

How Your Practice Can Help Manage the Opioid Crisis

November 9, 2018

virencehealth.com



Executive summary



Key Issues:

- Nationwide Opioid Crisis.
- Dual workflows for prescribing controlled substances.
- Time to access the Prescription Drug Medication Program.

This presentation will help you:

- **Enhance care quality** by increasing patient safety & patient satisfaction.
- **Increase provider efficiency** by reducing time and effort required for add-on ePrescribing functionalities.

Key outcomes impacted:

- Time reduction in current workflows.
 - Earlier identification of at risk substance abuse.
 - Secure Provider DEA information.
-

How Your Practice Can Help Manage the Opioid Crisis Agenda



1. National Opioid Crisis Background
 2. Overview, Benefits and Timelines for our crisis fighting solutions
 - Prescription Drug Monitoring Program (PDMP)
 - Electronic Prescribing of Controlled Substances (EPCS)
 3. EPCS roll out experience from Raleigh Neurology
 4. Q&A
-

Combating the Opioid Crisis



Prescription drug abuse

A current epidemic



NBC NEWS

SECTIONLINE > AMERICA'S HEROIN EPIDEMIC

Ohio Gov. John Kasich Limits Opioid Prescriptions to Just Seven Days

NEWS
AMERICA'S HEROIN EPIDEMIC
MAY 30 2017, 12:16 PM ET
BY CORRY SIEMASZKO

HOME SEARCH The New York Times

Over Gulf, Harvey's Texans' Soggy
Texans Navigate Floodwaters — and Emotions
PAID POST: ADT
The Dangers of Leaving Your Pets Home Alone

U.S.

Amid Opioid Overdoses, Ohio Coroner's Office Runs Out of Room for Bodies

Ohio Department of Health

News Release
John R. Kasich/ Governor
Richard Hodges/ Director

August 25, 2016

FOR IMMEDIATE RELEASE
Contacts: ODH Office of Communications (614) 644-8562
OhioMHAS Office of Communications (614) 728-5090

Illicit Fentanyl Continues to Fuel Increase in Drug Overdose Deaths in Ohio

Report also shows progress in reducing prescription opioid abuse

COLUMBUS — The number of unintentional drug overdose deaths in Ohio increased again in 2015, driven by a sharp rise in fentanyl-related deaths, according to a new report released by the Ohio Department of Health (ODH). The number of fentanyl-related deaths in Ohio has increased from 84 in 2013, to 503 in 2014 and rose to 1,155 in 2015. Overall, drug overdose deaths in Ohio increased from 2,531 in 2014 to 3,050 in 2015.

NEWS SHOWS VIDEO CBSN MORE

America's opioid epidemic

Inside America's growing struggle with opioid painkillers and heroin addiction

Share: f t

The New York Times

Drug Deaths in America Are Rising Faster Than Ever

By JOSH KATZ JUNE 8, 2017

New data compiled from hundreds of health agencies reveals the extent of the drug overdose epidemic last year.

AKRON, Ohio — Drug overdose deaths in 2016 most likely exceeded 59,000, the largest annual jump ever recorded in the United States, according to preliminary data compiled by The New York Times.

The death count is the latest consequence of an escalating public health crisis: opioid addiction, now made more deadly by an influx of illicitly manufactured fentanyl and similar drugs. Drug overdoses are now the leading cause of death among Americans under 50.

Although the data is preliminary, the Times's best estimate is that deaths rose 19 percent over the 52,404 recorded in 2015. And all evidence suggests the problem has continued to worsen in 2017.

The New York Times

How the Epidemic of Drug Overdose Deaths Ripples Across America

By HALEYOUN PARK and MATTHEW BLOCH JAN. 1, 2016

Deaths from drug overdoses have jumped in nearly every county across the United States, driven largely by an increase in the use of prescription painkillers and heroin.

Latest

How addiction changes the brain

President Trump has called the opioid epidemic a national emergency, and 21 million Americans are addicted to drugs and alcohol

On AUGUST 25, 12:21 PM

CNN Health + Live TV

FDA head calls for mandatory education, internet policing to fight opioid crisis

By Sandee LaMotte, CNN

Updated 4:55 PM ET, Wed April 4, 2018

Prescription drug abuse

A current epidemic



The screenshot shows the GE MyGE homepage. At the top, there is a navigation bar with the MyGE logo, a home icon, an 'Add Card' button, a 'Customize' dropdown, a user profile for Rhea Hurst, and a search bar. Below the navigation bar, there is a weather widget for Atlanta showing 'Scattered Storms 76°F' and a GE stock price of '12.81 -0.23'. The main content area features a large article titled 'Taking on the opioid crisis' with a photo of a street scene. The article text reads: 'Sixteen years ago, GE Aviation employee Cory Murphy underwent shoulder surgery in high school and was prescribed opioids as part of his post-operative care. Never did he expect this would turn his life into a battle with opioids and a life-changing disease - substance use disorder (SUD). Thirteen years in recovery, Cory now says the rush he gets from being successful trumps any feeling a drug could ever give him. He is passionate about sharing his journey to recovery through a variety of platforms (even at GE) to give hope to those whose loved ones are currently fighting addiction and inspire anyone battling addiction to never stop searching for help. Read more about Cory's story here.' Below the article, there are sections for 'Recognizing the Problem' and 'Expanding Access to Evidence-based Care'. On the left side of the screenshot, there is a sidebar with a 'GE News' section and a 'Taking on the opioid crisis' article preview.

June 21, 2018

Front page news
of the GE Homepage

Yesteryear's advertisements...

COCAINE TOOTHACHE DROPS
Instantaneous Cure!
PRICE 15 CENTS.
Prepared by the
LLOYD MANUFACTURING CO.
219 HUDSON AVE., ALBANY, N. Y.
For sale by all Druggists.

BAYER PHARMACEUTICAL PRODUCTS.
We are now sending to Physicians through out the United States literature and samples of

ASPIRIN
The substitute for the Salicylates, agreeable of taste, free from unpleasant after effects.

HEROIN
The Sedative for Coughs,
HEROIN HYDROCHLORIDE
Its water-soluble salt.
You will have call for them. Order a supply from your jobber.

Write for literature to
FARBENFABRIKEN OF ELBERFELD CO.
40 Stone Street, New York,
NEW YORK



ALLEN'S COCAINE TABLETS

For HAY FEVER, CATARRH, AND THROAT TROUBLES. CURE NERVOUSNESS, HEADACHE, and SLEEPLESSNESS.

Price 50c. a box at Druggists or by mail. Send for Pamphlet.
ALLEN COCAINE MFG. CO.,
1254 Broadway, N. Y.

COUGH

The Sum of Clinical Experience Designates Glyco-Heroin (Smith) as a Respiratory Sedative Superior in All Respects to the Preparations of Opium, Morphine, Codeine and Other Narcotics and which devoid of the toxic or depressing effects which characterize the latter when given in doses sufficient to reduce the irritability of the bronchial, tracheal and laryngeal mucous membranes.

THE PROBLEM HAS BEEN SOLVED BY the pharmaceutical compound known as

GLYCO-HEROIN (Smith)

The results obtained with Glyco-Heroin (Smith) in the alleviation and cure of cough are attested by numerous clinical studies that have appeared in the medical journals within the past few years.

Scientifically Compounded, Scientifically Conceived, GLYCO-HEROIN (SMITH) simply stands upon its merits before the profession, ready to prove its efficacy to all who are interested in the advances in the art of medication.

GLYCO-HEROIN (Smith) is supplied to the druggist in sterile brown dispensing bottles only. The quality of the preparation is guaranteed by the physician in two, three or four ounces.

DOSE.
The adult dose of Glyco-Heroin (Smith) is one teaspoonful, repeated every two hours or at longer intervals, in the case of children of ten or more years, from a quarter to a half teaspoonful. Children of three years of age, one to two drops.

SOLE MANUFACTURERS:
THOMAS CURRY & CO., MARTIN H. SMITH & CO., Chemists,
40 BOSTON AVE., NEW YORK CITY.

Samples and Literature Supplied on Request



A COLD BOTTLE ON A HOT DAY

Is a natural desire; but, remember, there is just one thing that the bottle can hold will enable you to forget worry and fatigue—**Coca-Cola** quenches the thirst, refreshes, invigorates, as nothing else can.

Its Purity Proved by Analysis

CHEMICAL DEPARTMENT
South Carolina College
COLUMBIA, S. C.

This is to certify that, pursuant to your request, I have bought in the open market (from the Murray Drug Co.) an original package of five gallons of Coca-Cola syrup bearing the label of "The Coca-Cola Co., Atlanta, Ga.," and have subjected the same to careful analysis.

The subject of this investigation being to establish the presence or absence of cocaine, and possibly of other alkaloids, a quantity of the syrup was first analyzed. The amount contained in a bottle of the carbonated beverage was separated into two portions. The crystalline substance thus obtained was further separated by fractional extraction, after which it was concentrated and tested. Since this concentrated product, which would contain all of the cocaine, failed to respond to the tests for cocaine, it is clear that the alkaloid is absent, or present in so small a quantity as to be undetectable by analysis. The entire constituent of Coca-Cola Syrup has a sharp and good odor, and is in quantity seemingly large.

There was no evidence of the presence of other alkaloids.

(Signed) **W. B. BURNSEY, Chemist.**

Guaranteed under the Pure Food and Drugs Act, June 30, 1906, Serial Number 3324.

