



Fight Opioid Abuse through e-Prescribing of Controlled Substances Webinar Release Date – July 19, 2016

Ken Whittemore, Jr, RPh, MBA James L. Holly, MD, CEO

Himss transforming health through IT

About NCPDP

Founded in 1977, NCPDP is a not-for-profit, ANSI-accredited, Standards Development Organization with over 1,600 members representing virtually every sector of the pharmacy services industry.

NCPDP members have created standards such as the Telecommunication Standard and Batch Standard, the SCRIPT Standard for e-Prescribing, the Manufacturers Rebate Standard and more to improve communication within the pharmacy industry.

Our data products include dataQ®, a robust database of information on more than 76,000 pharmacies, and HCIdea®, a database of continually updated information on more than 2.3 million prescribers. NCPDP's RxReconn® is a legislative tracking product for real-time monitoring of pharmacy-related state and national legislative and regulatory activity. <u>www.ncpdp.org</u>







About Surescripts

Formed in 2001, Surescripts has evolved into the nation's most comprehensive clinical network. Surescripts connects pharmacies, payers, pharmacy benefit managers, physicians, hospitals, integrated delivery networks, health information exchanges and health technology firms to enable the efficient and secure exchange of health information. More than 500,000 prescribers, 600 EHR applications and 94% of community pharmacists are active on the Surescripts network.

Guided by the principles of neutrality, transparency, physician and patient choice, open standards, collaboration and privacy, Surescripts provides information for routine, recurring and emergency care. Together with our network participants, Surescripts is committed to saving lives, improving efficiency and reducing the cost of health care for all. For more information, go to <u>www.surescripts.com</u> and follow us at <u>twitter.com/surescripts</u>.







About HIMSS

HIMSS North America, a business unit within HIMSS, positively transforms health and healthcare through the best use of information technology in the United States and Canada. As a cause-based non-profit, HIMSS North America provides thought leadership, community building, professional development, public policy, and events. HIMSS North America represents 61,000 individual members, 640 corporate members, and over 450 non-profit organizations.

Thousands of volunteers work with HIMSS to improve the quality, cost-effectiveness, access, and value of healthcare through IT. Major initiatives within HIMSS North America include the HIMSS Annual Conference & Exhibition, National Health IT Week, HIMSS Innovation Center, HIMSS Interoperability Showcases[™], HIMSS Health IT Value Suite, and ConCert by HIMSS[™].

HIMSS Vision: Better health through information technology.

www.himss.org







Ken Whittemore, JR., RPh, MBA Senior VP, Professional & Regulatory Affairs, Surescripts LLC



Ken works with federal and state laws and regulations pertaining to health information technology and serves as liaison to pharmacy boards and associations. Formerly, Ken worked at the National Community Pharmacists Association and also co-owned a successful independent pharmacy. Ken is a graduate of the University of Maryland School of Pharmacy, is licensed to practice pharmacy in Maryland, and holds an MBA degree from Mount Saint Mary's University.

Ken Whittemore has no conflicts of interest to disclose.







James L. Holly, MD CEO, Southeast Texas Medical Associates



James L. Holly, MD, is Founder and Chief executive officer of Southeast Texas Medical Associates (SETMA) which has grown from four physicians to forty-seven healthcare providers in a multi-specialty practice. SETMA is a fully integrated medical practice with electronic medical record deployed in seven clinics, three hospitals and twenty-four nursing homes. He is a graduate of the School of Medicine at the University of Texas Health Science Center in San Antonio where he is an Adjunct Professor of Family and Community Medicine He is also an Associate Clinical Professor in the Department of Internal Medicine at Texas A&M College of Medicine.

James L. Holly, MD has no has no conflicts of interest to disclose.









