

The Omnicare Over-the-Counter Advantage Program

Omnicare[®], a CVS Health[®] company
March 5, 2018

People age 50 and older spend more than \$25 billion annually on OTCs.

Residents in assisted living communities often depend on both prescription medications and over-the-counter (OTC) medications to maintain a high quality of life. However, access and cost can act as barriers to OTC medications. Furthermore, if the OTC medications that residents use are not watched closely, they could even become a safety concern.

Omnicare[®], a CVS Health[®] company and the industry-leading long-term care pharmacy services provider, offers the Over-the-Counter (OTC) Advantage Program to address all three areas — expanding access at only pennies per dose, with significant safety advantages. The program ensures that these important OTC medications can continue to play a valuable role in the care of assisted living residents.

Questions on access, cost and safety

Older Americans are using over-the-counter medications in large numbers. People age 50 and older spend more than \$25 billion annually on therapeutic and preventive OTC products.

However, even with such a high level of consumption, access can still become an obstacle to OTC medications, especially for assisted living residents with limited transportation options. Some do not have a high level of functionality or mobility. They may depend on a community van for scheduled trips to drug stores or rely on loved ones or friends to find time to go to the store for them. In either case, they could be buying their OTC medications from different pharmacies, with

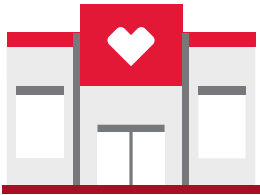
no opportunity for a single pharmacy to maintain an accurate patient profile and review medication safety for that individual.

Reputable sourcing is also important. A recent study found a disturbing number of herbal products to be mislabeled or substituted with alternative plant species and fillers.

Cost is yet another potential obstacle for assisted living residents to access OTC medications. Many are on fixed incomes, with significant health care expenses. Budgeting can be overwhelming or even cause patients to choose against using a medication because of its cost.

There are also questions into how OTC medications safely fit into each customer's overall plan of care. Older adults frequently use five or more medications or supplements, including OTC medications. Some of these medications may not mix well, which presents a risk if prescribers do not have full visibility into everything their patients are taking. For example, if an assisted living resident who is prescribed a blood thinner is also taking aspirin, it could result in excessive bleeding. Approximately one in six older adults may be at risk for such a major drug-drug interaction. Complicated drug regimens because of chronic conditions among the elderly can even lead to contraindicated medical care. Self-dispensing represents another potential problem among residents in assisted living communities, because they may not be able to accurately track or remember what they take each day.

Omnicare advantage



Access to
9,000+
CVS Pharmacy[®] retail
stores

The Omnicare OTC Advantage Program

The Omnicare OTC Advantage Program resolves these difficulties for assisted living residents by combining the convenience of local delivery with the clinical advantages of a pharmacy care plan. Omnicare has used its expertise in geriatric care to ensure that its plan includes many of the OTC products in highest demand by residents in assisted living communities, from laxatives to pain medication, and vitamins to herbal remedies.

Advantages in access and cost

Because some residents are not mobile and cannot go to a drug store to buy OTC medications, the OTC Advantage Program allows them to have the order placed online and delivered to their community with their prescription medications, usually within a day. This convenience means that family members can spend more time with their loved ones instead of shopping for their medications, a clear benefit for both.

Omnicare has access to more than 9,600 CVS Pharmacy retail stores in the United States to ensure reliable availability of all medications.

Medications in the program are also very inexpensive. Each 30-day generic supply of an eligible OTC medication costs just 8.6 cents per single dose. For two doses of the same eligible OTC medication, the cost drops to 5.9 cents per dose. Three doses cost 5.1 cents per dose, and so on. Such a low cost structure adds up to significant affordability compared with standard prices for these medications.

Safety benefits

Omnicare applies the same safety procedures it uses for prescription medications to the OTC medications that assisted living residents use through its OTC Advantage Program. Omnicare pharmacists monitor OTC products alongside prescription medications in a customer's single medication profile. This allows them to identify potential drug interactions between everything that the resident has purchased from Omnicare.



Omnicare pharmacists monitor OTC products alongside prescription medications in a customer's single medication profile

Just as with prescription medications, pharmacists and technicians in Omnicare pharmacies use bar code technology to double-check the packaging of OTC medications for accuracy before they are delivered to assisted living communities. Omnicare delivers

medications in quantities of 30, which prevents large-scale misuse that could be possible with larger quantities sold in a store. Because a package of 30 unit of use doses matches the monthly calendar, residents and caregivers can easily compare the number of doses delivered to the number taken, and ensure the medication schedule is on track. If the numbers don't match, it could lead to a discussion that will improve the quality of life for that resident.

For appointments with health care providers, a community using Omnicare for prescription medications can print out an accurate record of all medications the resident is using, including both prescription and OTC medications. This step facilitates a transition of care which is much more efficient than relying on the resident to recall their medications unaided. An accurate picture of all the medications the resident is using can help the provider to give the best care for that resident.

Omnicare's individual dose packaging also addresses infection concerns. Handling just one dose at a time decreases the chance that putting unused pills back

into a bottle may accidentally introduce hand-borne viruses and bacteria into the bottle, too.

By minimizing risk and maximizing safety, residents can continue aging in place and married couples can stay together, which brings psychological and emotional benefits.

Administrators and operator-owners of assisted living communities also benefit from safety advantages of this Omnicare program. The risk of drug interaction is lower. Negative outcomes such as falls, discharge to a hospital or discharge to a skilled nursing facility also decrease. Resident census remains high, with a positive impact on revenue.

Omnicare as the leader

Omnicare's national footprint and experience in geriatric care position it perfectly to offer an OTC program with benefits for assisted living residents, caregivers, providers and community operators. With thought given to access, affordability and safety, Omnicare is the clear leader in providing OTC medications for assisted living residents.

Sources

1 Nielsen, 2013.

2 BMC Medicine, 2013; [BMCmedicine.biomedcentral.com/articles/10.1186/1741-7015-11-222](https://www.bmcmedicine.com/articles/10.1186/1741-7015-11-222)

3 JAMA Intern Med., April 2016

4 The JAMA Network; [JAMAnetwork.com/journals/jamainternalmedicine/fullarticle/2500064](https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2500064)

5 The JAMA Network; [JAMAnetwork.com/journals/jamainternalmedicine/fullarticle/213908](https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/213908)

6 The JAMA Network, 1919; [JAMAnetwork.com/journals/jama/articleabstract/221014](https://jamanetwork.com/journals/jama/articleabstract/221014)