### **NOVEMBER 2024**

- High Cost Drug and IV Guides
- Do Not Crush Listing
- Pneumococcal Vaccine Timing Chart

#### **FEBRUARY 2025**

- Master Vaccine Packet  
*(includes the one pager Vaccines at a Glance originally published November 2024)*

**Drug Emoji Answers: 1. Tigecycline 2. Flagyl 3. Ceftriaxone 4. Vancomycin**