Accreditation Statement

- The Institute for Wellness and Education, Inc., is accredited by the Accreditation Council for Pharmacy Education (ACPE) as a provider of continuing pharmacy education. Participants of the session who complete the evaluation and provide accurate NABP e-Profile information will have their credit for 1.0 contact hours (0.10 CEU) submitted to CPE Monitor within 60 days of the event. Please know that if accurate e-Profile information is not provided within 60 days of the event, credit cannot be claimed after that time.
- ACPE program numbers are: 0459-0000-16-003-H03-P & 0459-0000-16-003-H03-T
- Initial release date is 07/19/2016.







Learning Objectives

- Discuss the workflow benefits of e-Prescribing of Controlled Substances (EPCS).
- Describe an overview of the legal status and current adoption of EPCS.
- Explain the required steps to get started with EPCS.
- Discuss the role pharmacists play in educating their local prescribers about EPCS.







Pre-test Questions

- 1. How is electronic prescribing of controlled substances (EPCS) beneficial?
- 2. Regulations supporting EPCS are approved in how many states?
- 3. What is a key barrier to EPCS utilization?







About Controlled Substance Prescriptions

An important therapeutic option for many patients

13% of total prescriptions are controlled substances*

- Potential exists for addiction and abuse
- States have varying regulatory requirements



Challenges with paper Rx for controlled substances

- Fraudulent prescription pad forgery is a concern
- Many states require **special prescription pads** and record keeping
- **Dual work** is required when paper Rx pads are used for controlled substances in practices that e-prescribe

*Per National Association of Chain Drug Stores (NACDS) 2014 data

transforming health through IT





Electronic Prescribing of Controlled Substances (EPCS)

One efficient workflow for all prescriptions

- Reduced fraud and abuse
- Secure electronic records
- Improved safety and patient care

Potential Annualized Cost Savings of \$700 Million

- Reduced pharmacy/prescriber phone callbacks
- Reduced need to store paper prescriptions

Economic Impact Analysis of the Interim Final Electronic Prescription Rule DEA, U.S. Department of Justice, March 2010







One Efficient Workflow for All Prescriptions

Workflow Benefits for Pharmacies

- Eliminates need for paper records saving time, cost, and space
- Provides fully electronic audit trail

Workflow Benefits for Prescribers

- Eliminates the need for secure printing and special pads
- Provides fully electronic audit trail







Screenshot of EMR Used at SETMA

ePCS Audit Report by Provider View Report For Previous 30 Days 23 Prescriptions written for 17 distinct patients				Return			
Туре	Date	Provider Last	Provider First	Patient Last	Patient First	Medication	Qty
New eRx Message Created	01/26/2016	Holly	James			alprazolam 0.25 mg tablet	30
New eRx Message Created	01/22/2016	Holly	James		-	hydrocodone 7.5 mg-ibuprofen 200 mg tablet	90
New eRx Message Created	01/21/2016	Holly	James			fentanyl 75 mcg/hr transdermal patch	12
New eRx Message Created	01/21/2016	Holly	James			fentanyl 50 mcg/hr transdermal patch	12
New eRx Message Created	01/20/2016	Holly	James			fentanyl 100 mcg/hr transdermal patch	10
New eRx Message Created	01/18/2016	Holly	James			Norco 5 mg-325 mg tablet	60
New eRx Message Created	01/18/2016	Holly	James			Provigil 200 mg tablet	30
New eRx Message Created	01/18/2016	Holly	James			fentanyl 75 mcg/hr transdermal patch	10
New eRx Message Created	01/13/2016	Holly	James			fentanyl 37.5 mcg/hour transdermal	10
New eRx Message Created	01/13/2016	Holly	James			clonazepam 1 mg tablet	30
New eRx Message Created	01/13/2016	Holly	James			fentanyl 37.5 mcg/hour transdermal patch	10
New eRy Message Created	01/07/2016	Holly	lames			fentanyl 50 mco/br transdermal natch	10







EPCS Security

- Only certified and audited application vendors and pharmacies may communicate EPCS transactions
 - Participants must have completed certification to the network
 - Participants must have a third-party EPCS audit documented
- Network checks that prescriber and pharmacy software have certified, audit approved EPCS service enabled for transactions