5c Everywhere 5c

Coca-Cola



The "Allenburys" Throat Pastilles

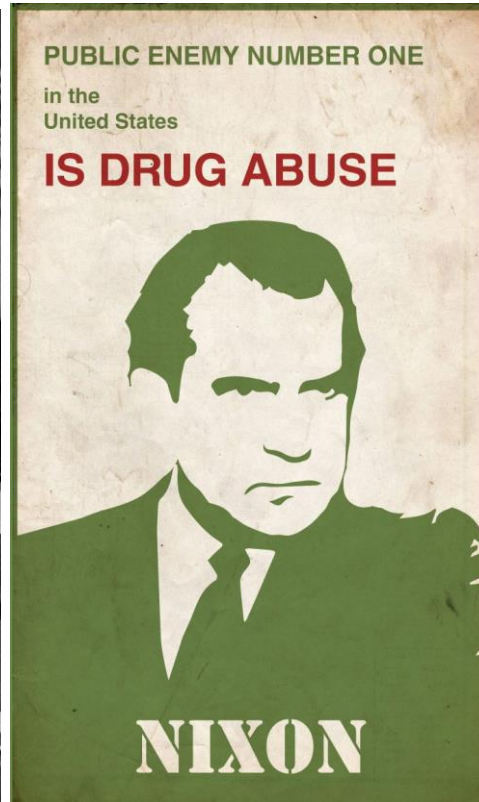
No. 56.
Menthol, Eucalyptus and Cocaine
Menthol, 1 min. Eucalyptus Oil, 1/2 gr. Cocaine.
A Pastille may be taken every four or six hours, if required.

Manufactured by **Allen & Hanburys Ltd.** LONDON

Prescription drug abuse – An ongoing history



October 1970
Controlled Substances Act



June 1971
“War on Drugs”



1982
“Just Say No”



1990s
DARE programs

Pain

The 5th vital sign



Vital Signs

Vital Signs: VS View Standard Metric

Standard: Height: 64 in, Weight: 186 lb, Temp: 97.2 °F, Pulse: 75 /min, Resp: 18 /min, BP Sitting: 150 / 95

Metric: Height: cm, Weight: kg, Temp: °C

BMI: 31.92 kg/m²
Recommended BMI: 19-25
Added Problem: Body mass index (BMI) 31.0-31.99, adult (ICD10-Z68.31)

Assessment:
 Patient in pain? Yes No
 Exercise Counseling: Yes No
 Dietary Counseling: Yes No

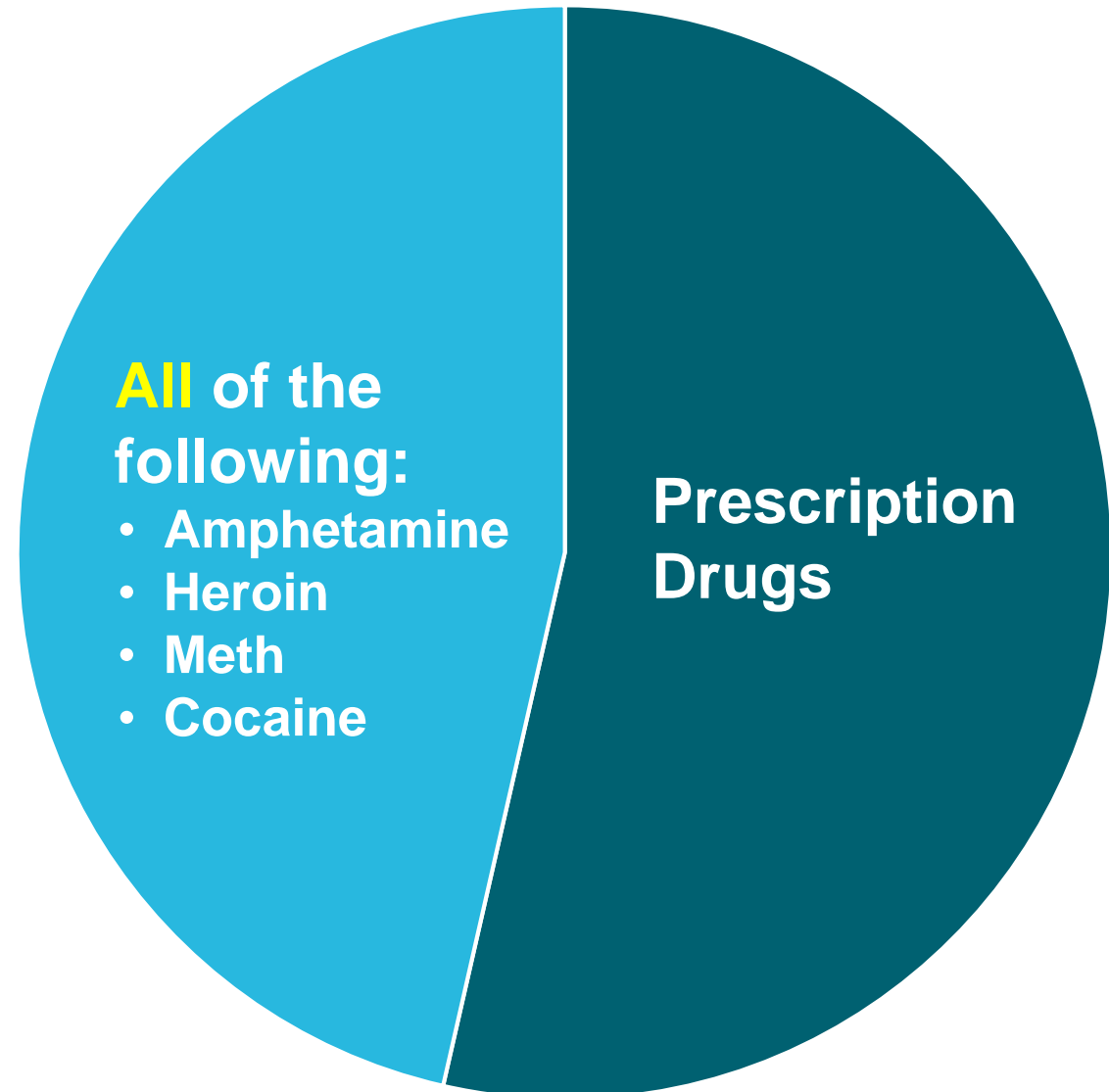
Chief Complaint: LMP: [dropdown]

View Prob List	View Med List	View Allergies	View Directives	Go To Orders								
Problems Reviewed: <input type="checkbox"/>	Meds Reviewed: <input type="checkbox"/>	Allergies Reviewed: <input type="checkbox"/>										
HKPROB: <input type="checkbox"/>	NKMED: <input type="checkbox"/>	NKA: <input type="checkbox"/>	NKDA: <input type="checkbox"/>									
Update Prob List	Update Med List	Update Allergies	Update Directives	Go To Flowsheet								
HPI	Entry	PMH	FH	SH	Risk Factors	ROS	VS	PE	Problems	CPOE A/P	Instructions/Plan	Copyright
08/27/2018	08/12/2018											
186	186											
150	150											
95	95											

The United States has been at the forefront in terms of prescription opioid consumption. In 2009, the United States consumed 99% of the world's hydrocodone, 60% of the world's hydromorphone, and 81% of the world's oxycodone.

Today's stats...

Depressants, opioids and antidepressants are responsible for more overdose deaths **(45%)** than cocaine, heroin, methamphetamine and amphetamines **(39%) combined.**



What are we doing about it?

Charlie Baker tapped by Trump for opioid crisis commission



Governor Charlie Baker, on Wednesday. —Jonathan Wiggs / The Boston AP, May 10, 2017

BOSTON (AP) — Republican Gov. Charlie Baker is being tapped by President Donald Trump to sit on a commission aimed at addressing addiction and the opioid crisis.

During the campaign, Trump vowed to combat the national opioid epidemic.

Trump also announced his intention Wednesday to name Democratic Rep. Patrick Kennedy of Rhode Island and Be... on a panel, to be chaired by Republican New Jersey Gov. Chris...

Madras is a professor of psychobiology at Harvard Medical School and a former drug policy adviser to President George W. Bush.

Massachusetts hasn't escaped the opioid crisis. The state announced Wednesday that more than 2,000 people died from opioid-related overdoses in Massachusetts last year as the focus of the epidemic continued to shift from heroin to the synthetic drug fentanyl.

Drs. Gawande And Murthy Discuss The Opioid Crisis — And What To Do Now



Michael Mast @mjmast · 30 Apr 2015
@Atul_Gawande takes the floor to present the keynote at #CentricityLive



What are we doing about it?



