

# ELECTRONIC PRESCRIBING (ePRESCRIBE) FREQUENTLY ASKED QUESTIONS

## Providers

### **Must a pharmacy accept electronic prescriptions?**

No, the New York State (NYS) legislation does not mandate pharmacies to accept electronic prescriptions. However, pharmacies not configured to accept electronic prescriptions are likely to go out of business, since providers are required by law to electronically prescribe.

If a pharmacy is not set up to accept electronic prescriptions, that pharmacy will not appear on the drop down list of preferred pharmacies. In this situation, the patient should be asked for an alternate pharmacy.

### **Will a pharmacy accept a written script or a phoned prescription from me?**

NYS has offered guidance to pharmacies that they should continue to accept written scripts and phoned scripts. NYS will presumably do periodic audits, and if a provider is identified as repeatedly submitting written or phoned scripts to a pharmacy, that provider is at risk for professional discipline.

### **Are there pharmacies that are exempt from the NYS legislation?**

Yes. Veteran Affairs (VA) pharmacies are exempt because they are federally regulated and not state regulated. Likewise, Seneca Nation pharmacies are exempt. Out-of-state pharmacies (Merck-Medco, CVS/caremark, Express Scripts) are also exempt. These pharmacies may or may not be configured to accept electronic prescriptions.

### **What if my patient has a foreign address, such as a Canadian address?**

If the patient's address is in a foreign country, electronic prescribing is technically not possible, even if the patient wishes to fill the script at a local pharmacy – the script should be prepared in the EMR and printed.

### **What if my patient tells me that they want to shop prices, and want a printed script instead of an electronic submission of the script?**

You need to instruct the patient that this is now against the law.

### **Can I print a copy of the script for my patient after electronically transmitting the script?**

Yes, but the printed version will not have a place for you to sign. Instead, it will display, "Copy only – not valid for dispensing. For informational purposes only."

### **What if I transmitted a script to a pharmacy that is closed, and the patient needs the script filled now?**

Generate a new electronic prescription and transmit to the 24 hour pharmacy of the patient's choice. Leave a voice message at the original pharmacy informing the pharmacist of the situation, and tell them not to fill the script transmitted yesterday/overnight.

### **What if I realize after I transmit the script that there was an error on the dose or instructions?**

Generate a new electronic prescription, call the pharmacy, and inform the pharmacist to void the first/incorrect script.

### **How do I know if transmission has been successful?**

Unfortunately, you do not receive notification of a successful transmission. If transmission fails, you will receive a message in your Message Center labeled as an "eRx routing error."

### **What do I do if transmission fails?**

If transmission fails, print the script, and sign it. The system is configured so that the following verbiage will print on the script below the medication name and above the instructions and quantity: "This prescription was originally transmitted electronically to the below pharmacy and transmission failed. (Name of pharmacy, date and time that electronic transmission failed)."

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## Providers (continued)

### **What if there is a downtime?**

If only SureScripts is down, you can prepare the script electronically, print the script and sign it. If PowerChart is down, you write the script on paper (Kaleida Health script pads are available at the inpatient pharmacy at each hospital).

### **If I do not electronically prescribe to a NYS pharmacy, do I need to report this to the state?**

No. Effective September 30, 2016, Governor Cuomo signed Legislation (A.9335-B/S.6779-B) which relieved practitioners of the burdensome requirement to email documentation of e-prescribing exceptions to the Bureau of Narcotics Enforcement (BNE). However, if you do not prescribe electronically, you must make a notation in the patient's health record regarding any exception taken to the electronic prescribing mandate.

### **What are the blanket exceptions to electronic prescribing outlined in the March 2, 2017 letter from the NYS Commissioner of Health? [This letter is an update of the March 16, 2016 letter to practitioners.]**

