

Electronic Prescribing in the Long Term Care Environment

National Committee on Vital and
Health Statistics

Subcommittee on Standards and
Security

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Panelists

Vendor Perspective: Frank McKinney, E-
Prescribing Product Specialist, MDI Achieve

Provider Perspective: Eileen Doll, Efficiency
Driven Healthcare Consulting, Inc.

Pharmacy Perspective: Shelly Spiro, RPh, FASCP,
President, Spiro Consulting, Inc.

Prescriber Perspective: William M. Russell, MD
American Medical Directors Association

Collaborative Efforts

- LTC Health IT Summit – Advancing the Road Map
 - 22 Cosponsors and Strategic Partners
- Certification Commission for Healthcare Information Technology
 - Nursing Home EHR System Certification
- Healthcare Information Technology Standards Panel
 - Medication Management Interoperability Specifications
- American Health Information Community
 - Chronic Care Workgroup
 - Use Case Development

Long Term Care E-Prescribing Recommendations

- NCPDP SCRIPT 10.2 or Higher
- Lift E-Prescribing Exemption on Long Term Care Facilities
- Implementation Coincides with LTC EHR Certification
- Allow Computer-Generated Faxes during Transition Period

Vendor Perspective

Frank McKinney

MDI Achieve

National Association for the Support of Long Term Care

2006 LTC E-Prescribing Pilot Findings

- Started with the ambulatory standards (SCRIPT 8.1)
- Adapted to LTC and piloted in nursing facilities
- Certain messaging worked as-is
 - Patient Eligibility, Formulary & Benefits
- Some worked after “retro-fitting” with LTC info
- Some messaging needed to be invented
 - Handling for open orders, resupply, census info
- “Rarely-used” messages proved critical in LTC:
 - Fill Status Notification, Cancel

Current SCRIPT Support for LTC

- In response to pilot findings, a number of LTC enhancements made to SCRIPT in 2006 / 7
- Latest ANSI-approved version supports the long-term care prescription workflow (SCRIPT 10.2)
- LTC software vendors developing 10.2 support
- E-Prescription routing networks supporting 10.2
- LTC EHR-S Functional Profile references SCRIPT 10.2; anticipated to be basis for CCHIT certification

E-Prescribing in the LTC Workflow

- Pilot goal: Test e-prescribing in the common “nurse as agent” LTC workflow
 - Physician relays orders to nurse—off system
- Nurse as agent: Benefits in care quality, safety
- Greater opportunity with direct prescriber entry...ensure clarity of the prescription order, reduce chance of med errors, enhance efficiency
- Subsequent experience supports the conclusions
- The SCRIPT 10.2 standard supports both models

Vendor Impact: LTC E-Rx Standards

- Critical to get LTC standards established quickly
- Industry indicates it can concurrently support SCRIPT 8.1 for ambulatory use and 10.2 in LTC
- Will focus vendor development activities
 - Currently must split efforts between SCRIPT and other, proprietary formats
- Accelerate development of SCRIPT-based facility and pharmacy systems, LTC network support
- Providers get access to e-prescribing sooner

Concrete Steps Forward

- Lift the long-term care exemption quickly
- Name the set of message types needed in LTC
 - Include unique LTC messages: Census, Resupply
 - “LTC-valuable” messages: Fill Status, Cancel
- Prevent negative provider impacts while vendors make compliant software available
 - Temporary allowance for computer-generated fax; remove before start of LTC EHR certification
- Standards, stakeholder education, vendor focus