Providing a more comprehensive set of tools to help you

1. Identify drug purchase history outside of only the PBM
2. Reduce the risk of additional addiction
3. More securely send controlled substances to pharmacies

Rhea Davis
F 37 Years 22 July 1980 64lb (29.03 kg) 64in Height
sex age DOB Weight Height
Outgoing authorizing provider
Rhea M Davis 777 Portland Drive, Address 3, Portland, OR 97203 supervisor t.admin
DEAR: DE7845123-001 NPI: 2346136585

Active Medications by User Sort

#275 WEGMANS CORPORATE TESTING* [EPCS]
155 CORPORATE WOODS, Suite 200, ROCHESTER, NY 14623 (S/S) 239-2050

VICODIN HP 10-300 MG ORAL TABLET qty 30 Tablet rt 0 Earliest Fill 04-27-2018
BMN Take one (1) tablet by mouth twice daily. Total Disp: 3 Written 04-27-2018
Controlled Substance Acknowledgement: **Required!** Route: ORAL

Rhea M Davis - Authorizing provider

Risk Factors | Alcohol | Drug

Load Prior Value | Clear All | Insert All Prior Values into Note
Drug Use Assessment | Insert Prior Drug Use into Note

Drug Use: yes no
Drug of Choice: marijuana, cocaine, crack
Comments/Other Substances:

DAST-10

Have you used drugs other than those required for medical reasons? Yes No
Do you abuse more than one drug at a time? Yes No
Are you always able to stop using drugs when you want to? If never use drugs, answer 'Yes'. Yes No
Have you had 'blackouts' or 'flashbacks' as a result of drug use? Yes No
Do you ever feel bad or guilty about your drug use? If never use drugs, answer 'No'. Yes No
Does your spouse (or parents) ever complain about your involvement with drugs? Yes No
Have you neglected your family because of your use of drugs? Yes No
Have you engaged in illegal activities in order to obtain drugs? Yes No
Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs? Yes No
Have you had medical problems as a result of your drug use (e.g., memory loss, hepatitis, convulsions, bleeding, etc.)? Yes No

Total DAST10 Score: 6

PLAN
Counseled for Drug Abuse: 12/18/2017 Commit to FlowSheet
Add Problem: Drug Abuse (F19.10) | Go to Problems | Refer for Counseling

Go to Risk Factors | Go to Alcohol

HPI | Entrv | PMH | FH | SH | Risk Factors | ROS | VS | PE | Problems | CPDE A/P | Instructions/Plan | Care Plan | Copyright

TESTPATIENT, CAMERON
Age: 36 demographics
Data as of: 6/30/2017

No prescription data is available from your state PMP for this patient.

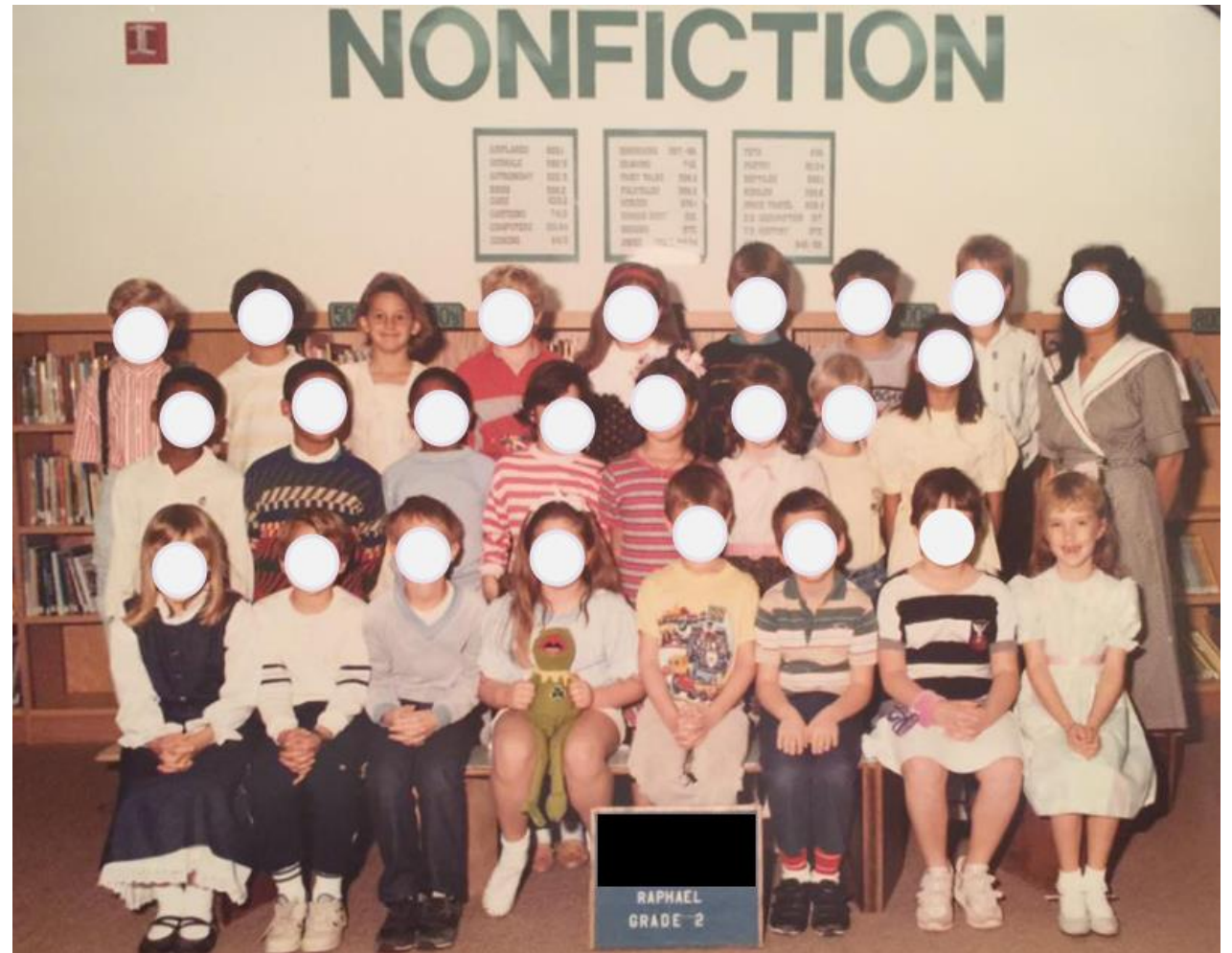
Per CDC guidance, the conversion factors and associated daily morphine milligram equivalents for drugs prescribed as part of medication-assisted treatment for opioid use disorder should not be used to benchmark against dosage thresholds meant for opioids prescribed for pain.

Prescriptions Total Prescriptions: 78 Private Pay: 0 Active Daily MME: 0.00

Fill Date	PT #	Drug	Qty	Days	Prescriber	Pharmacy	Refill #	MgEq#	MgEqDay#	Pymt Type	PMP #
12/16/2016	3	GUAFENESIN WCODINE SYRUP	90	5	FAHOB	Fake C	0	27.00	5.40	Comm Ins	KS
12/16/2016	3	DIACEPAM 5 MG TABLET	12	12	JO PL	Fake C	0	6.00	-	Comm Ins	KS
12/16/2016	3	HYDROCODON-ACETAMINOPHEN 5-325	15	4	JO PL	Fake C	0	75.00	18.75	Comm Ins	KS
12/12/2016	1	OXYCODONE-ACETAMINOPHEN 5-325	15	3	CAFAM	Real C	0	112.50	37.50	Comm Ins	KS
12/11/2016	2	OXYCODONE-ACETAMINOPHEN 5-325	12	12	GO DOC	Real C	0	90.00	7.50	Comm Ins	KS
12/10/2016	3	HYDROCODON-ACETAMINOPHEN 5-325	60	4	JO PL	Fake C	0	200.00	50.00	Comm Ins	KS
12/06/2016	1	DIACEPAM 5 MG TABLET	60	30	OH DOC	Phys N	0	30.00	-	Comm Ins	KS
11/23/2016	1	ACETAMINOPHENOD #3 TABLET	12	3	CAFAM	Real C	0	54.00	18.00	Comm Ins	KS
11/16/2016	1	ACETAMINOPHENOD #3 TABLET	16	4	CAFAM	Real C	0	72.00	18.00	Comm Ins	KS
11/17/2016	3	HYDROCODON-ACETAMINOPHEN 5-325	12	3	FAHOB	Fake C	0	60.00	20.00	Comm Ins	KS
11/16/2016	1	ACETAMINOPHENOD #3 TABLET	10	2	JO PL	Real C	0	45.00	22.50	Comm Ins	KS
11/15/2016	1	ACETAMINOPHENOD #3 TABLET	8	2	BR HEA	Real C	0	36.00	18.00	Comm Ins	KS
11/13/2016	1	HYDROCODON-ACETAMINOPHEN 10-325	5	2	CAFAM	DrugWa	0	50.00	25.00	Comm Ins	KS
11/10/2016	1	DIACEPAM 5 MG TABLET	60	30	OH DOC	Phys N	0	30.00	-	Comm Ins	KS
11/06/2016	2	OXYCODONE-ACETAMINOPHEN 10-325	15	4	GO DOC	Real C	0	225.00	56.25	Comm Ins	KS
10/31/2016	1	HYDROCODON-ACETAMINOPHEN 10-325	15	4	FAHOB	DrugWa	0	150.00	37.50	Comm Ins	KS
10/26/2016	2	HYDROCODON-ACETAMINOPHEN 5-325	12	12	GO DOC	Real C	0	60.00	5.00	Comm Ins	KS
10/25/2016	1	HYDROCODON-ACETAMINOPHEN 7.5-325	6	2	BR HEA	DrugWa	0	45.00	22.50	Comm Ins	KS
10/25/2016	2	HYDROCODON-ACETAMINOPHEN 5-325	15	4	GO DOC	Real C	0	75.00	18.75	Comm Ins	KS
10/24/2016	2	GUAFENESIN WCODINE SYRUP	12	12	FAHOB	Real C	0	3.60	0.30	Comm Ins	KS
10/23/2016	2	ACETAMINOPHENOD #3 TABLET	15	4	JO PL	Real C	0	67.50	16.88	Comm Ins	KS
10/21/2016	1	HYDROCODON-ACETAMINOPHEN 5-325	40	4	GO DOC	Real C	0	200.00	50.00	Comm Ins	KS
10/20/2016	2	GUAFENESIN WCODINE SYRUP	12	12	FAHOB	Real C	0	3.60	0.30	Comm Ins	KS
10/19/2016	1	HYDROCODON-ACETAMINOPHEN 7.5-325	12	3	CAFAM	DrugWa	0	90.00	30.00	Comm Ins	KS
10/18/2016	2	GUAFENESIN WCODINE SYRUP	15	4	FAHOB	Real C	0	4.50	1.12	Comm Ins	KS
10/14/2016	2	DIACEPAM 5 MG TABLET	12	12	OH DOC	Real C	0	6.00	-	Comm Ins	KS
10/14/2016	1	HYDROCODON-ACETAMINOPHEN 5-325	60	10	BR HEA	DrugWa	0	300.00	30.00	Comm Ins	KS

Why do we care?