Many Doctors and Pharmacists are Still Not Aware EPCS is Legal

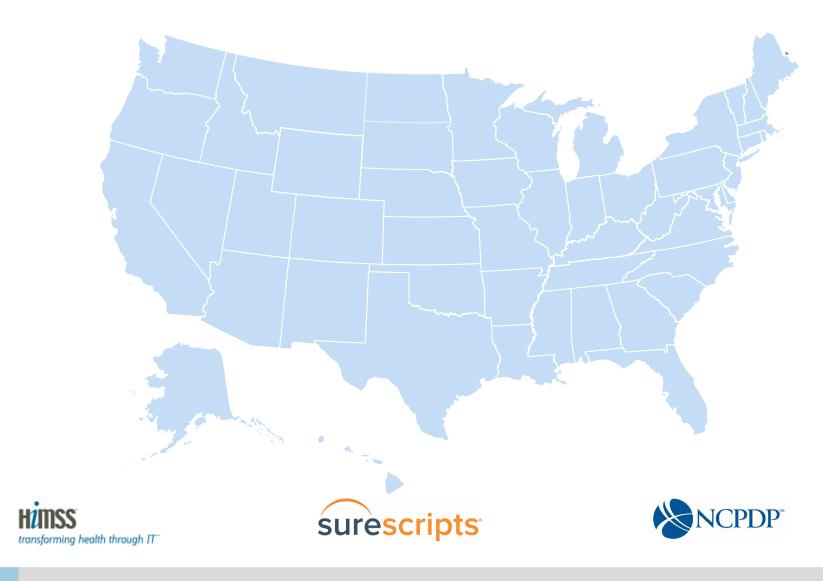








<u>All</u> 50 states plus the District of Columbia have approved EPCS for <u>all</u> schedules

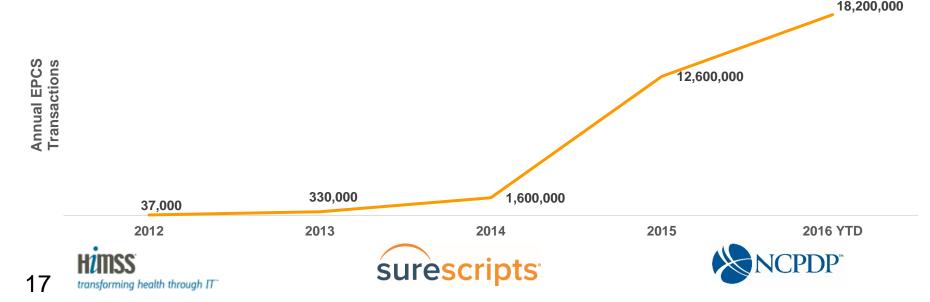


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Software Readiness and Adoption Trends

- Pharmacy and prescriber software are available
 - 64 pharmacies and pharmacy vendors are certified
 - 100+ prescriber vendors are certified

12.6 Million EPCS transactions were sent across the Surescripts network in 2015. Over **<u>18.2 Million</u>** have already been sent through June 2016.



Status of EPCS Adoption – June 2016¹

Pharmacy Adoption

- Nationally 96% of all pharmacies received an e-prescription in the last 30 days
- Nationally 86% of all pharmacies received an EPCS in the last 30 days
- 96% EPCS adoption in New York, 90% EPCS adoption in Texas

Prescriber Adoption

- Nationally 61% of all prescribers sent an e-prescription in the last 30 days
- Nationally 11% of all prescribers are enabled² to send EPCS
- 68% EPCS adoption in New York, 9% EPCS adoption in Texas
- 1. Please note that adoption stats for all states are available on the More Details page of getEPCS.com.
- 2. "Enabled" means a prescriber has software that is capable of sending EPCS, but practice level setup may not be complete.







