### MEDICAID PROMOTING INTEROPERABILITY PROGRAM

**ELIGIBLE PROFESSIONALS OBJECTIVES AND MEASURES FOR 2019**

**OBJECTIVE 2 of 8**

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<th>Electronic Prescribing (eRx)</th>
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**Definition of Terms**

**Prescription:** The authorization by an EP to a pharmacist to dispense a drug that the pharmacist would not dispense to the patient without such authorization.

**Permissible Prescriptions:** “Permissible prescriptions” may include or not include controlled substances based on EP selection where creation of an electronic prescription for the medication is feasible using CEHRT and allowable by state and local law.

**Attestation Requirements**

**Measure 1:**

- **DENOMINATOR:** Number of prescriptions written for drugs requiring a prescription in order to be dispensed other than controlled substances during the EHR reporting period; or number
of prescriptions written for drugs requiring a prescription in order to be dispensed during the EHR reporting period.

- **NUMERATOR:** The number of prescriptions in the denominator that are generated, queried for a drug formulary, and transmitted electronically using CEHRT.
- **THRESHOLD:** The resulting percentage must be more than 60 percent in order for an EP to meet this measure.
- **EXCLUSIONS:** An EP may take an exclusion if any of the following apply:
  - Writes fewer than 100 permissible prescriptions during the EHR reporting period; or
  - Does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her EHR reporting period.

**Additional Information**

- EPs must use [2015 Edition CEHRT](#) to meet Stage 3 meaningful use.
- An EP is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained with CEHRT.
- Authorizations for items such as durable medical equipment, or other items and services that may require EP authorization before the patient could receive them, are not included in the definition of prescriptions. These are excluded from the numerator and the denominator of the measure.
- Instances where patients specifically request a paper prescription may not be excluded from the denominator of this measure. The denominator includes all prescriptions written by the EP during the EHR reporting period.
- As electronically prescribing controlled substances is now possible, EPs may choose to include these prescriptions in their permissible prescriptions where feasible and allowable by state and local law. If an EP chooses to include such prescriptions, he or she must do so uniformly across all patients and across all allowable schedules for the duration of the EHR reporting period.
- Over the counter (OTC) medications are not included in the definition of prescription.
- An EP should include electronic transmissions to providers both within and outside his or her organization in the numerator and denominator for the measure of this objective.
- EPs must use CEHRT as the sole means of creating the prescription. An EP must use standards adopted for certified EHR technology when transmitting to an external pharmacy independent of his or her organization.
- The generation and transmission of prescriptions occurs concurrently if the prescriber and dispenser are the same person or are accessing the same record in an integrated EHR to create an order in a system that is electronically transmitted to an internal pharmacy.
• Prescriptions transmitted electronically within an organization (the same legal entity) do not need to use the National Council for Prescription Drug Programs standards. However, an EP's EHR must meet all applicable certification criteria and be certified as having the capability of meeting the external transmission requirements of 45 C.F.R. § 170.315(b)(3). In addition, the EHR that is used to transmit prescriptions within the organization would need to be CEHRT.

• EPs can use intermediary networks that convert information from the certified EHR into a computer-based fax in order to meet this measure as long as the EP generates an electronic prescription and transmits it electronically using the standards of CEHRT to the intermediary network, and this results in the prescription being filled without the need for the EP to communicate the prescription in an alternative manner.

• EPs may simply use the formulary query function available to them in their CEHRT with no further action required. If a query using their CEHRT is not possible or shows no result, an EP is not required to conduct any further manual or paper-based action in order to complete the query, and he or she may count the prescription in the numerator.

• EPs practicing at multiple locations are eligible for the exclusion if any of their practice locations that are equipped with CEHRT meet the exclusion criteria.

• EPs who are part of an organization that owns or operates its own pharmacy within the 10-mile radius are not eligible for the exclusion regardless of whether that pharmacy can accept electronic prescriptions from EPs outside of the organization.

Regulatory References
This objective may be found at 42 C.F.R. § 495.24 (d)(2)(i)(A) and (B). For further discussion please see 80 FR 62834.

Certification Standards and Criteria
Below is the corresponding certification and standards criteria for EHR technology that supports achieving the meaningful use of this objective.

<table>
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<tr>
<td>Information about certification for 2015 Edition CEHRT can be found at:</td>
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<tr>
<td>§170.315(b)(3) Electronic prescribing</td>
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<td>§170.315(a)(10) Drug-formulary and preferred drug list checks</td>
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