- The opioid epidemic is getting worse. Overdose deaths in the US climbed by 21% between 2015 and 2016 – 2/3 of the deaths related to opioids¹
- The nationwide cost of the crisis is over \$500 billion as a result of drug treatment services, inpatient hospital services, medical examiner costs, criminal justice costs, law enforcement costs²
- Impact on quality of life or pain endured by those affected



Source 1: <https://www.vox.com/2018/1/10/16872012/opioid-epidemic-medication-addiction-map>

Source 2: <https://www.marketwatch.com/story/how-much-the-opioid-epidemic-costs-the-us-2017-10-27>

Prescription Drug Monitoring Program (PDMP)



PDMP vs EPCS



Prescription Drug Monitoring Program

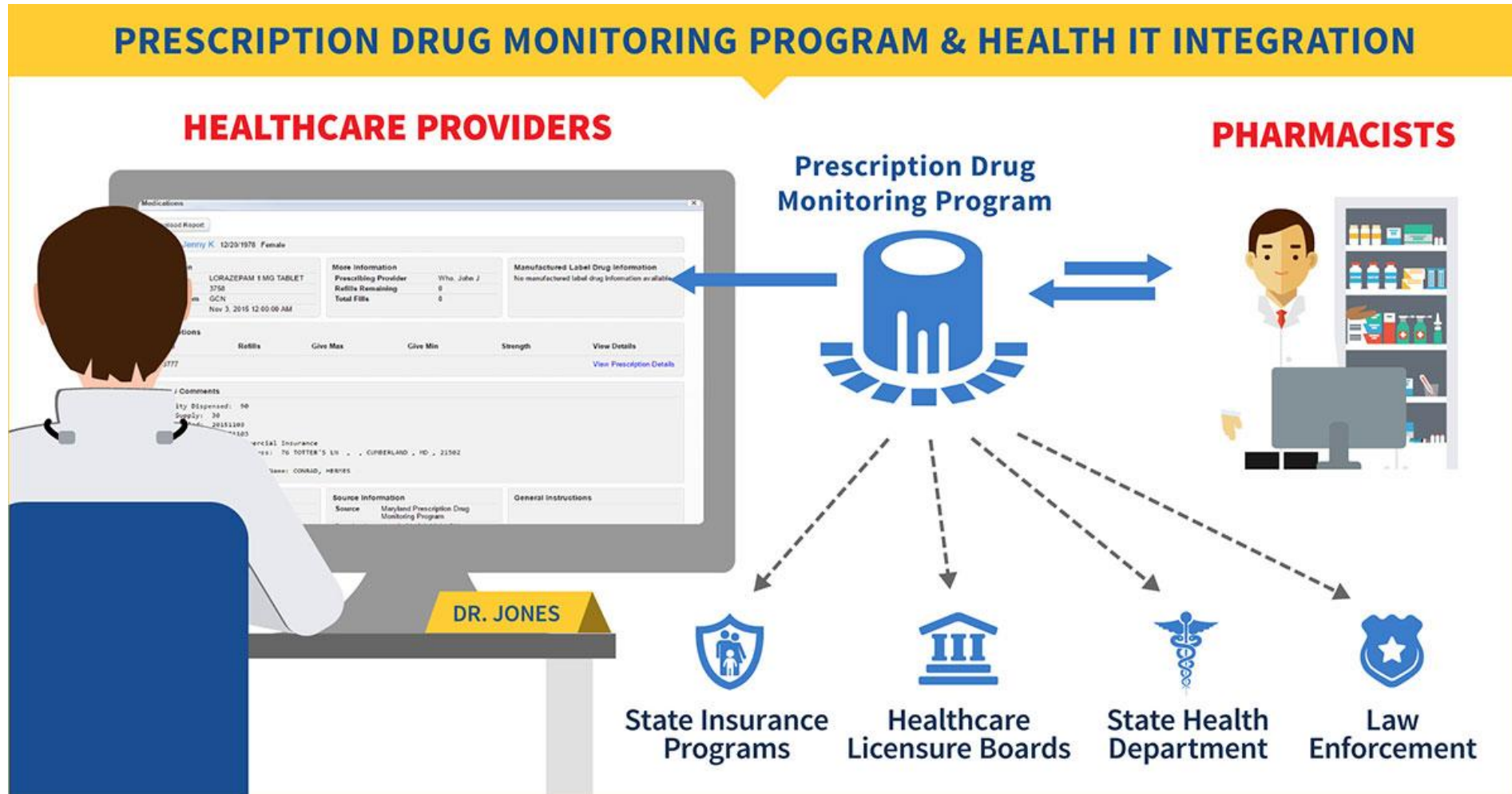
State regulated online electronic database containing a patient's controlled substance prescribing & dispensing history.

Electronic Prescribing of Controlled Substances

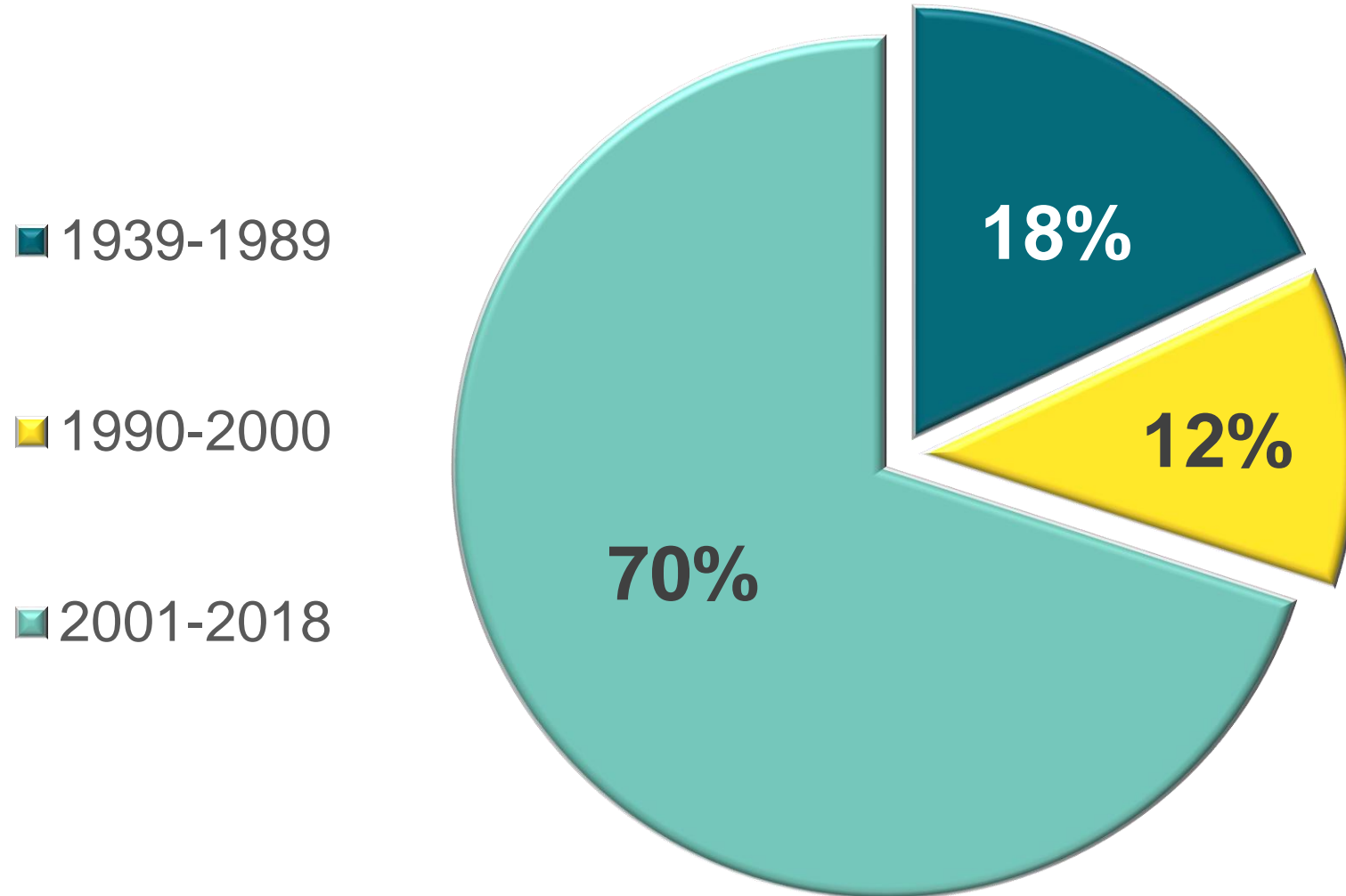
Federal regulation (State mandated) providing practitioners with the ability to write and transmit prescriptions for controlled substances electronically.



Who can use PDMP data?



