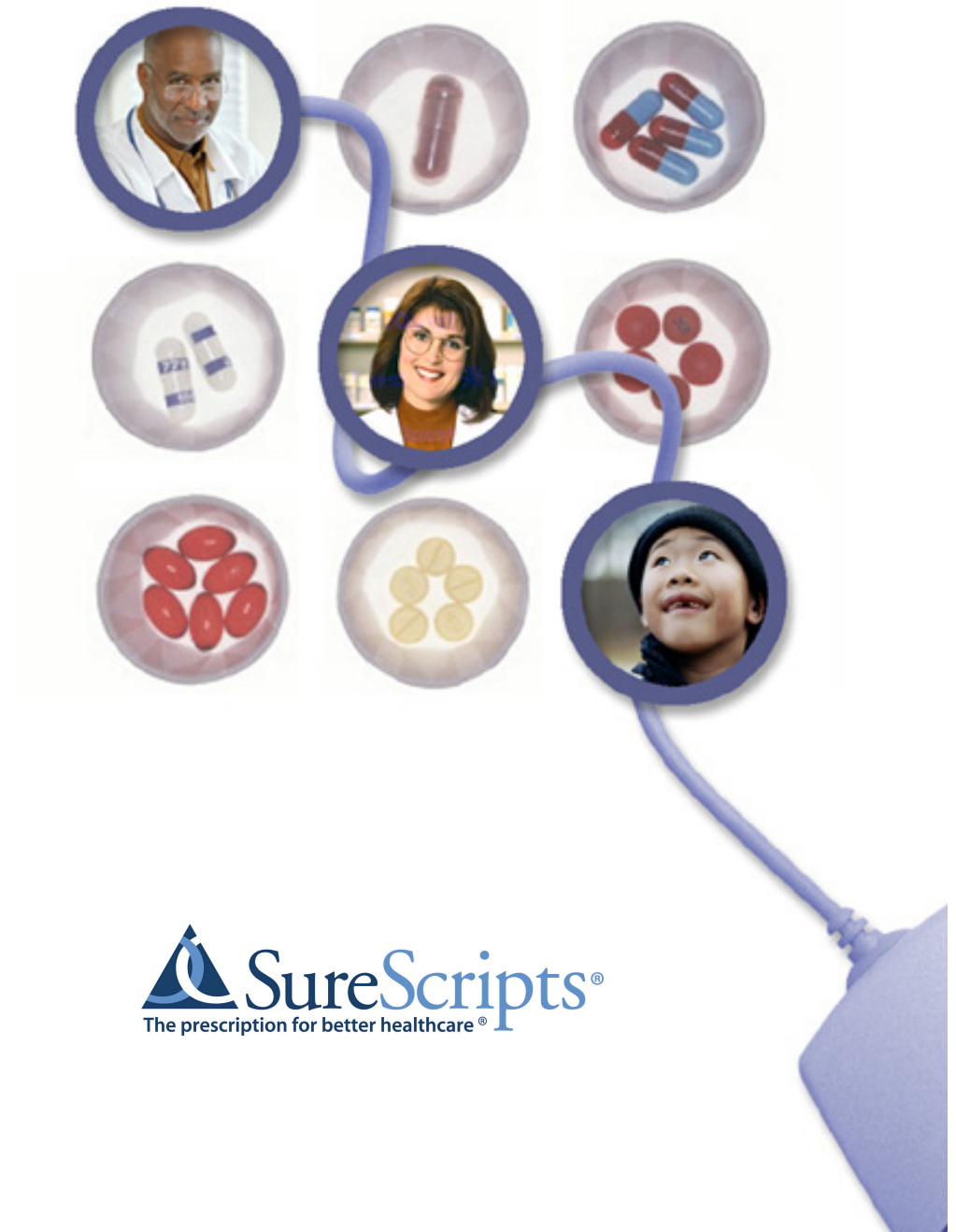

Health IT: Provider's Issues

*Presented by Paul Uhrig
SureScripts*

*2008 FTC
Public Workshop
April 24, 2008*



 **SureScripts®**
The prescription for better healthcare®

SureScripts Mission: Improve the prescribing process.