1. Any practitioner prescribing a controlled or non-controlled substance, containing two (2) or more products, which is compounded by a pharmacist;
2. Any practitioner prescribing a controlled or non-controlled substance to be compounded for the direct administration to a patient by parenteral, intravenous, intramuscular, subcutaneous or intraspinal infusion;
3. Any practitioner prescribing a controlled or non-controlled substance that contains long or complicated directions;
4. Any practitioner prescribing a controlled or non-controlled substance that requires a prescription to contain certain elements required by the federal Food and Drug Administration (FDA) that are not able to be accomplished with electronic prescribing;
5. Any practitioner prescribing a controlled or non-controlled substance under approved protocols under expedited partner therapy, collaborative drug management or in response to a public health emergency that would allow a non-patient specific prescription;
6. Any practitioner prescribing an opioid antagonist that would allow a non-patient specific prescription;
7. Any practitioner prescribing a controlled or non-controlled substance under a research protocol;
8. A practitioner prescribing a controlled or non-controlled substance either through an Official New York State Prescription form or an oral prescription communicated to a pharmacist serving as a vendor of pharmaceutical services, by an agent who is a health care practitioner, for patients in nursing homes and residential health care facilities as defined by PHL § 2801.
9. A pharmacist dispensing controlled and non-controlled substance compounded prescriptions, prescriptions containing long or complicated directions, and prescriptions containing certain elements required by the FDA or any other governmental agency that are not able to be accomplished with electronic prescribing;
10. A pharmacist dispensing prescriptions issued under a research protocol, or under approved protocols for expedited partner therapy, or for collaborative drug management, or comprehensive medication management;
11. A pharmacist dispensing non-patient specific prescriptions, including opioid antagonists, or prescriptions issued in response to a public health emergency issued; and
12. A pharmacist serving as a vendor of pharmaceutical services dispensing a controlled or non-controlled substance through an Official New York State Prescription form or an oral prescription communicated by an agent who is a healthcare practitioner, for patients in nursing homes and residential healthcare facilities as defined by PHL § 2801.

### **What if my scripts at Kaleida Health display incorrect information?**

Contact the Technology Assistance Center (TAC) at 859-7777 or email [ITProblem@KaleidaHealth.org](mailto:ITProblem@KaleidaHealth.org).

### **What if the mobile device with my Imprivata ID application breaks, or if I forget my mobile device at home and need to generate electronic prescriptions for controlled substances?**

You will need to obtain a VASCO® fob for temporary use. Go to one of the locations listed below, and show your Kaleida Health ID badge. You will be issued a VASCO® fob and will need to call TAC at 859-7777 to activate it.

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## Providers (continued)

Once you no longer need the VASCO® fob, you must return it to one of the following locations. You will not be able to use Imprivata ID until you are witness enrolled in person (per DEA regulations).

**Buffalo General Medical Center:** D5 Corporate Data Center  
**Millard Fillmore Suburban Hospital:** Security Office

**DeGraff Memorial Hospital:** Security Office  
**Oishei Children's Hospital:** Switchboard

### **What if I forget my VASCO® fob at home or at my office, and need to generate electronic prescriptions for controlled substances?**

See the answer just above. When you are issued the temporary fob, your original fob will be inactivated. The next time you return to Kaleida Health, turn in the inactivated fob that was left at home.

### **What if I purchase a new mobile device?**

Contact TAC at 859-7777 or email [ITProblem@KaleidaHealth.org](mailto:ITProblem@KaleidaHealth.org), and IT will enable you to re-enroll your authentication code on your new mobile device.

### **What if my mobile device or VASCO® fob is lost or stolen?**

Please report lost or stolen VASCO® fobs to TAC at 859-7777 or email [ITProblem@KaleidaHealth.org](mailto:ITProblem@KaleidaHealth.org). The lost/stolen VASCO® fob will be disabled immediately to prevent unauthorized use. Imprivata ID will be immediately inactivated on the mobile device. In addition, according to NYS DOH regulations, you should also send an email to [narcotic@health.state.ny.us](mailto:narcotic@health.state.ny.us) with a subject line of "Credentials lost, stolen or compromised," or call the Bureau of Narcotic Enforcement's (BNE) toll free number at 866-811-7957, option 1.

### **How can I learn more about electronic prescribing?**

For more information about electronic prescribing at Kaleida Health, please see the ePrescribe (Electronic Prescribing) Quick Reference Card (QRC) and "ePrescribe (Electronic Prescribing)" Web-based Training (WBT). If you have additional questions, please contact TAC at 859-7777.

### **How do I prepare a compounded prescription electronically?**

Select "Miscellaneous Medication," then select "Compound" in the eRx Product Type field, and enter the name of the medication to be compounded. Finally, list all details of the compound in the special instructions. Please note that "miscellaneous medication" should not be used for controlled substances or compounds that contain controlled substances (as dual authentication is not feasible with "Miscellaneous Medication"). If you are prescribing a compounded controlled substance, select the best available choice from medications in the "master list," and include detailed special instructions.

Please see the section above entitled, "What are the blanket exceptions to electronic prescribing..." for current exceptions to the mandate which pertain to compounded prescriptions (#1, #2, and possibly #3).

### **If my patient has health insurance (such as Medicaid) which pays for over-the-counter (OTC) medications, can I prepare these scripts electronically?**

Yes, and once the New York State electronic prescribing mandate takes effect on March 27, 2016, electronic transmission of scripts for OTC medications will be required.