PDMP State Enablement



Benefits of Prescription Drug Monitoring Program (PDMP)



Enhanced care quality

- Increased patient safety
 - Facilitate the identification, intervention, and treatment of persons addicted to prescription drugs
 - Eliminates duplicate therapies leading to possible overdose

Increased efficiency

- Eliminates dual PDMP workflows requiring access to a separate tool
 - 99% of reports generated within 3-4 seconds

***Based on a 2017 case study of 3 customers (140 providers) polled regarding the time they spend checking state databases to obtain medication information**

physician time
per day

physician time
per day

Save over

provider!

Within the application (CPS and CEMR)



Update Medications

Potential medication list for: **Lucille Anderson** **Controlled Drug Report** Eligibility: OK Drug Interactions

Description	Instructions	Route	Start Date	Formulary	Diagnoses	Last Re
THALOMID 100 MG ORAL CAPSULE (THALIDOMIDE)	at bed	ORAL	08/09/2017	U		
RETIN-A 0.01 % EXTERNAL GEL (TRETINOIN)		EXTERNAL	04/05/2017	U		#1[Unspecif

Effects of this update:

Formulary: FSL102 (PLANX)

Buttons: New..., Change..., Remove..., Change Back, Send/Print Rx, OK, Cancel

New Medication

Name: Lucille Anderson
Birth: 05/05/1940
Age: 78 Years Old
Sex: Female
Height: BSA: Unable to calculate
Insurance: Medicare Part B

Find Medication: Custom List: Internal Medicine Reference List...
Formulary: FSL102 (PLANX)

Define Medication:
Medication: [Text Field]
Route: [Dropdown]
Instructions: [Text Area] Comments: [Text Area]
Start Date: 11/01/2018 Stop Date: [Text Field] Dosing Calculator
Duration: [Text Field] Days Weeks Months Monograph

Prescription:
Quantity: [Text Field] Refills: [Text Field] Brand medically necessary [Checkbox] Print Pt. Handout [Checkbox]
Pharmacy: [Text Field] Authorized By: Durkan, Cathy [Dropdown]
Select... Prescribing Method: Telephone [Dropdown] State: Illinois [Dropdown]

Buttons: Save & Continue, OK, Cancel

Change Medication

Name: Lucille Anderson
Birth: 05/05/1940
Age: 78 Years Old
Sex: Female
Height: BSA: Unable to calculate
Insurance: Medicare Part B

Find Medication: Custom List: Internal Medicine Reference List...
Formulary: FSL102 (PLANX)
THALOMID 100 MG ORAL CAPSULE formulary status is unknown

Define Medication:
Medication: THALOMID 100 MG ORAL CAPSULE (THALIDOMIDE)
Route: ORAL
Instructions: [Text Area] Comments: [Text Area]
Start Date: 08/09/2017 Stop Date: [Text Field] Dosing Calculator
Duration: [Text Field] Days Weeks Months Monograph

Prescription:
Quantity: [Text Field] Refills: [Text Field] Brand medically necessary [Checkbox] Print Pt. Handout [Checkbox]
Pharmacy: [Text Field] Authorized By: Durkan, Cathy [Dropdown]
Select... Prescribing Method: Telephone [Dropdown] State: Illinois [Dropdown]

Buttons: Save & Continue, OK, Cancel

Lucille Anderson
F 78 Years 05 May 1940
Sex Age DOB

Patient's Current Pharmacy
Ohio Board of Pharmacy Store*
77 S High St
Columbus, OH 43215

Active Medications
Viewing: All Items

THALOMID 100 MG ORAL CAPSULE (THALIDOMIDE)
Last Rx: [Text Field] Renew [Button] [Info]

RETIN-A 0.01 % EXTERNAL GEL (TRETINOIN)
Last Rx: 5/4/2018 | Qty: 1 RF: 21 Renew [Button] [Info]

Controlled Drug Report

Pharmacy change requests (1) Update Prescriptions for Renewal (0)

Ohio Board Of Pharmacy Store*
77 S High St, Columbus, OH 43215 (614) 466-4143

Therapeutic: CRESTOR 40 MG ORAL TABLET
qty 30 Tablet rf 2 Earliest Fill [Text Field]
BMN 1 per day Requested 10-01-2018 Note to pharmacy [Text Field]

Cathy Durkan - Authorizing provider

Note: To approve this request you must select an alternative

Update Medications
New Medication
Change Medication
Prescription Renewal Form

**Not visible unless the license key is valid in Admin. If the PMP Role is "none" on the User account the options are grayed out.*

PDMP & NarxCare reports



Demographics

Summary

Summary	Narcotics* (excluding buprenorphine):	Buprenorphine*
Total Prescriptions: 39	Current Qty: 211	Current Qty: 0
Total Prescribers: 13	Current MME/day: 100.00	Current mg/day: 0.00
Total Pharmacies: 15	30 Day Avg MME/day: 81.17	30 Day Avg mg/day: 0.00

Prescriptions

Prescriptions Total Prescriptions: 39 Private Pay: 14

Fill Date	ID	Written	Drug	Qty	Days	Rx #	Prescriber	Pharmacy	Refill	Daily Dose	Pymt Type	PMP
05/08/2018	1	05/08/2018	HYDROCODON-ACETAMINOPHEN 5-325	120	30	111789696	Ca Fam	We Fil	0	20.00 MME	Private Pay	OH
05/04/2018	1	05/04/2018	CLONAZEPAM 0.5 MG TABLET	90	30	1058176	BA DOC	DrugWa	1		Comm Ins	KS
04/19/2018	1	04/19/2018	ALPRAZOLAM 1 MG TABLET	120	30	04077535	Go Doc	PillsN	0		Private Pay	OH
04/19/2018	1	04/19/2018	OXYCODONE HCL ER 40 MG TABLET	30	30	65465486	Fa Hos	Fake C	0	60.00 MME	Private Pay	OH

PDMP Report includes:

- Fill Date
- Product and strength
- Quantity dispensed
- Anticipated number of days the prescription should last
- Prescribing Physician
- Dispensing pharmacy
- Method of payment (including cash transactions)

TESTPATIENT, BETTY

Risk Indicators

NARX SCORES	OVERDOSE RISK SCORE	ADDITIONAL RISK INDICATORS (2)
Narcotic 933	Sedative 944	Stimulant 000
970 (Range 000-999)		<ul style="list-style-type: none"> 1 >= 4 opioid or sedative dispensing pharmacies in any 90 day period in the last 2 years 1 >= 5 opioid or sedative providers in any year in the last 2 years
Explanation and Guidance		

This NarxCare report is based on search criteria supplied and the data entered by the dispensing pharmacy. For more information about any prescription, please contact the dispensing pharmacy or the prescriber. NarxCare scores and reports are intended to aid, not replace, medical decision making. None of the information presented should be used as sole justification for providing or refusing to provide medications. The information on this report is not warranted as accurate or complete.

Graphs

RX GRAPH Narcotic Sedative Stimulant

All Presc...

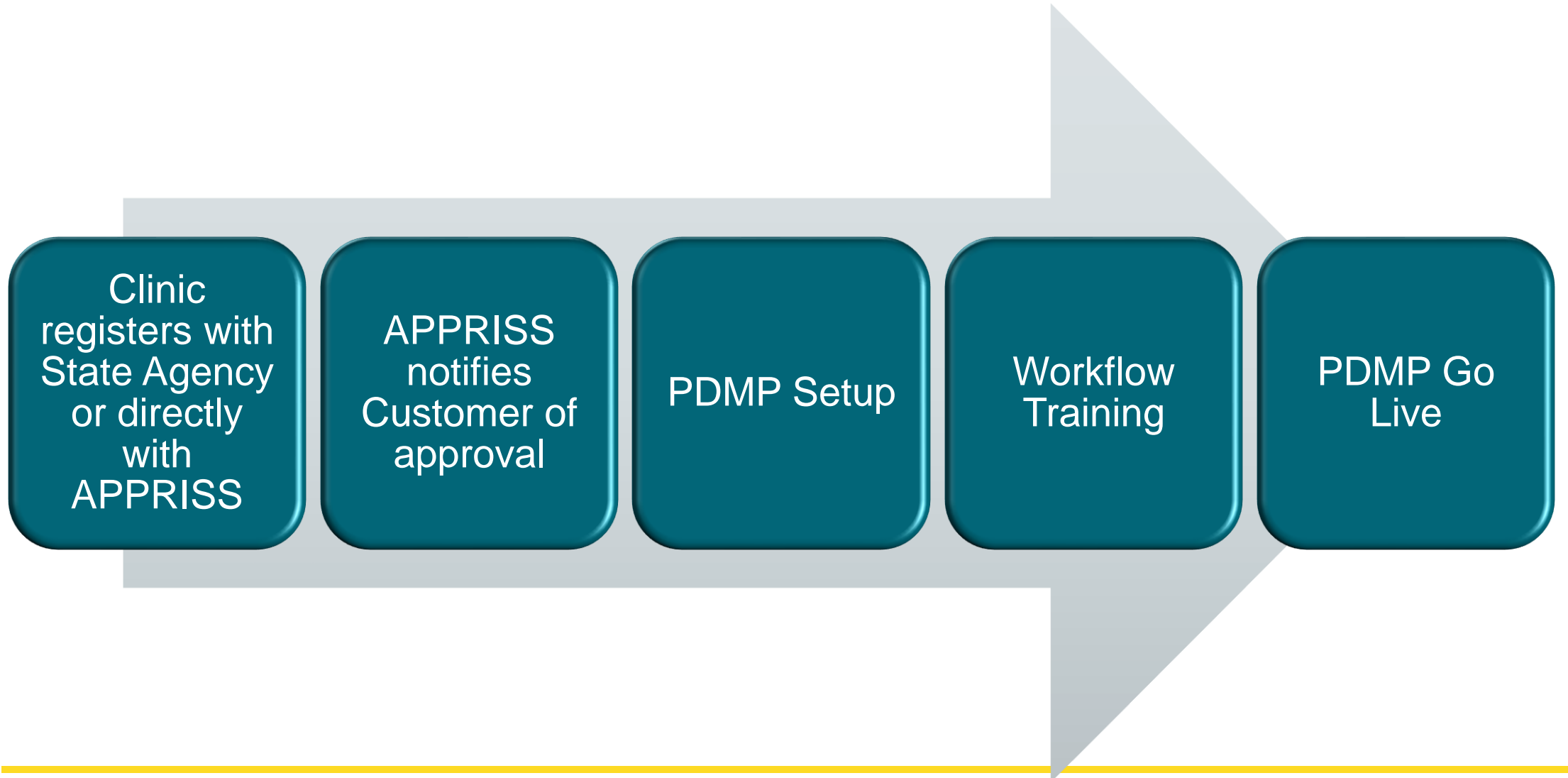
Prescriber
13 - Pill, Jo
12 - Ohio,
11 - Family
10 - Hospi
9 - Doc, G
8 - Doctor,
7 - Pill, Jo
6 - Headac
5 - Headac
4 - Hospi
3 - Doc, G
2 - Doctor,
1 - Family