Deeper Look Into New York I-STOP

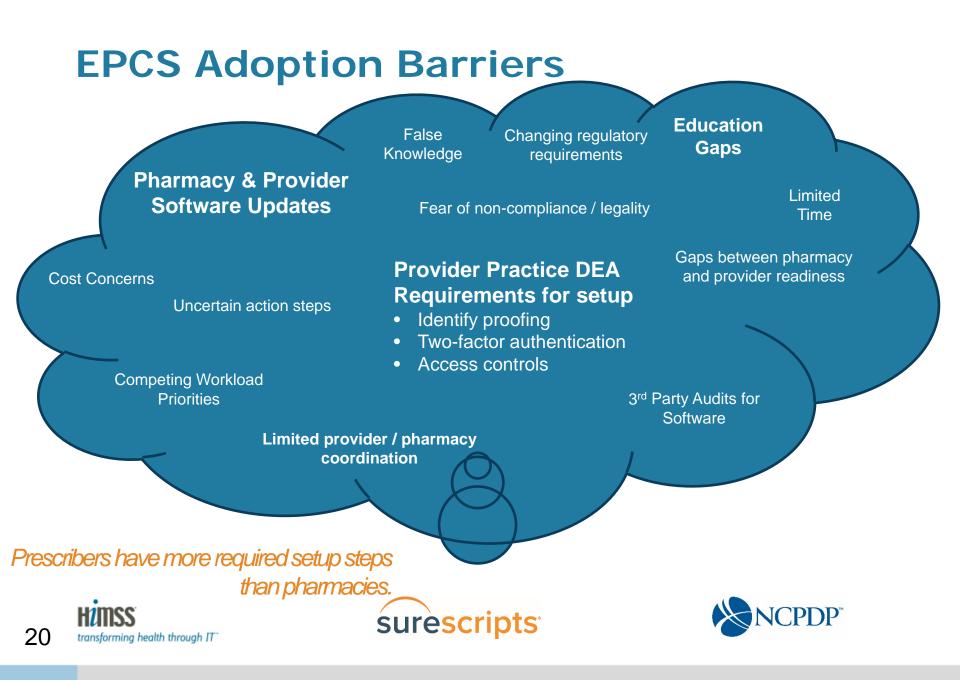
I-STOP has been a tremendous success that can potentially spill over to the rest of the nation.

- I-STOP drove the EPCS certification of over 100 EHRs and counting
- New York ranks first in the nation for:
 - Active e-prescribers with 85% (national average is 61%)
 - EPCS enabled prescribers with 68% (North Dakota is 2nd with 23%)
 - E-Prescribing volume representing 12% of US total
 - EPCS volume representing 45% of US total









Surescripts Network Enables Pharmacy and Prescriber Software Applications for EPCS

- Provides standards for EPCS implementation
- Certifies software applications for secure EPCS transactions
- Connects pharmacy and prescriber software through a trusted national health information network

Prior to certification, pharmacy system and physician EHR software companies must take additional security and technology steps to comply with the Drug Enforcement Administration's Interim Final Rule (IFR) and state board of pharmacy regulations.







EPCS Readiness Steps for Pharmacies

- 1. Upgrade their software systems
 - Ensure DEA and NCPDP SCRIPT adherence for EPCS
- 2. Achieve network certification
- 3. Undergo third-party audit to ensure compliance
 - Pharmacy software applications meet DEA requirements for recording, receiving and storing EPCSs
- 4. Make the audit results available to network
 - Provide Proof of Audit
 - Complete and submit network EPCS Audit Attestation Form
- ✓ Ready to GO LIVE with EPCS











EPCS Readiness Steps for Prescribers

Before prescribers can "go live" with EPCS, they must:

1. Ensure their EHR is upgraded, certified, audited and enabled for EPCS



- 2. Work with their software vendor to achieve required ID proofing
- 3. Secure their Two-Factor Authentication (TFA) credential
- 4. Use TFA to set system access controls
- ✓ Ready to GO LIVE with EPCS

