

The Maine Pharmacy Association

Business Meeting
Spring Convention & Trade
Show 2011



Agenda

- MPA Executive Board Introductions
- Treasurer's Report
- Membership Report
- Board of Pharmacy Report
- Legislative/ DHS Update
- APhA House of Delegates Report
- Other Business
- Adjourn

MPA Executive Board

- Christopher Gauthier, Executive Director
- Kenneth McCall, President
- Laurie Roscoe, Vice President
- Eric Jarvi, Treasurer
- Robert Morrissette, Government Affairs
- Lisa Martin
- Candace Danforth, Technician Member
- John Murray, Maine MPHP Coordinator
- Ahmed Abdelmageed, Husson University
- Curt Cyr, University of New England
- Bob Nutting, Legislative Liaison
- 2 Student seats (one each from Husson & UNE)

Treasurer's Report



MPA Treasurer's Report – May 2011

- MPA budget is part of strategic plan
- Historical prospective
 - 2009 income = \$65,625
 - 2009 expenses = \$64,206
 - 2010 income = \$64,675
 - 2010 expenses = \$59,126
 - 2-year average income = \$65,150
 - 2-year average expenses = \$61,666

MPA Treasurer's Report – May 2011

Category	2010-2011 Budget
Estimated Income	\$66,150 _{2-year average}
Business expenses (Executive Director)	\$9,163
Contract services (Accounting, Government Affairs, Web design/maintenance)	\$4,450
Convention (Awards, Entertainment, Facility, Golf, Meals, Supplies)	\$28,750
Operations (Administration, Bank, Membership dues, Postage, Printing, Supplies, Telecommunications, Telephone)	\$16,408
Travel (Conference registration, meals, travel)	\$2,000
Other (Scholarships, Recruitment, Legislative Day)	\$5,000
Total	\$65,771
Net	\$379

MPA Treasurer's Report – May 2011

Category	2010-2011 Budget	2010-2011 Actual April
Estimated Income	\$66,150 _{2-year average}	
Business expenses	\$9,163	\$ 6,664
Contract services	\$4,450	\$ 2,644
Convention	\$28,750	\$13,786
Operations	\$16,408	\$11,155
Travel	\$2,000	\$ 2,114
Other	\$5,000	\$ 233
Total	\$65,771	\$35,596¹
Net	\$379	

¹54% of projected budget after 8 months or 67% of budget year

MPA Treasurer's Report – May 2011

- MPA balance sheet as of April 30, 2011

CD	\$ 7,269.69
PayPal	\$12,840.21
TD Banknorth	<u>\$29,492.40</u>
Total checking/savings	\$49,602.30
Investments at cost	\$36,476.68
Investments at market	<u>\$ 7,497.65</u>
Total other current assets	\$43,974.33
Total assets	\$93,576.63

