



CLIENT ADVISORY

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Final Standards for e-Prescription Program

On November 16, 2007, the Centers for Medicare & Medicaid Services published a rule proposing final uniform standards for an electronic prescription program and the adoption of a standard identifier for providers and dispensers for use in e-prescribing transactions. The following is a list of standards tested by CMS and the test conclusions:

Formulary and Benefit Information. This standard tested the benefits to a patient if a prescriber could obtain information on the patient's benefits from the benefit plan, including the formulary status of drugs that the prescriber is considering prescribing. The National Council For Prescription Drug Programs (NCPDP) Formulary and Benefits Standard 1.0 was found to work well. Once the standard identified the individual, the appropriate drug benefit coverage was located and transmitted to the prescriber, which assisted the prescriber in making the most appropriate drug choice without extensive back and forth administrative activities.

Exchange of Medication History. This standard allows prescribers, dispensers, and payers to communicate regarding prescriptions or claims for a patient within a certain timeframe. The proposed standard for Medication History was tested as a transaction in the NCPDP SCRIPT 8.1 and was found to be supportive in the exchange of information, would not impose an undue burden on prescribers and dispensers and was ready to be used as part of the Medicare Part D e-prescribing program.

Structured and Codified SIG. This standard governs the instructions found at the end of the prescription. The pilot test concluded that these instructions, known as the "SIG", need additional clarification and standardization, especially in the areas of field definitions and examples and field naming and clarification of field use, to reduce medication errors, decrease healthcare costs and improve patient safety.

Fill Status Notification Function. This standard enables a pharmacy to notify a prescriber when the prescription has been dispensed, partially dispensed, picked up or not dispensed or picked up. The pilot test concluded that there is no marketplace demand for this information.

Clinical Drug Terminology. This standard provides standard names for clinical drugs and for dose forms as administered to a patient (RxNorm). The test determined that RxNorm has potential to simplify e-prescribing, create efficiencies, and reduce dependence on National Drug Codes among dispensers. However, it was not sufficiently developed for effective and accurate use for Medicare Part D e-prescribing.

Prior Authorization Messages. This standard facilitates identification of what drug benefit coverage is provided by the patient's drug benefit plan, assisting the prescriber in choosing drugs covered by the plan and potentially lowering costs for plans and patients. The test concluded that modifications would need to be made prior to adoption as a final standard for Medicare Part D e-prescribing.

In addition, CMS is proposing to adopt the National Provider Identifier (NPI) as a standard for use in e-prescribing transactions. Uniform identifiers are necessary to conduct e-prescribing and CMS believes that there is adequate industry experience with the NPI, as a uniform identifier, to support its use in e-prescribing.

For more information please contact Popovits & Robinson at 708/479-3230.

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