- ◆ Industry owned LLC formed by the pharmacy associations representing nation's 57,000 pharmacies
 - Incorporated August 2001
 - Pharmacy membership organization
 - Two sources of operating capital
 - Fees from pharmacy transactions
 - Membership
 - No charge to physicians or their software vendors
 - Neutral entity
 - No advertising or commercial influence
 - Protect patient choice of pharmacy
 - Protect physician choice of therapy
- ◆ Driven by single mission:
 - Improve the prescribing process through a focus on Safety, Efficiency and Quality



**National
COMMUNITY
PHARMACISTS
Association**



Over 95% of the nation's pharmacies have completed the certification process required to connect to the Pharmacy Health Information Exchange™, operated by SureScripts

SureScripts enables the exchange of prescription information by certifying software used by pharmacies and physicians



What the Physician Needs:

1. Electronic Prescribing Software that has been certified by *SureScripts*
2. A high-speed Internet connection

SureScripts provides the behind-the-scenes network that makes the two-way electronic exchange of prescription information possible

What the Pharmacy Needs:

1. Pharmacy management software that has been certified by *SureScripts*
2. An Internet or Intranet connection

E-Prescribing 101: How it works



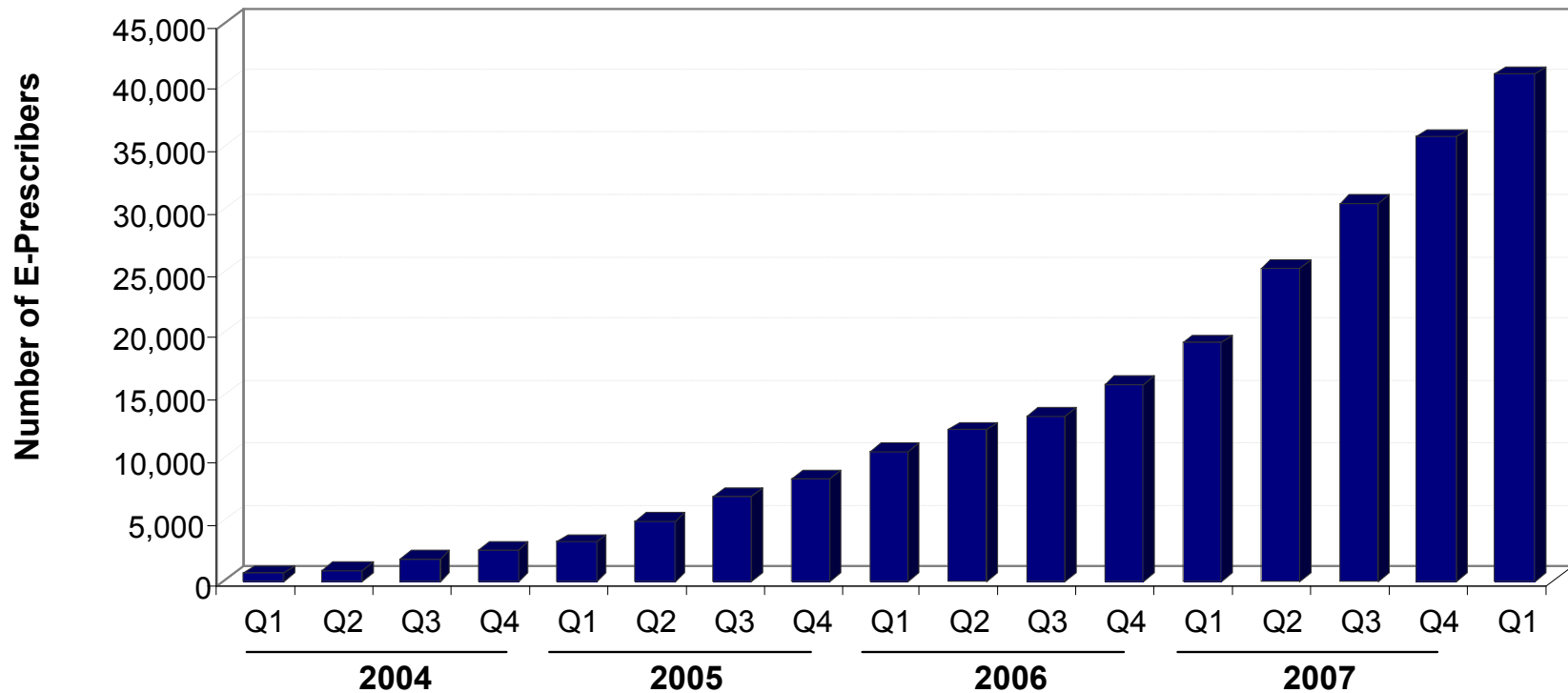