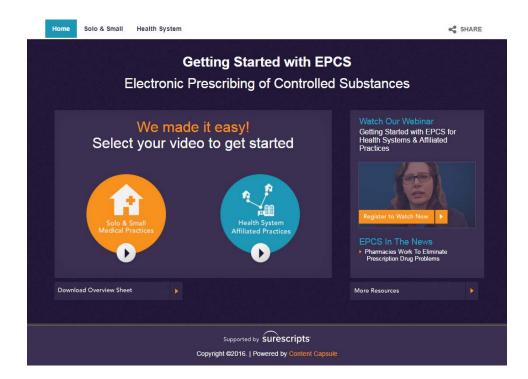
*This does not constitute legal advice. Prescribers should consult an attorney to ensure that EPCS is permitted in their state.







getEPCS.com Offers Education and Guidance Designed for You to Share



- Embed video to play on your website
- Post on LinkedIn
- Email to colleagues







getEPCS.com Covers the Steps Needed for Both Small and Health System Affiliated Practices

Electronic P	rescribing of Contro	lled Substances	
Watch the Full Video (5 min) Getting started with Electron of Cont For Set 6 For Se	Video Chapters Making It Easy EHR Software Update ID Proofing Two-Factor Authentication Setting Software Access	 Regulatory Requirements DEA Answers to Questions on Electro Prescription Applications DEA Interim Final Rule - EPCS Quest and Answers New York State EPCS Requirements EHR Setup, ID Proofing, & Authentication DEA Q & A: Individual Solo & Small Practitioners Tips for Providers Starting E-Prescribi of Controlled Substances Guidelines: ID Proofing, Authentication Credentials, and Logical Access Com 	ng n
Download Overview Sheet		More Resources	

• Video Chapters

Broken into short chapters for quick reference

• EHR Status

Learn EPCS status of an EHR with a few clicks

Overview Sheet

Downloadable reference document

More Resources

Library of additional EPCS information







getEPCS.com Walks Prescribers Through the Four Key Areas of Getting Started That Are Relevant to Them



1.EHR Software Update

2.ID Proofing

3. Two-Factor Authentication

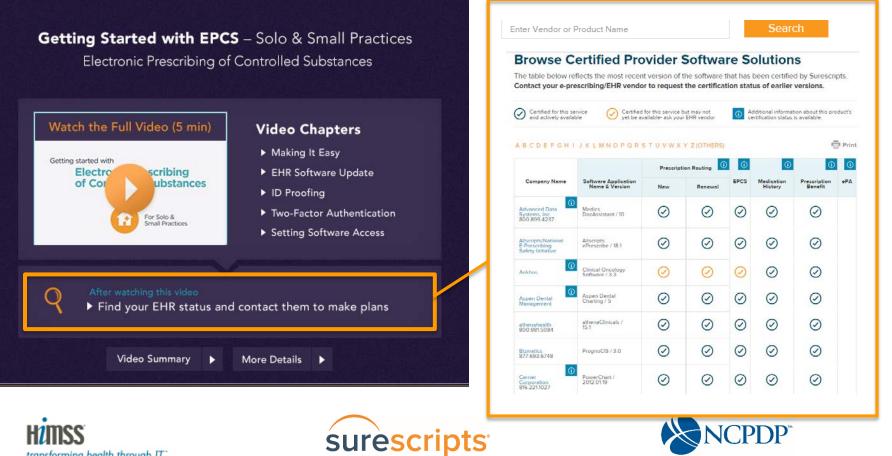
4. Setting Software Access







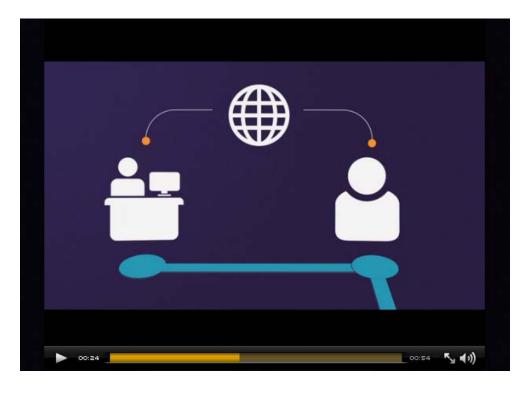
1. EHR Software Update: Prescribers Can Look Up the EPCS Status of Their EHR Software







