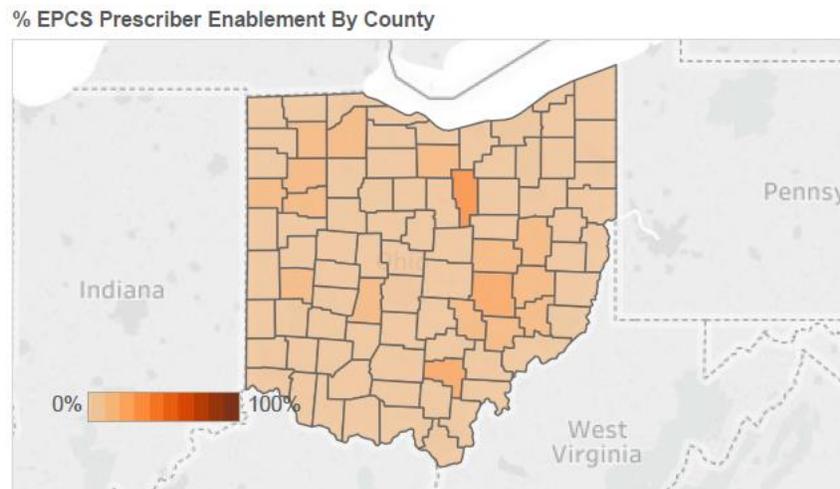


Ohio Improves but Still Lags Behind National Average on Controlled Substance e-Prescribing

By Cathy Costello, JD, Director, CliniSyncPLUS

Ohio providers are constantly improving their statistics on the number of individuals who are e-prescribing controlled substances (EPCS). However, Ohio still lags behind the national average for EPCS. According to Surescripts¹, as of the end of September 2016, there were 3,176 Ohio prescribers enabled for EPCS and 2,034 of those had prescribed a controlled substance in Ohio within the past 30 days. The number of enabled prescribers represents 6.0% of the total prescribers in Ohio (excluding dentists). On the receiving end, 91.2% of all Ohio pharmacies are now enabled to receive controlled substances through e-prescribing. The graph below shows the distribution by county of all Ohio prescribers who have been identity-proofed for EPCS. The highest percent of e-prescribers are in Ashland, Muskingum and Vinton counties.



Nationally, 12.7% of all prescribers use EPCS when prescribing controlled substances. Although Ohio's figures are low compared to the national average, Ohio's use is increasing rapidly. During the three-month period of June to September 2016, Ohio increased the number of EPCS prescribers by 517.

Most EHR systems are now certified to transmit controlled substance prescriptions electronically. An additional step to allow EPCS had to be added to the EHR workflow because the prescriber needs to be identity-proofed to minimize the possibility of diversion for nonmedical, illicit use.

Identity proofing can be done either by the hospital where the physician has privileges or by a national third party that verifies the provider's credentials. Because Meaningful Use mandates hospitals to adopt e-prescribing in the inpatient setting by 2017, there is a definite increase in hospitals that are also

¹ Surescripts is the national electronic network for prescriptions that is responsible for over 90% of all prescriptions that move electronically.

adopting EPCS. Although it is not required for Meaningful Use, many institutions are considering adoption of EPCS at the same time that they introduce traditional e-prescribing. In this way, they can minimize the training for their prescribers on eRx issues.

For ambulatory practices that are already e-prescribing, EPCS will be a natural step in their workflow process. The Prescription Drug Monitoring Program mandated in Ohio is the Ohio Automated Rx Reporting System (OARRS), which has made prescribers very sensitive to issues of opioid prescriptions and potential diversion. When prescribing a controlled substance, it makes sense to check the patient in the OARRS database, then follow up with an electronic prescription. In this way, the possibility of diversion is minimized while the patient has quicker access to the filled prescription.

The [State of Ohio Board of Pharmacy](#) worked collaboratively with the Ohio Task Force on EPCS to prepare educational information on EPCS for prescribers, pharmacists and hospitals. If you are interested in additional information, here are the prepared flyers:

- Read an [introductory story](#) on the work of the Ohio E-Prescribing Task Force.
- Here is a flyer for [physicians and other prescribers](#).
- This is a flyer for [institutional organizations](#), such as clinics and hospitals.
- Here is a flyer for [pharmacists](#)!