E-Prescribing 101: How it works

◆ **No faxing... No paper... This is... E-Prescribing.**



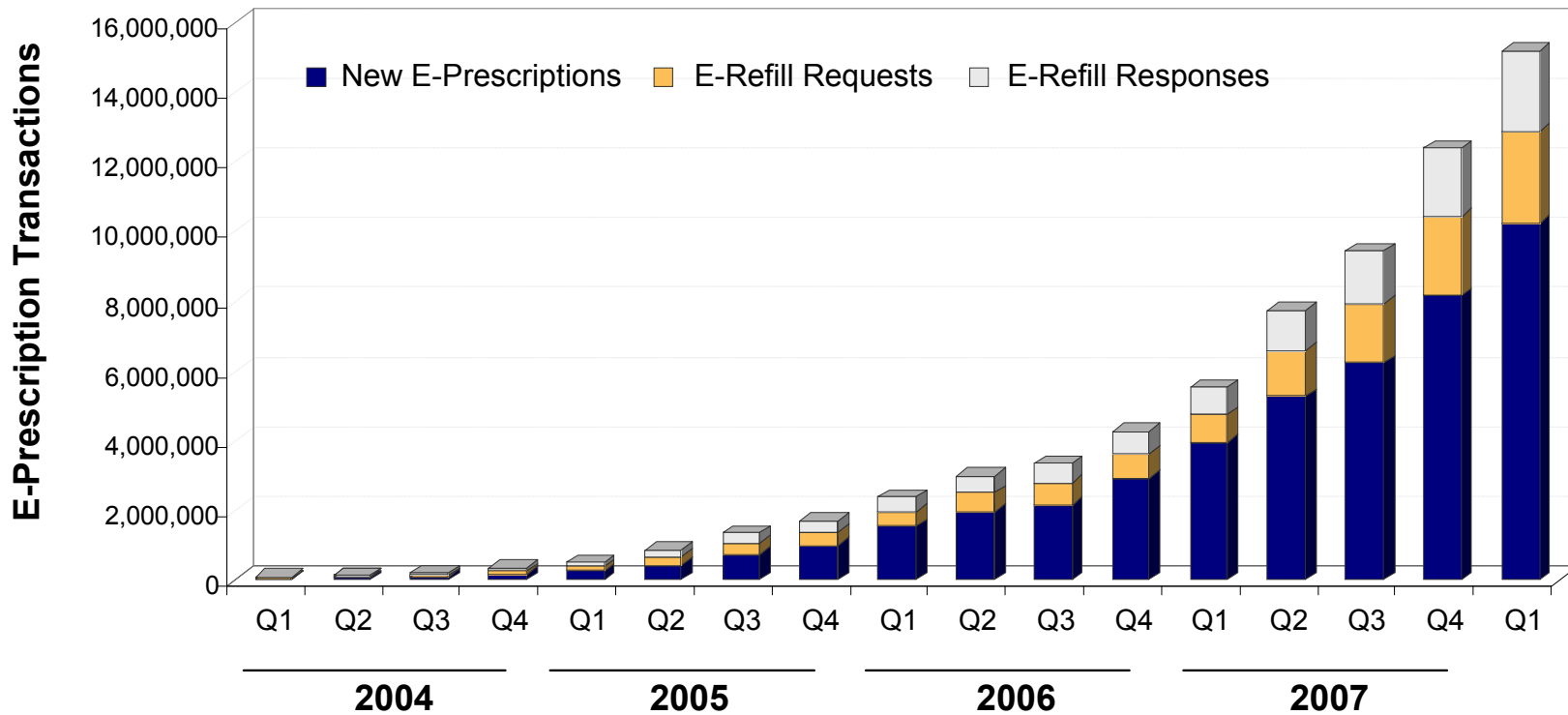
◆ **E-Prescribing using a nationwide network that is... Neutral... Standards-based... made available to physicians and physician vendors at no charge.**

E-Prescribers: Quarterly Growth



Source: Pharmacy Health Information Exchange, operated by SureScripts

E-Prescription Transactions: Quarterly Growth



Source: Pharmacy Health Information Exchange, operated by SureScripts

The biggest factors influencing e-prescribing adoption in 2007

- ◆ Regionally based adoption programs sponsored by payors, health systems, large clinics and state departments of health
- ◆ Executive orders from state and federal officials to eliminate paper prescriptions
- ◆ Physician technology vendor efforts to convert existing user base from faxing to e-prescribing and improve the workflow of their software

Three recommended actions that would have the greatest impact on e-prescribing adoption and utilization moving forward

- ◆ DEA allowing e-prescribing of controlled substances
- ◆ Passage of the Kerry E-MEDS bill, featuring positive and negative incentives to physicians for investing in and using e-prescribing technology
- ◆ Health plans focusing on adoption programs and utilization-based incentives on prescribers who generate the vast majority of prescriptions in the U.S.