### **Are supplies (lancets, blood glucose test strips, insulin syringes), durable medical equipment (wheelchair, cane, walker) and oxygen ordered on a script within the scope of the NYS legislation?**

No, only medications must be electronically prescribed.

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## Providers (continued)

### **Can I use PowerChart to electronically prescribe non-controlled substances for family and friends?**

No, unless the family member or friend is under your care as an inpatient or as an outpatient in a Kaleida Health clinic. If you do not have a private office EMR and if you wish to electronically prescribe for family or friends, there are free electronic prescribing applications which are independent of Kaleida Health and PowerChart – go to <https://erxnowregistration.allscripts.com/> and select the Register Electronically button. Be aware that prescribing (even non-controlled substances) for family and friends in the absence of documenting a history and physical is considered professional misconduct by the NYS Board of Professional Medical Conduct.

## Residents

### **Do I need to manually enter my DEA number on the electronic version of the prescription for a controlled substance?**

No. The system will do this for you. As per system design and based on each Kaleida Health inpatient facility's distinct institutional DEA number, the institutional DEA number appearing on a script you prepare at one hospital will be different than the institutional DEA number appearing on a script you prepare at another hospital.

### **Does my supervising physician need to sign the prescription for a controlled substance?**

No. The supervising physician's name, DEA number, license number and NPI number will populate the script when you complete the mandatory field of "Supervising Physician."

### **Do I need to complete an electronic prescriptions for controlled substances (EPCS) registration form?**

No. Residents do not need to complete an EPCS registration form.

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## Additional Information for Providers

1. The provider must retain sole possession of the authentication code and must not share their ID, password or other knowledge factors with any other person. The provider must not allow any other person to use their authentication code, or enter the knowledge factor or other identification means to sign prescriptions for controlled substances. Failure by the provider to secure the authentication code, knowledge information or VASCO® fob may provide a basis for revocation or suspension of registration.
2. The provider must notify TAC (859-7777) immediately that the authentication code or VASCO® fob has been lost or stolen, or that the authentication protocol has been compromised. A provider who fails to comply with this provision may be held responsible for any controlled substance prescriptions written using his two-factor authentication code.
3. By completing the two-factor authentication protocol the provider is legally signing the prescription and authorizing the transmission of the information to the pharmacy for dispensing. The two-factor authentication protocol may only be completed by the provider whose name and DEA registration number appear on the prescription.
4. The NYS DOH requires providers licensed in NYS issuing electronic prescriptions for controlled substances to register their certified EPCS software application with BNE by completing an EPCS registration form.
  - Attendings, nurse practitioners, CRNAs and CMNs with a Health Commerce System (HCS) account:
    - Login to your HCS account at <https://commerce.health.state.ny.us>
    - Select My Content at the top of the page
    - Select All Applications from the dropdown list
    - Select R in the list of letters of the alphabet at the top of the page
    - Select ROPES
    - Place a bullet in the radio button below “Select One” and click the Submit box
    - Select Yes (or correct the info if incorrect)
    - Click the box Register EPCS System
    - Complete the online form for registering Kaleida Health’s certified software application using the following information:
      - Software provider – Cerner
      - Software application – PowerChart
      - Software version – 2015.01.19
    - If a display shows that your OPP status is expired, simply click Submit and Yes to immediately convert your status to active (until you need to renew again in two years)
    - By regulation, you should not register your EPCS software application until after you have obtained your two-factor authentication
  - Attendings, nurse practitioners, CRNAs and CMNs without an HCS account and all physician assistants should complete Kaleida Health’s prepopulated registration form available at: <http://www.kaleidahealth.org/ImprivataIDapp/KH-DOH-5121.pdf>
    - Along with the form, physician assistants should submit the name(s) and license number of your supervising physician
5. The certified EPCS software application must be registered with BNE at least every two years, whenever the DEA requires a new third party audit of the software, or when a EPCS software has a version upgrade, whichever occurs first. If the DEA requires a new third party auditor or if the version of EPCS software is upgraded, Kaleida Health will email providers of the requirement to re-register with the BNE.
6. Providers who electronically prescribe controlled substances will receive a monthly Activity EPCS Report of the controlled substances they prescribed for that month in their Message Center Inbox. The message will be titled “EPCS Reporting from [date range].” Open the message, and click on the link to open the report. After viewing the report, use the Delete button in the Message Center toolbar to delete the message. Providers are required to report any suspicious or fraudulent activity on the report to the Bureau of Narcotic Enforcement.