2. ID Proofing



- ID proofing can be done inperson or online, through companies that work with your EHR
- For online ID proofing, you may need to answer a security question and email scanned copies of government-issued documents along with your photo and your medical license
- Sometimes an electric bill or bank statement is also needed to confirm your address







3. Two-Factor Authentication

17+	CONTROLLED SUBSTANCES	
	o5:23 🔊 📢	

- This double-level process ensures that only you can sign and send the controlled substance prescription to the pharmacy
- There are various options: mobile phones, smart cards, fob tokens, USB thumb drives, and biometrics like fingerprint scanners
- Once you're set up, two-factor authentication requires hardly any extra effort







Screenshot of EMR Used at SETMA

Factor 1 User specific password

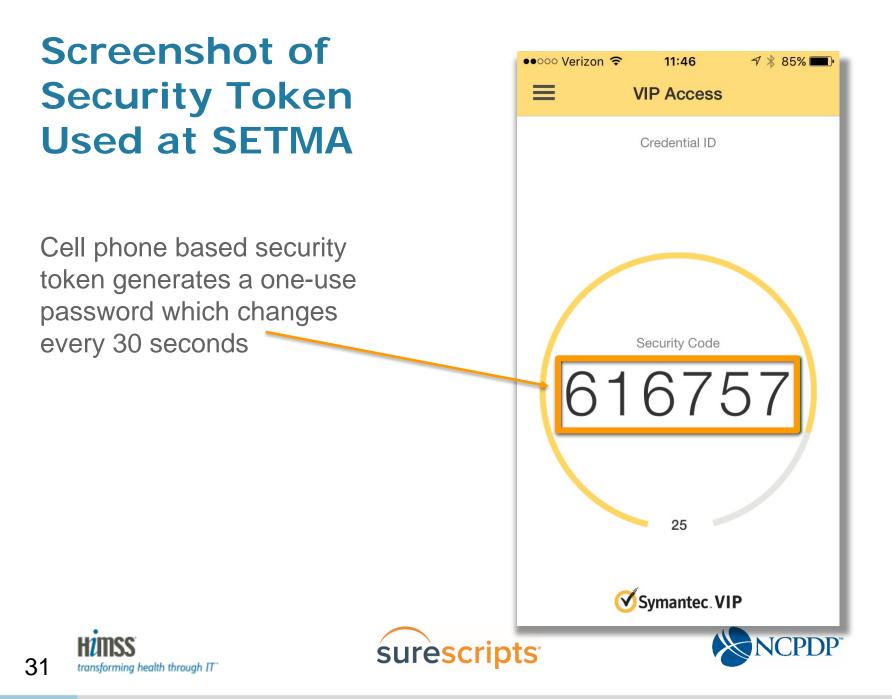
Factor 2 Security token password -

Patient Info	and the second se	- Prescriber In	formation.					
00.00	ame: Chart QTest		: James L Holly, MD					
	nder: Male	Address	s 3570 College Suite 200					
	Birth: 1/1/1932		Beaumont, TX 777014679					
Date of Issua	ince: 8/19/2015		(409) 833-9797					
		DEA Number.	AH2524355					
Medications								
Select	Medication	Sig		Quantity	Refills	Start Date	Comments	C
V	hydrocodone 10 mo-acetaminophen 30	00 mg tablet take 1	tablet by oral route every 8 hours as needed	30 Tablet	0	8/19/2015		N
•		III						
Destination			Alerts					
	-	100 100						
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4. Setting Software Access



- For this final step, you'll need two separate people to set secure access controls for your EHR e-prescribing software
- One person needs to be a DEA registrant who has been IDproofed and has their two-factor authentication method in place—this could be you
- The other is a person who can confirm your identity, such as an office manager or another member of your practice—but they do not need to be an employee of your practice







E-Prescribing Enhances Teamwork

- Collaboration between healthcare providers (Physicians, Nurse Practitioners, Physician Assistants and Pharmacists) never more real than now.
- Patient safety and quality of care requires careful transitions of care between all members of the healthcare team.
- Gone are the days when pharmacists had to interpret prescription orders.
- Now pharmacies receive prescriptions electronically and providers receive notifications that the prescription has been received by the pharmacist.