MPA Treasurer's Report – May 2011

- MPA balance sheet as of April 30, 2011

Equity

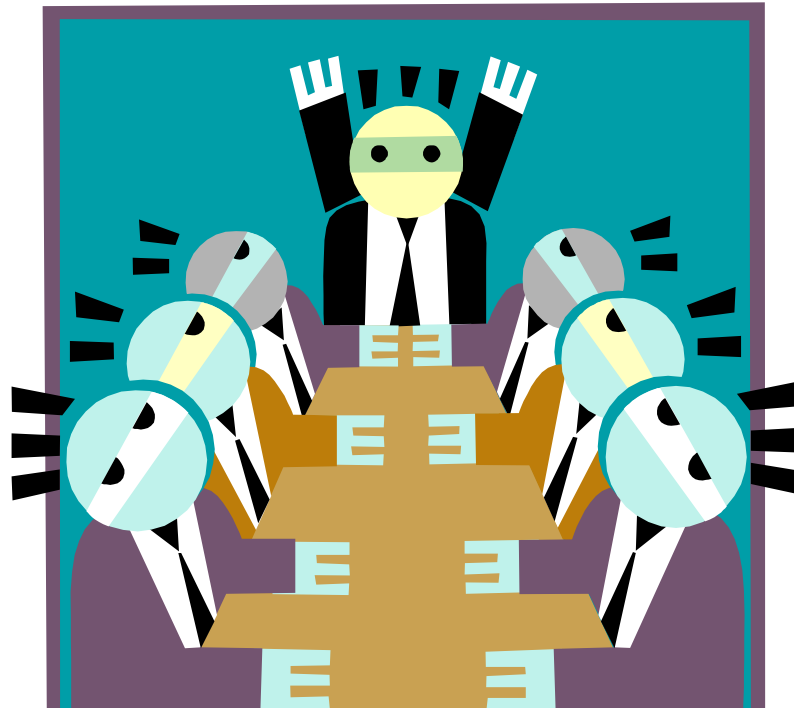
Unrealized gains/losses \$ 3,066.08

Unrestricted net assets \$75,372.03

Net income \$ 15,138.52

Total liabilities and equities \$93,576.63

Membership Report

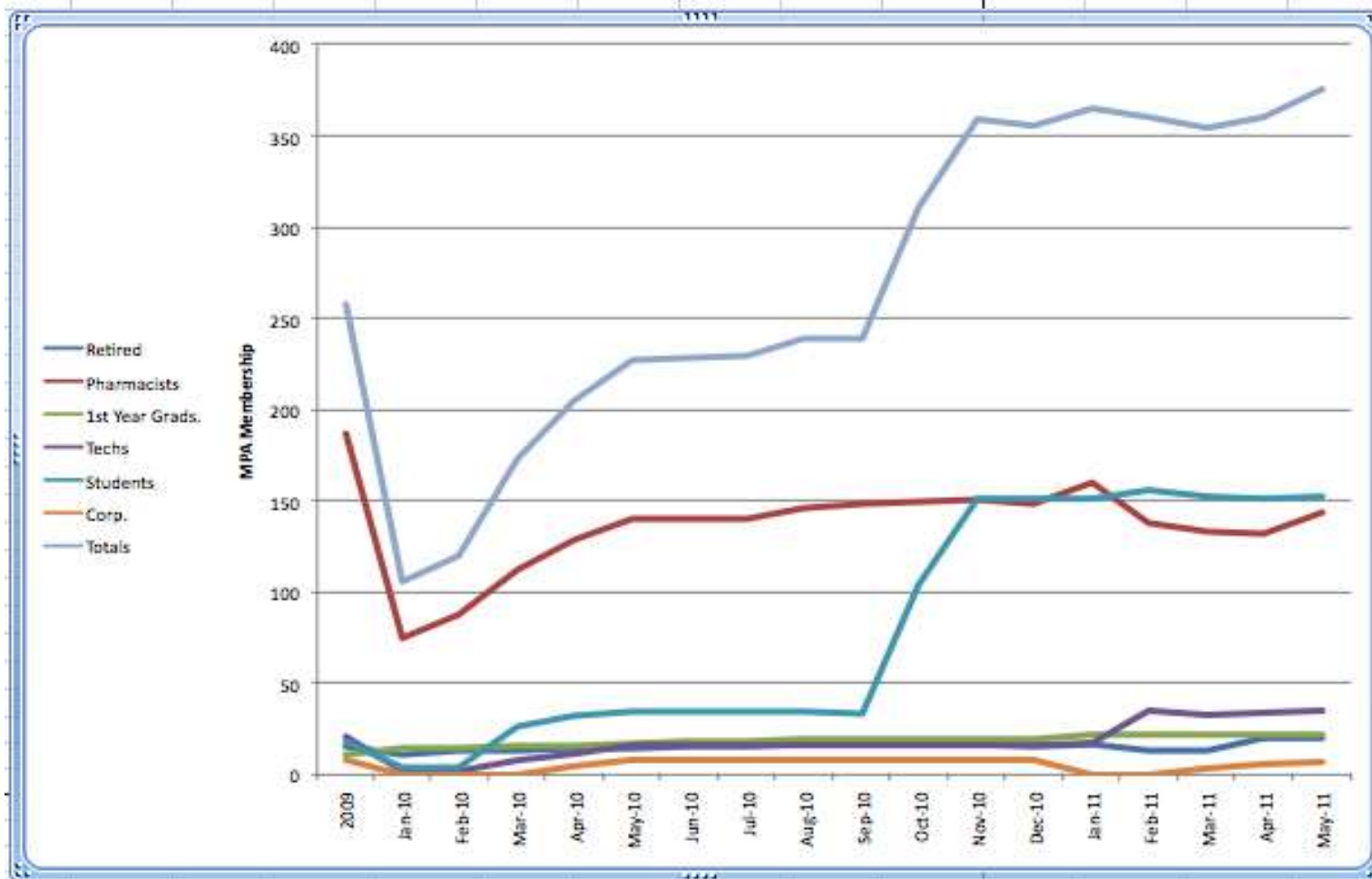


Why is it important to join the MPA

- MPA represents the interests of ALL Maine pharmacies, pharmacists, pharmacy technicians and pharmacy students
 - Hospitals, chain & independent pharmacies, health plans, pharmacy schools, etc.
- New Leadership
 - Ken (Mac) McCall, MPA President/UNE
- Strategic Plan
 - Grow MPA membership/budget
 - Represent pharmacy in all legislative matters
 - Ex. Immunization laws, Payment for MTM services
 - Represent pharmacy at Board of Pharmacy (BOP) meetings
 - State licensing requirements for students& interns
 - Reversed BOP decision on using immunization credits as CE credits
 - Membership only updates on all matters related to pharmacy in Maine

MPA Membership

2009- present



MPA Membership Results

	2009	May 2010	May 2011	% Change from previous year
Retired	15	14	19	36%
Pharmacists	186	139	143	3%
1 st Year Grads	11	17	21	24%
Technicians	21	16	34	113%
Students	18	34	152	347%
Corporate	7	7	6	-14%
TOTALS	258	227	375	65%

The bad news: only 16% of Maine pharmacists belong to the MPA

What can you do?