Top Myths About E-Prescribing

Myth # 1

E-prescribing is expensive.

- ◆ The cost of acquiring a standalone e-prescribing system ranges from:
\$0 to \$200/month.
- ◆ While an investment in an electronic medical record system offers many benefits to a physician practice, including the potential to e-prescribe, there are many standalone e-prescribing solutions that inexpensively allow a physician to send and receive prescription information to and from your local pharmacies electronically.
- ◆ E-prescribing-only solutions can be a first step towards an EMR system.
- ◆ For a list of state and national initiatives offering free or discounted access to e-prescribing technology, go to www.GetRxConnected.com.

Top Myths About E-Prescribing

Myth # 2

E-prescribing violates HIPAA or state privacy laws.

- ◆ E-prescribing complies with both federal and state privacy laws.
- ◆ E-prescribing is used by a patient's physician and pharmacist for the purpose of providing care, consistent with the HIPAA standards that govern the sharing of health information for clinical care purposes.
- ◆ Patients are aware that their doctor is sending their prescription to the pharmacy electronically, and if the patient does not want his/her prescription sent electronically, he/she directs their physician to print or handwrite the prescription.

Top Myths About E-Prescribing

Myth # 3

E-prescribing is less secure than paper prescribing.

- ◆ Pharmacies and the e-prescribing systems certified to connect to pharmacies use, at a minimum, dedicated leased lines, VPN, and/or SSL to conduct e-prescribing in a secure and private manner. All of these technologies are fully compliant with HIPAA security requirements.
- ◆ E-prescriptions are computer-generated prescriptions created by your doctor and sent directly to your pharmacy.
 - E-prescriptions travel from your doctor's computer to the pharmacy's computer.
 - Prescription information is not sent over the open Internet and is not sent as an e-mail.
 - E-prescriptions are sent electronically through a private, secure, and closed network – the Pharmacy Health Information Exchange.

Top Myths About E-Prescribing

Myth # 4

Lack of uniform standards remain a barrier to widespread adoption of e-prescribing adoption and laws do not allow for e-prescribing.

- ◆ The SCRIPT standard, developed by National Council for Prescription Drug Programs (NCPDP), has been the standard used to facilitate e-prescribing since 1997.
- ◆ In November 2005, the Centers for Medicare and Medicaid Services (CMS) adopted the SCRIPT standard for new prescriptions and refill requests to be used by participants in the Medicare Part D program when they prescribe electronically.
- ◆ In April 2008, CMS adopted the SCRIPT standard for electronically sharing medication history along with formulary and benefit information.
- ◆ In August 2007, Alaska becomes the 50th and final state to pass changes to its laws and/or regulations to allow for electronic prescribing. The SCRIPT standard is now used by pharmacists and physicians in all 50 states and Washington, D.C. to facilitate e-prescribing.

Top Myths About E-Prescribing

Myth # 5

E-prescribing facilitates data mining of prescription data.

- ◆ E-prescribing involves no communication, sharing, sale, or transfer of pharmacy prescription data, even in de-identified form, with data mining firms, pharmaceutical companies, employers, or other entities not involved in the delivery of medical care to the patient. E-prescribing does not facilitate the practice of data mining.
- ◆ Every state in the country authorizes and permits electronic prescribing. While some states have introduced legislation that limits data mining, e-prescribing is not mentioned in the proposed or passed legislation and such proposed data mining legislation does not affect e-prescribing.

Top Myths About E-Prescribing

- ◆ **Myth # 6**
E-Prescribing lacks the support of consumer and patient advocacy groups.
- ◆ The following organizations have issued statements in support of e-prescribing:
 - AARP
 - AFL-CIO
 - American Federation of State, County, and Municipal Employees
 - Center for Medical Consumers
 - Childbirth Connection
 - Consumers Union
 - Health Care For All
 - National Consumers League
 - National Family Caregivers Association
 - National Partnership for Women & Families
 - SEIU

Thank You!