Timeline

NarxCare Report includes:

- All data from PDMP report
- Narx Scores
- Predictive Risk Scores
- Red Flags
- Rx Graph

Implementing PDMP



Resources



Implementation Planning



Initiate

- Contact your State or Appriss directly based on funding availability.



Plan

- Assess hardware needs.
- Upgrade CPS/CEMR if applicable.



Execute

- Configure Centricity.
- Go-live training.
- Go-live and monitoring.

Electronic Prescribing of Controlled Substances (EPCS)



Benefits of Prescribing Controlled Substances Electronically



Enhanced care quality

- Increased patient safety
 - Reduces prescription errors and inaccuracies.
 - Reduces adverse drug and allergy interactions.¹
- Increased patient satisfaction
 - Eliminates repeat office visits.
 - Decreases Pharmacy wait times.

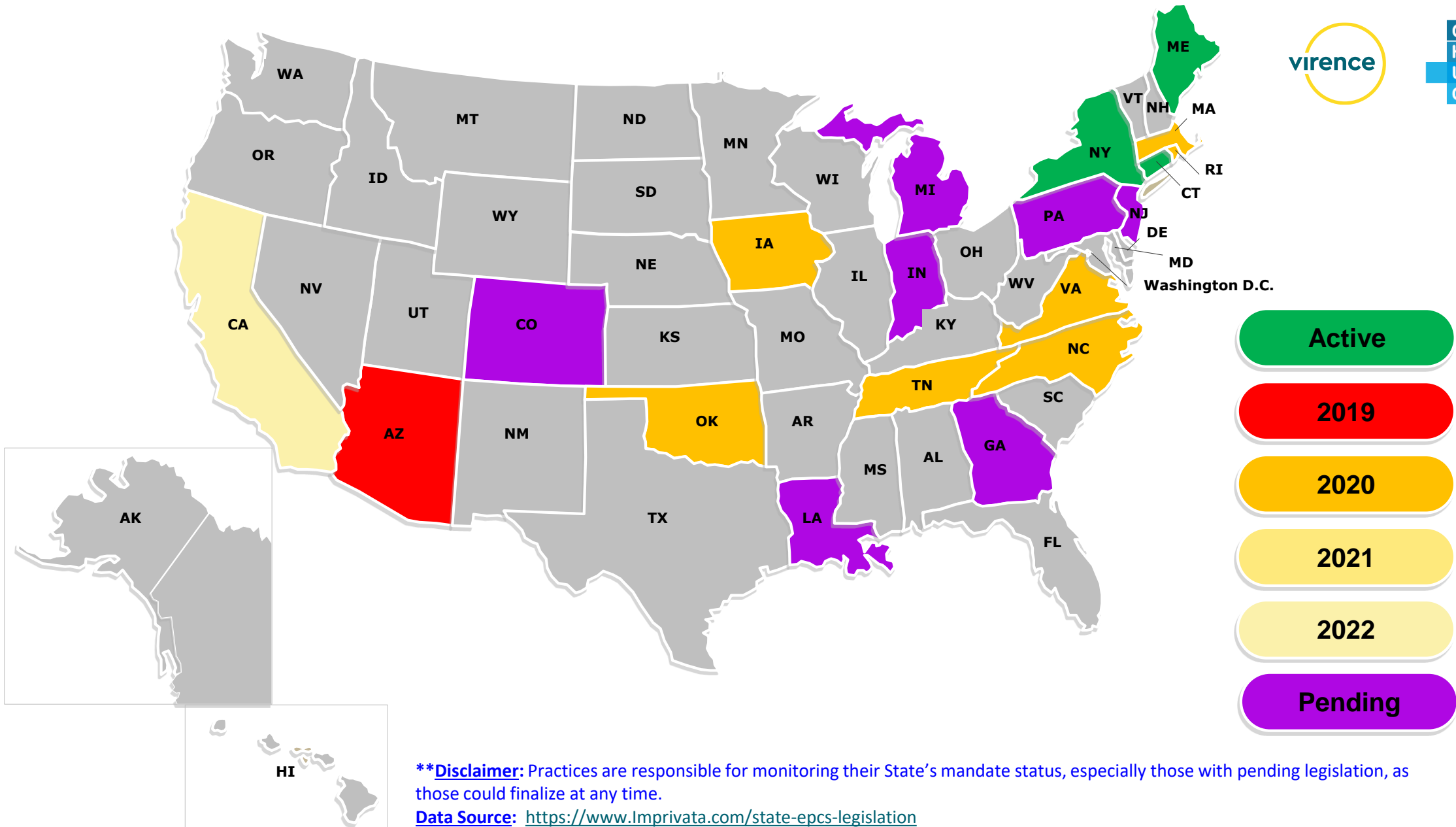


Increased efficiency

- Eliminates dual prescribing workflows.

Improved security

- Reduces the risk of fraudulent, stolen, or altered prescriptions.²
- Safeguards the Provider's DEA number(s).



****Disclaimer:** Practices are responsible for monitoring their State's mandate status, especially those with pending legislation, as those could finalize at any time.

Data Source: <https://www.Imprivata.com/state-epcs-legislation>

Individual Identity Proofing



Personal Verification

Personal Information	Government ID Information
First Name George	Photo ID Type* U.S. Military Photo ID
Last Name Washington	ID Number* 123456789
Telephone* xxx-xxx-xxxx	Expiration Date* 02/22/2022
Birth Date* 02/22/1732	
Home Address* Popes Creek Estate	
City* Wakefield	
State* Virginia	
Postal Code* 12345	

Verification Method

Online Verification*
This online verification process will ask you a series of questions in an attempt to verify your identity. If you select this option please be prepared to answer questions pulled from your credit history, to start the process you will be required to enter your social security number.

Declaration of Identity Verification*
This Declaration of Identity verification process includes downloading a document and having it signed by a notary or trusted agent.

NEXT STEP

Government ID Information

Photo ID Type*

- U.S. Passport
- U.S. Passport Card
- Permanent Resident Card or Alien Registration Receipt Card
- Foreign Passport
- CAC Card
- PIV Card
- U.S. Military Photo ID
- US Drivers license or ID card
- Federal state or local government ID
- School ID card with a photograph
- U.S. Military card or draft record
- Military dependent's ID card
- U.S. Coast Guard Merchant Mariner Card
- Canada driver's license
- Other Photo ID issued by Government Entity

Two Factor Authentication within Centricity



Jeff Abbey v12.3.1.304

No photo available **M** 37 Years 06 Jan 1981
Sex Age DOB

Outgoing authorizing provider
Cathy Durkan (888) 888-8888
123456 Main Street, Durham, NC 27712
DEA#: DE6623513 NPI: 4693067652

[Update Prescriptions for Renewal \(1\)](#)

✓ **.105 Test Pharmacy***
9999 MYLENGTHYNAME RD, wichita, MT 67002 3162622231x2171

RITALIN 10 MG ORAL TABLET qty 30 Tablet rf 0 Earliest Fill 09-26-2018

BMN 1 per day Total Disp. 1 Route: ORAL;

Controlled Substance Acknowledgement Written 09-26-2018

Cathy Durkan [DE6623513] - Authorizing provider

NOTE: To cancel authentication click in the textbox and press Escape key.