Help Drive EPCS Adoption

- Spread the word that EPCS is legal in all 50 states + DC
- Bookmark getEPCS.com after this webinar
- Share getEPCS.com with your local prescribers and colleagues
 - Email them the link
 - Fax them the video summary
 - Embed it in your website
- Ask your current e-prescribers who are still sending paper prescriptions for controlled substances if they know about EPCS







Educational Resources for Download

- This presentation for reference
- getEPCS.com Overview Sheet 4 Steps to Get Started with EPCS
- getEPCS.com FAQ with instructions for embedding in your website







Post-test Questions

- 1. How much of the CDC reported drug overdose deaths were related to dispensed prescriptions?
 - a) 5%
 - b) 10%
 - c) 35%
 - d) More than 50%







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- 2. How many states have legislation in support of EPCS?
 - a) 5
 - b) 10 plus the District of Columbia
 - c) 46
 - d) 50 plus the District of Columbia







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 - a) 5
 - b) 10 plus the District of Columbia
 - c) 46

d) 50 plus the District of Columbia







- 3. Nationally, what percent of prescribers have EHR systems enabled for EPCS?
 - a) 4%
 - b) 8%
 - c) 11%
 - d) 68%







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 - a) 4%
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 - **c) 11%**
 - d) 68%







- 4. What actions must be completed before a prescriber's EHR system is set-up to legally send electronic prescriptions for controlled substances?
 - a) Electronic health records (EHR) software update and certification for EPCS
 - b) Establish identity proofing and signing credentials with two-factor authentication
 - c) Set-up access control to ensure system security
 - d) All of the above







- 4. What actions must be completed before a prescriber's EHR system is set-up to legally send electronic prescriptions for controlled substances?
 - a) Electronic health records (EHR) software update and certification for EPCS
 - b) Establish identity proofing and signing credentials with two-factor authentication
 - c) Set-up access control to ensure system security
 - d) All of the above







- 5. How can you determine who in your local community are enabled for EPCS and help provide guidance for getting EPCS established with medical practices?
 - a) Call or email local doctors
 - b) Share educational support found on <u>www.getEPCS.com</u>
 - c) Post educational information on your website
 - d) All of the above







- 5. How can you determine who in your local community are enabled for EPCS and help provide guidance for getting EPCS established with medical practices?
 - a) Call or email local doctors
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 - c) Post educational information on your website
 - d) All of the above







Questions?







Save the Date

Electronic Prior Authorization: Helping Patients Get the Medications They Need Faster

August 11, 2016 | 12:00pm - 1:00pm EDT

Part 2 in the complimentary NCPDP/HIMSS Webinar Series will focus on the burden of manual prior authorizations on prescribers, pharmacists, and patients. It will include an overview of the benefits and workflow for electronic prior authorization and a testimonial to benefits to prescribers and pharmacy.

ePrescribing Quality: Current Progress and the Path Ahead

August 23, 2016 | 12:00pm - 1:00pm EDT

Part 3 in the complimentary NCPDP/HIMSS Webinar Series will discuss history and current status of ePrescribing, physician perspective on progress made and current state of ePrescribing, areas for improvement, and advancements in ePrescribing.

You can register at http://www.himss.org/pharmacy-town-halls







Save the Date

HIMSS17

HIMSS's annual conference and exhibition will be held February 19-23, 2017. We hope to see you in Orlando. For more information on HIMSS17, please visit <u>www.himssconference.org</u>.

NCPDP17

NCPDC's annual technology & business conference will be held May 8-20 in Scottsdale, AZ. For more information, please visit <u>www.ncpdp.org</u>.