- Get involved (attend a legislative hearing or MPA meeting)
- Encourage friends and colleges to join
- Encourage your company to join as a corporate sponsor
- Encourage your company to provide incentives for staff to join
- Promote the MPA

“Every man owes a part of his time and money to the business or industry in which he is engaged. No man has a moral right to withhold his support from an organization that is striving to improve conditions within his sphere.” – Theodore Roosevelt

Questions?

- Membership Committee (started 11/10/11)
 - Laurie Roscoe (chair) – lroscoe@maine.rr.com
 - Sarah Vincent (vice chair)
 - Chris Gauthier
 - Larry Lamie

Board of Pharmacy Report



Legislative/ DHS Update



APhA House of Delegates Report



APhA House of Delegate Report – Adopted Policies

- **Potential Conflicts of Interest in Pharmacy Practice**

1. APhA reaffirms that as health care professionals, pharmacists are expected to act in the best interest of patients when making clinical recommendations.
2. APhA supports pharmacists using evidence-based practices to guide decisions that lead to the delivery of optimal patient care.
3. APhA supports pharmacist development, adoption, and use of policies and procedures to manage potential conflicts of interest in practice.
4. APhA should develop core principles that guide pharmacists in developing and using policies and procedures for identifying and managing potential conflicts of interest.

APhA House of Delegate Report – Adopted Policies

● **Pharmacist's Role in Health Care Reform**

1. APhA affirms that pharmacists are the medication experts whose accessibility uniquely positions them to increase access to and improve quality of health care while decreasing overall costs.
2. APhA asserts that pharmacists must be recognized as the essential and accountable patient care provider on the health care team responsible for optimizing outcomes through medication therapy management (MTM).
3. APhA asserts the following:
 - a. Medication Therapy Management Services: Definition and Program Criteria is the standard definition of MTM that must be recognized by all stakeholders.
 - b. Medication Therapy Management in Pharmacy Practice: Core Elements of an MTM Service Model, as adopted by the profession of pharmacy, shall serve as the foundational MTM service model.

APhA House of Delegate Report – Adopted Policies

- **Pharmacist's Role in Health Care Reform (con't)**
 4. APhA asserts that pharmacists must be included as essential patient care providers and compensated as such in every health care model, including but not limited to, the medical home and accountable care organizations.
 5. APhA actively promotes the outcomes-based studies, pilot programs, demonstration projects, and other activities that document and reconfirm pharmacists' impact on patient health and well-being, process of care delivery, and overall health care costs.

APhA House of Delegate Report – Adopted Policies

- **Pharmacist's Role in Health Care Reform (con't)**

6. APhA supports the development and delivery of interprofessional education programs that facilitate team-based delivery of care.
7. APhA strongly recommends that a comprehensive medication review conducted at least annually by pharmacists should be standard practice and a required component of health benefit programs for all patients.

APhA House of Delegate Report – Adopted Policies

- **Pharmacy Practice Accreditation**

1. APhA should lead the creation of consensus-based, pharmacy profession–developed accreditation standards and methods of evaluation to optimize the quality and safety of patient care and promote best practices.
2. APhA urges that accrediting bodies use profession-developed standards for pharmacy.
3. APhA supports only those pharmacy accreditation processes that are voluntary, transparent, consensus-based, reasonably executable, and affordable, while avoiding duplication and barriers to patient care.
4. **APhA opposes mandatory pharmacy accreditation.**

APhA House of Delegate Report – Adopted Policies

- **Pharmacy Practice Accreditation**

5. APhA shall assume the leadership role among stakeholders on the design and implementation of an appropriate process for any new pharmacy accrediting program.
6. APhA supports the appropriate use of data gathered from pharmacy practice monitoring processes to facilitate the advancement of pharmacy practice and quality of patient care.

APhA House of Delegate Report

– Adopted New Business

- **Requiring Influenza Vaccination for All Pharmacy Personnel**

APhA supports an annual influenza vaccination as a condition of employment, training, or volunteering within an organization that provides pharmacy services or operates a pharmacy or pharmacy department (unless a valid medical or religious reason precludes vaccination).

APhA House of Delegate Report

– Adopted New Business

- **Pharmacists as Providers Under the Social Security Act**

APhA supports changes to the Social Security Act to allow pharmacists to be recognized and paid as providers of patient care services, including but not limited to medication therapy management.

APhA House of Delegate Report

– Adopted New Business

- **The Role and Contributions of the Pharmacist in Public Health**

In concert with the American Public Health Association's (APhA) 2006 policy statement, "The Role of the Pharmacist in Public Health," APhA encourages collaboration with APHA and other public health organizations to increase pharmacists' participation in initiatives designed to meet global, national, regional, state, local, and community health goals.



Other Business

Adjourn

Thank you!