Two-factor Required

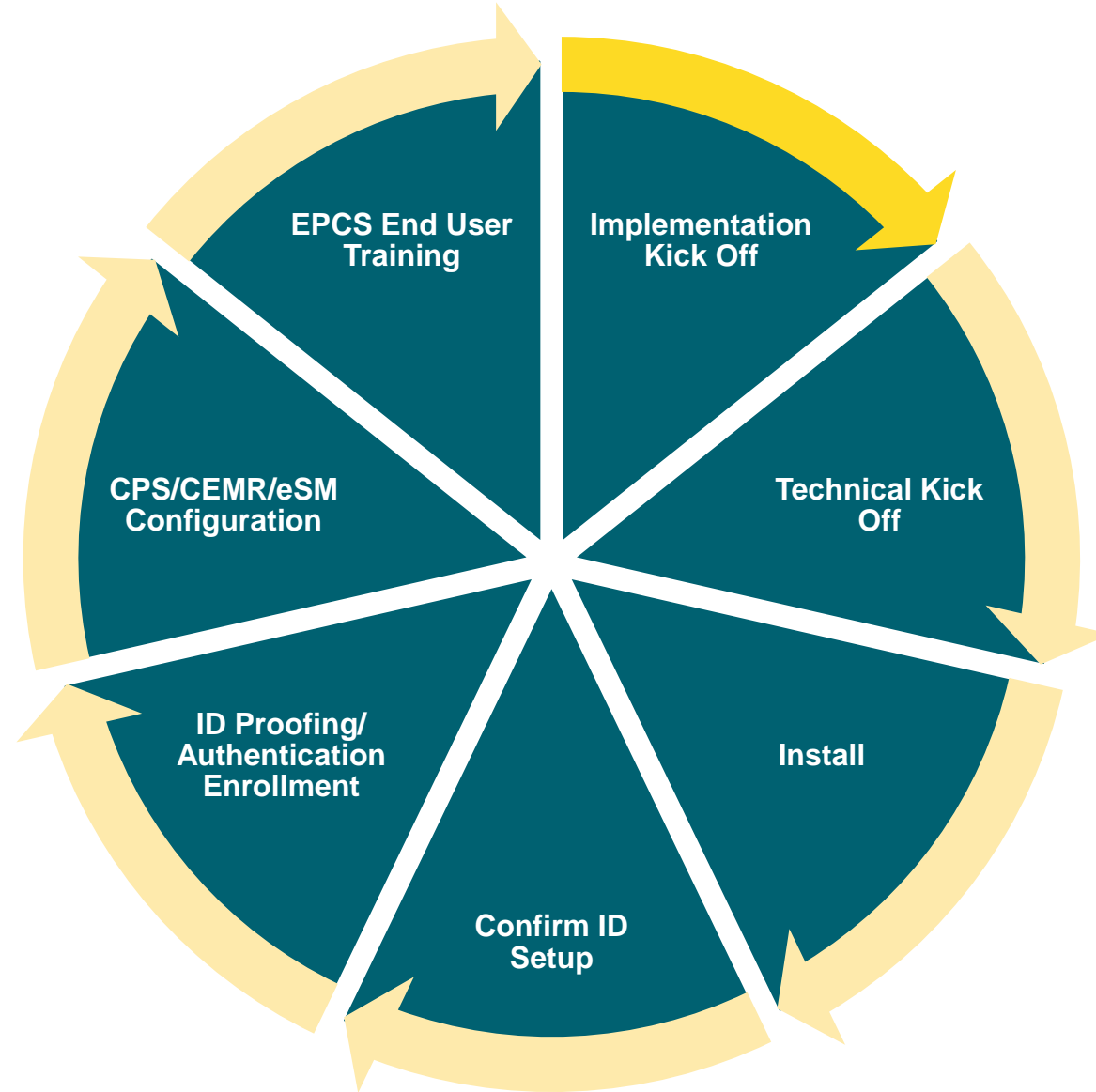
[Enroll now](#) * * * *

By completing the two-factor authentication protocol at this time, you are legally signing the prescription(s) and authorizing the transmission of the above information to the pharmacy for dispensing. The two-factor authentication protocol may only be completed by the practitioner whose name and DEA registration number appear above.

[Complete Rx Review](#) [Edit Prescriptions](#) [On Hold](#)



EPCS Implementation Process



Implementation Planning



Initiate

- Contract for EPCS
- Assess Software Needs
- CPS 12.2+ or CEMR 9.10+*
- Centricity ePrescribing 4.2+
- Active Directory

*Best practice: upgrade to latest version whenever possible



Plan

- Assess hardware needs
- Upgrade CPS/CEMR if applicable
- Install and set-up of Confirm ID Appliance and endpoint devices



Execute

- Execute
- Configure ConfirmID
- Complete Provider ID Proofing
- Centricity configuration
- Enroll/Approve providers
- Go-live training





**RALEIGH
NEUROLOGY**
ASSOCIATES, P. A.



- Multi-specialty private practice with focus on Neurology
- 2 locations in Raleigh and Durham, N.C.
- Comprised of 49 providers focused on providing comprehensive quality medical services in a friendly and knowledgeable environment for over 33 years.

All New and Refilled Medication Numbers

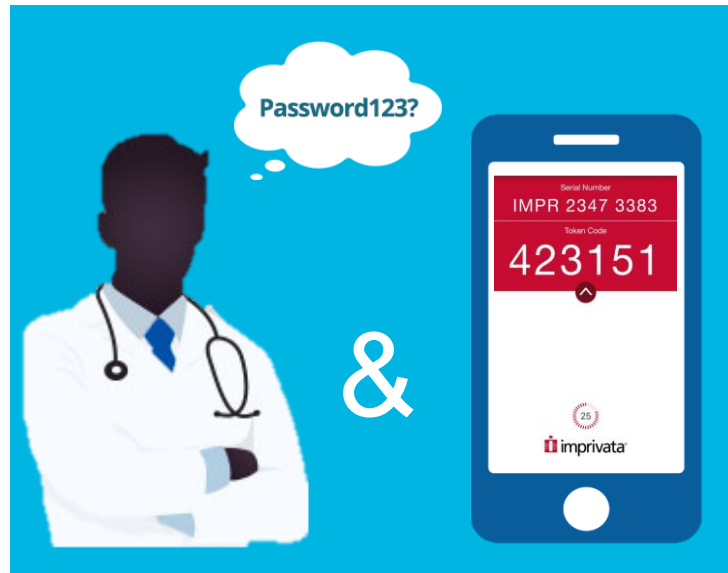
January	February	March	April	May	June	July	August
6749	7012	7528	7953	10412	9123	10712	10736

**More than 4,000
prescriptions that
would've otherwise
required in-person
pick-up.**

Scoping and Approval

Decide what will be your two factors of authentication will be early


- Something you know (eg: password)
- Something you have (eg: app on your phone)
- Something you are (eg: fingerprint)



Scoping and Approval



Executive approval to include facts regarding NC Gov. Roy Cooper and House Bill 243



Executive Summary Electronic Prescribing of Controlled Substances (EPCS) Solution Proposal

10/23/17


Proposal Approved

Proposal presented to the RNA Executive Committee on 10/26/17 by Sally John. Committee unanimously approved moving forward with the recommended solution using the FOB token to support 2-factor authentication required to support ePrescribing in Centricity.

Opportunity Summary

In an effort to combat the opioid overdose epidemic, Electronic Prescribing of Controlled Substances (EPCS) limits the occurrence of forged or stolen prescriptions and “doctor shopping” by authenticating prescribers and increasing security. Moving from paper-based prescribing to EPCS will allow providers to utilize enhanced security features as well as improved RNA workflows for prescriptions. Additionally, in June of 2017, NC Gov. Roy Cooper signed House Bill 243, Strengthen Opioid Misuse Prevention Act (STOP Act) for North Carolina, in effect making this an eventual requirement for our state.

Current Process



- Current workflow is for nursing staff or provider to print off Rx for provider to hand sign. This signed prescription is hand delivered to the patient or faxed depending on drug class.
- Prescription refills are requested to RNA electronically, by fax, portal messages or phoned. If electronic, nurse must deny the Rx and create a new prescription to be signed by the provider

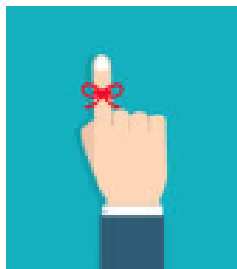
New Process

- Provider refills prescription in room with patient and performs the two-factor authentication workflow to immediately send to patient’s pharmacy
- Prescription refills will be built by RNA nursing staff regardless of requesting method (electronic, fax, etc.), sent to the provider for two-factor authentication, and then be sent electronically rather than having to print prescription.

ID Proofing- Tips and Tricks



- Prepare Providers Early
 - SSN, Home address, Mobile phone (not company mobile)
- Download app before starting
- Computer connection to your environment
- Know your credit history
- Remove blocking services



Don't Forget to talk to providers about getting a new phone!

Imprivata Admin Console

raleighneurology.com

Username

Password

Log in

imprivata


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5.3 (5.3.000.9)

Centricity End User Training



To Dr. Rhonda Gabr

Cc Amy Roberts

Message  EPCS Workflow V2.docx (7 MB)

Good Morning Dr. Gabr,

Electronic prescribing for controlled substances is now ready for you to use and the final approval is completed! I briefly mentioned the workflow to you yesterday, however, please see the attached "how to" document. Basically, it is choosing 'electronic' as your prescribing method, clicking the controlled substance box and then the two factor authentication screen will pop up. This will have you put in your new 6 digit code utilizing your key FOB and then key in your centricity password.

