# Electronic Prescribing

## Program Year 2020

AHCCCS
Arizona Health Care Cost Containment System

# Electronic Prescribing

- Understand the Medicaid PI Program requirements for Objective 2: Electronic Prescribing (eRx)

- Understand the differences in objective 2 between Program Year (PY) 2019 and 2020.

- Learn about the documentation requirements for objective 2.

# Objective 2 – Electronic Prescribing

# Electronic Prescribing  (eRx)

- **Objective:** Generate and transmit permissible prescriptions electronically.

- **Measure:** More than 60 percent of all permissible prescriptions written by the eligible professional (EP) are queried for a drug formulary and transmitted electronically using a Certified Electronic Health Record Technology (CEHRT).

# Electronic Prescribing Definition of Terms

- **Prescription:** The authorization by an EP to a pharmacist to dispense a drug that the pharmacist would not dispense to the patient without such authorization.
  - Authorizations for items such as durable medical equipment, or other items and services that may require EP authorization before the patient could receive them, are not included in the definition of prescriptions. These are excluded from the numerator and the denominator of the measure.
  - Over the counter (OTC) medications are not included in the definition of prescription.
- **Permissible Prescriptions:** "Permissible prescriptions" may include or not include controlled substances based on EP selection where creation of an electronic prescription for the medication is feasible using CEHRT and allowable by state and local law.
- **Exclusion:** CMS allows some exceptions for EPs to omit from reporting on a measure. Exclusions vary depending on the measure. An EP must still submit documentation to support qualifying for the applicable exclusion.

# Electronic Prescribing

- EPs must use CEHRT as the sole means of creating the prescription.
- An EP must use standards adopted for CEHRT when transmitting to an external pharmacy independent of his or her organization.
- The generation and transmission of prescriptions occurs concurrently if the prescriber and dispenser are the same person or are accessing the same record in an integrated EHR to create an order in a system that is electronically transmitted to an internal pharmacy.
- An EP should include electronic transmissions to providers both within and outside his or her organization in the numerator and denominator for the measure of this objective.

# Electronic Prescribing

- Prescriptions transmitted electronically within an organization (the same legal entity) do not need to use the National Council for Prescription Drug Programs standards. However, an EP's EHR must meet all applicable certification criteria and be certified as having the capability of meeting the external transmission requirements of 45 C.F.R. § 170.315(b)(3).

- The EHR that is used to transmit prescriptions within the organization would need to be CEHRT.

- EPs can use intermediary networks that convert information from the CEHRT into a computer-based fax in order to meet this measure as long as the EP generates an electronic prescription and transmits it electronically using the standards of CEHRT to the intermediary network, and this results in the prescription being filled without the need for the EP to communicate the prescription in an alternative manner.

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- EPs may simply use the formulary query function available to them in their CEHRT with no further action required. If a query using their CEHRT is not possible or shows no result, an EP is not required to conduct any further manual or paper-based action in order to complete the query, and he or she may count the prescription in the numerator.

- An EP is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained with CEHRT.

# Electronic Prescribing

- Instances where patients specifically request a paper prescription may not be excluded from the denominator of this measure. The denominator includes all prescriptions written by the EP during the PI (EHR) reporting period.

- As electronically prescribing controlled substances is now possible, EPs may choose to include these prescriptions in their permissible prescriptions where feasible and allowable by state and local law. If an EP chooses to include such prescriptions, he or she must do so uniformly across all patients and across all allowable schedules for the duration of the PI (EHR) reporting period.

  o Arizona recommends including controlled substances when reporting the measure if inclusion would not prohibit the provider from meeting the measure.

# Changes from PY 2019 to 2020

- No changes occurred between PY 2019 and 2020.

# Exclusions

- **Exclusion:**
    - EP is not required to submit data or meet the measure.
    - EP must submit documentation of how he/she met the exclusion.

- **Exclusion for Objective 2 eRx:**
    - Number of permissible prescriptions criteria
    - Pharmacy proximity criteria

# Electronic Prescribing Exclusions

- An EP may take an exclusion if any of the following apply:
  - Writes fewer than 100 permissible prescriptions during the PI (EHR) reporting period.
  - Does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her PI (EHR) reporting period.
    - EPs who are part of an organization that owns or operates its own pharmacy within the 10-mile radius are not eligible for the exclusion regardless of whether that pharmacy can accept electronic prescriptions from EPs outside of the organization.
- EPs practicing at multiple locations are eligible for the exclusion if any of their practice locations that are equipped with CEHRT meet the exclusion criteria.

# Exclusion Documentation for Electronic Prescribing

- Writes fewer than 100 permissible prescriptions.
    - The CEHRT dashboard shows that the EP wrote fewer than 100 permissible prescriptions during the PI (EHR) reporting period; **or**
    - Provide supporting documentation, other than the CEHRT dashboard, that demonstrates the EP has fewer than 100 permissible prescriptions.
- No pharmacy within organization or within 10 miles of EP practice
    - Documentation showing the closest pharmacies to the practice at the start PI (EHR) reporting period.
    - Demonstrate how you determined no pharmacy is within 10 miles of the practice.

# Documentation for Electronic Prescribing

- A CEHRT-generated dashboard* for the selected PI (EHR) reporting period that shows the following:
  - Provider's Name;
  - Numerator;
  - Denominator; and
  - Measure Percentage.

*In certain situations, a non-CEHRT generated report may be necessary. The use of non-CEHRT generated reports may be permitted upon AHCCCS review and approval.

# Audit Findings

# What Happens During an Audit?

- All providers that receive a Medicaid PI incentive payment could potentially be selected by AHCCCS for post-payment audit.

- If selected, AHCCCS post-payment analysts will conduct a thorough review of the documentation attached to the EP's attestation in ePIP to determine if it meets the program requirements.

- AHCCCS may have follow-up questions or make additional documentation requests.

# Common Audit Findings

- Failure to provide sufficient documentation for eRx, CDS, and CPOE objectives.
- The CEHRT dashboard does not show the PI (EHR) reporting period or EP name.
- Failure to maintain proper documentation and practice no longer has access to the CEHRT.
- Supporting documentation does not have the appropriate dates.
- Including data for the entire practice in the reported CEHRT report rather than data for the individual EP.

# Resources

- [CMS Objective 2 Tip Sheet](#)

- [Federal Final Rule - Modified Stage 2 and Stage 3](#)

- [AHCCCS Program Year 2020 – Electronic Prescriptions FAQ](#)*

- [Documentation Retention Webinar](#)**

*To access the AHCCCS Program Year 2020 – eRx FAQ, click on the link above, then click the drop down arrow labeled "Educational Resources".
**An updated Documentation Retention webinar for PY 2020 is planned for November 5, 2020.

# Contact Information

| Agency | Help With | Email | Phone |
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| AHCCCS | PI Program | EHRIncentivePayments@azahcccs.gov | (602) 417-4333 |
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# Questions?

# Thank You.