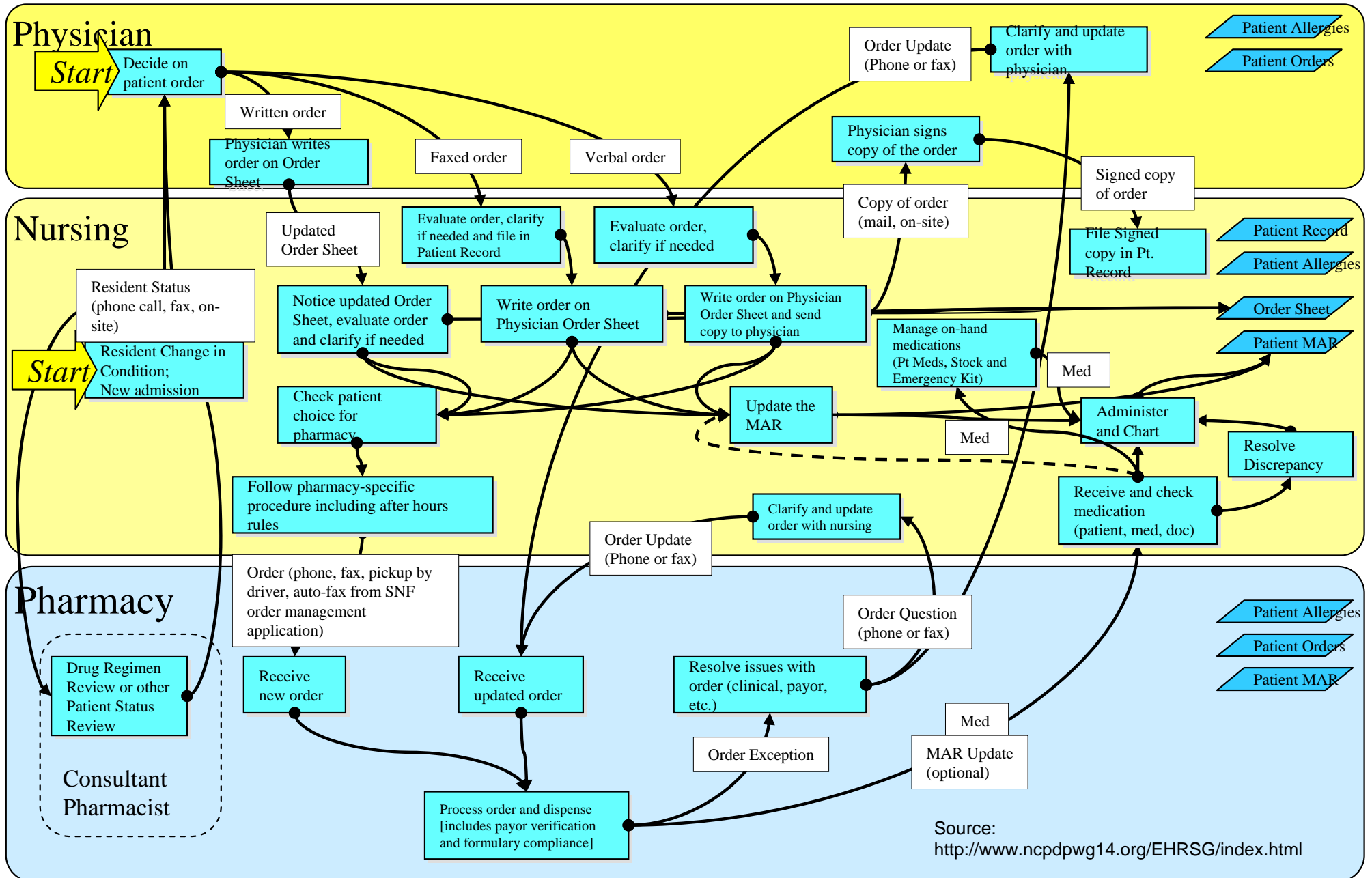
Provider Perspective

Eileen Doll

Efficiency Driven Healthcare Consulting, Inc.

American Health Care Association

American Association of Homes and Services for the Aging

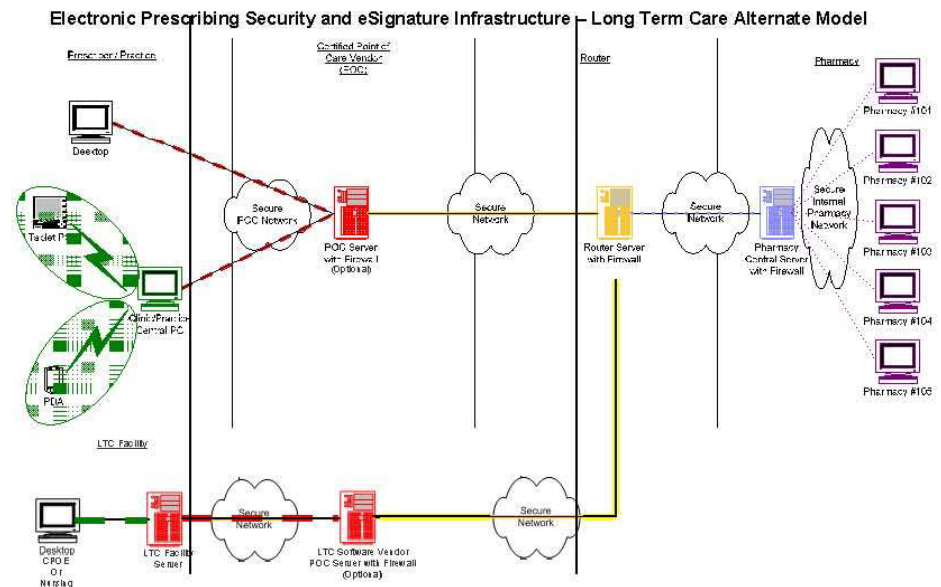


E-prescribing model

A.13 Appendix

Electronic Prescribing Security and eSignature Infrastructure – Long Term Care Alternate Model

The diagram below pictorially represents the LTC perspective and how security is invoked in the LTC environment.



Note: Security and authentication is the same as with the non-LTC model

Implementation Timeline

- Corresponding implementation dates with:
 - Nursing Home EHR System Certification (Anticipated late 2009)
 - Elimination of the exemption on Computer-Generated Faxes (August 2009)
- January 2010 implementation date

Pharmacy & Pharmacist Perspectives

Shelly Spiro, RPh, FASCP

Spiro Consulting, Inc.

American Society of Consultant Pharmacists

Pharmacists Perspective

- Reducing medication errors
- Prevent medication-related problems
- Improve medication management
- Prevent duplicative or contradictory efforts between consultant pharmacists and prescribers

Pharmacies Perspective

- Improve efficiencies and productivity
 - LTC Pilot results showed time efficiencies
 - Eliminating fax sorting, processing new admission and new orders
- Barriers
 - Facility providers are requesting immediate technology solutions
 - System vendors are writing proprietary solutions
- Eliminating LTC exemption will promote standard adoption

Prescriber Perspective

William Russell, MD

American Medical Directors Association

Thank You

American Association of Homes and Services for the Aging
American Health Care Association
American Medical Directors Association
American Society of Consultant Pharmacists
National Association for the Support of Long Term Care