Two other items to note that I didn't elaborate fully on, but useful information to know:

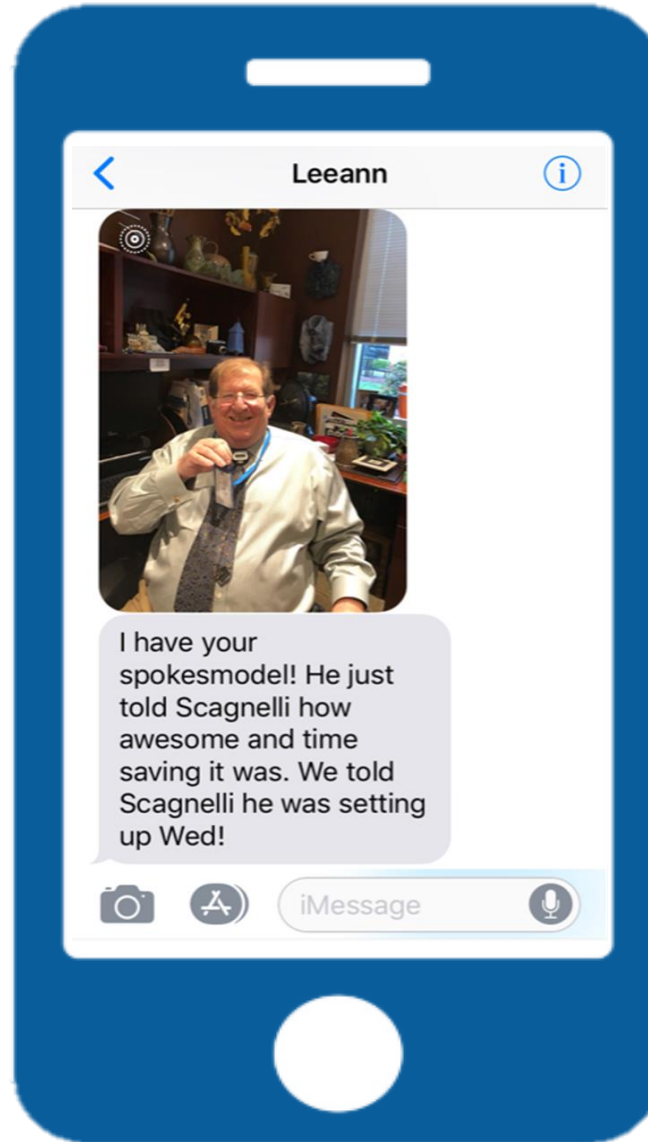
1. You will get a flag one time a month letting you know that you have an EPCS report ready to review. This is a report of all of the patient's you have utilized EPCS for during the month. If you would like to review this report, please let me know and I will show you how to access it. If you do not care, please delete the flag.
2. If you are a provider that will post date prescriptions for patients: You will not be able to do this in the same way you have in the past because if you keep the same "earliest fill date" on several of the same controlled substance prescription, all but one will fail. You will need to change the earliest fill date rather than typing a note to the pharmacy. Either myself, or Manager Amy, will be happy to show you this if the workflow applies to you.

Please let us know if you have any issues by emailing support@raleighneurology.com or call ext. 8313 or ext. 8314. watch for failures frequently and will let you know if we notice any issues on our side.

Thank you again for your time during this process & it was nice meeting you!

-Marie

The payoff is real... and worth it!



eSM Ongoing Maintenance



eScriptMessenger Version 4.2.2.1011 User: aroberts | Clinic Name: RaleighNeurologyAssociatesPA | Logout | Help

Tracking ▾ | New Rx | Refill Requests | Refill Responses | Error Messages | Benefits Messages | Message Queue

Filter Refill Responses

1 2 3 4 5 6 7 8 9 10 ... Last

Message ID	Prescriber	Pharmacy	Clinic Status	Central Status	Date Created ▲
M2jY	Freedman, S Mitchell	CAREMARK PRESCRIPTION SRVC WBP	Central acknowledged	SureScripts acknowledged	2018/04/26 09:25:23
MPQ	Gabr, Rhonda W	Walgreen Drug Store	Central acknowledged	SureScripts acknowledged	2018/04/26 09:22:21
kxo	Gabr, Rhonda W	HARRIS TEETER PHARMACY 09700069	Central acknowledged	SureScripts acknowledged	2018/04/26 09:21:19
OuE	BERTICS, GREGORY M	KROGER PHARMACY 02900354	Central acknowledged	SureScripts acknowledged	2018/04/26 09:19:17
lLc +	GABR, RHONDA	Walgreen Drug Store	Central acknowledged	SureScripts acknowledged	2018/04/26 09:13:13
ROyY	Boyce, Leslie H	Walgreen Drug Store	Central acknowledged	SureScripts acknowledged	2018/04/26 09:11:11
HMYI	BINGAMAN, BETH	CVS STORE 07548	Central acknowledged	SureScripts acknowledged	2018/04/26 08:45:57
sY	BINGAMAN, BETH	CVS STORE 07548	Central acknowledged	SureScripts acknowledged	2018/04/26 08:45:56
UsHY +	Freedman, Steven	Raleigh Neurology Pharmacy	Central acknowledged	SureScripts acknowledged	2018/04/26 08:29:49
gaza	Dunne, Laurie	CVS STORE 07043	Central acknowledged	SureScripts acknowledged	2018/04/26 08:13:41

1 2 3 4 5 6 7 8 9 10 ... Last

Number of Rows: 10 ▾

Chart Desktop

File Home Options Find Patient 3 103 Sheaffer MD, Traci

Find Patient Phone Note Refill Prescription Update View - New Alert/Flag View Alert/Flag Print Chart Summary More

Chart Documents for Edit (0) New Document

Chart Summary Problems Medications Allergies Directives Alerts / Flags Documents Flowsheet Orders Histories Protocols Graphs Handouts Registration

LucyLou TestPatient Home: (919) 555-1111 Work: (777) 777-7777 Cell Phone: (565) 634-6566 Preferred Name: LucyLou, 7 Years & 5 Months Old Male (DOB: 04/01/2011) Patient ID: 448543 RNA MD: William G Ferrell MD Home MD: TEST ACCOUNT Insurance: Medicaid Notes: EMERGENCYCONTACT:LG:764-556-5962__PATIENTMEDICATIONWAIVER Agreed to on:02/14/2018__A

Problems

Description	ICD-9	ICD-10	Onset Date	End Date	Entered By	Signed By
Multiple sclerosis	340	G35	23-Apr-2018		John R Scagnelli MD	John R. Scagnelli MD
Parkinson's disease	332.0	G20	07-Mar-2018		Suzanne Hartmann NP	Suzanne Hartmann NP
Cerebral infarction due to embolism of left middle cerebral artery		I63.412	05-Mar-2018		Suzanne Hartmann NP	Suzanne Hartmann NP
Knee pain, left	719.46	M25.562	16-Dec-2017		Amy Roberts	Amy Roberts
Neck pain	723.1	M54.2	13-Nov-2017		Amy Roberts	Amy Roberts
Numbness in feet	782.0	R20.0	11-Oct-2017		Amy Roberts	Amy Roberts
Back pain, lower	724.2	M54.5	11-Oct-2017		Amy Roberts	Amy Roberts
Balance problem	781.3	R27.9	11-Oct-2017		Amy Roberts	Amy Roberts
Myocardial infarction type 2		I21.A1	28-Sep-2017		Amy Roberts	Amy Roberts
Alcohol abuse with alcohol-induced sleep disorder		F10.182	06-Sep-2017		Amy Roberts	Amy Roberts

Medications

Description	Instructions	Route	Last Rx	Generic	Start Date	Stop Date
ADVIL 200 MG ORAL T...	take 1 PO PRN pain	ORAL	01-Jun-2018 #1 X 0	IBUPROFEN	23-May-2018	
PLAVIX 75 MG ORAL T...		ORAL	19-Dec-2017 #30 X 0	CLOPIDOGRE...	19-Dec-2017	
DOXEPIN HCL 25 MG...	take 2 pills	ORAL	17-Oct-2017 #1 X 1	DOXEPIN HCL	17-Oct-2017	

Allergies

Substance	Reaction	Criticality	Category	Onset Date
! ADVIL (IBUPR...		Critical	Drug	06-Sep-2017

Directives

Description	Start Date	Signed By	Stop Date	Entry Date	Entered B
NC CSRS REPORT	20-Oct-2017	Amy Roberts		20-Oct-2017	Amy Rober

Alerts / Flags

From	Message

Chart Desktop Chart Chart Reports Chart LinkLogic Scheduling

3:56 PM 9/24/2018

Test case created and recorded at Raleigh Neurology Associates

Summary and Next Steps



Helping you achieve the outcomes that matter most



Enhanced Care Quality



- Increase patient safety by reducing prescription errors and inaccuracies.
- Early identification of potential substance abuse.
- Remove the need for repeat provider visits for medication refills, as well as decrease wait times at the pharmacy.

Improved Provider Efficiency



- Reduce effort to obtain PDMP data, enabling early identification of potential at-risk patients.
- Eliminate dual prescribing workflows for controlled substances.

Action items



EMR and Clinical Manager

- Evaluate current workflows to determine potential time savings for your Practice.

EMR Manager

- Contact your VAR or GE Direct Salesperson for more information on these solutions.
- Research your State requirements.

IT Manager

- Evaluate environment for minimum system requirements for these solutions.
-

Resources



DEA Prescription Drug Monitoring



Healthcare Digital Community



DEA Electronic Prescriptions for Controlled Substances



Get Social!



@VirenceHealth



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Customer is responsible for understanding and meeting the requirements of achieving Meaningful Use and MACRA-related payment programs as applicable through use of HHS certified EHR technology and associated standards. Customer is responsible for understanding applicable Virence Health documentation regarding functionality and reporting specifications, including for Meaningful Use and MACRA-related payment programs, and for using that information to confirm the accuracy of attestation for Meaningful Use and MACRA-related payment programs. Customer is responsible for ensuring an accurate attestation is made and Virence Health does not guarantee incentive payments. Use of the product does not ensure customer will be eligible to receive payments.

Centricity Practice Solution v. 12.3 EHR Module and Centricity EMR v. 9.12 are ONC 2015 Edition compliant and have been certified by Drummond Group in accordance with certifiable action criteria. For additional certification and transparency information, visit www.gehealthcare.com/certifications.

Thank you!



Rhea Davis

Customer Adoption Leader
Rhea.Davis@ge.com



Amy Roberts

Health Information Systems,
Senior Manager
Raleigh Neurology Associates,
P. A.
aroberts@raleighneurology.com



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