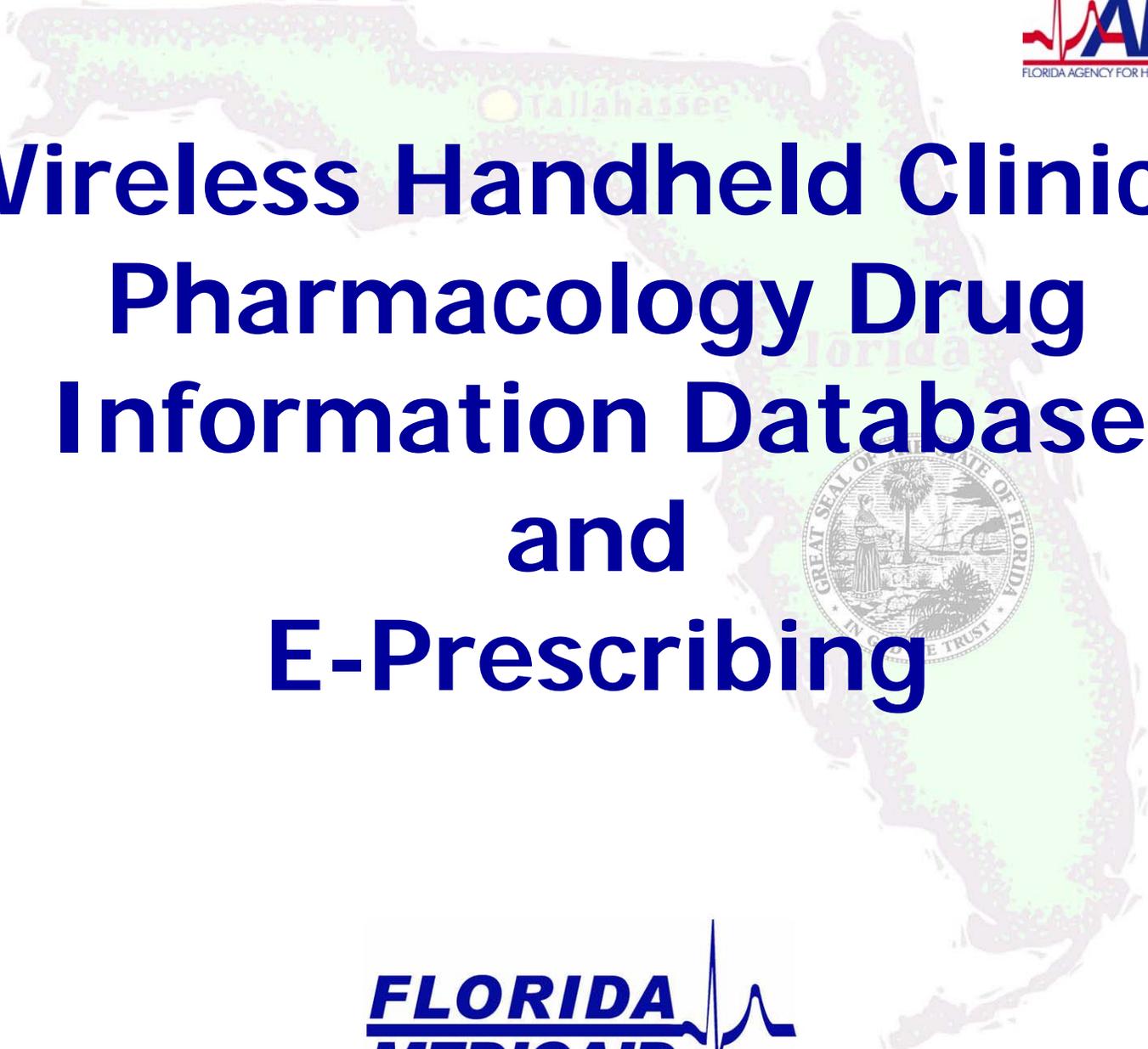


# *E-Prescribing and Healthcare Transparency in Florida Medicaid*

Federal Medicaid Commission  
Wednesday, July 12, 2006

Sybil M. Richard  
Assistant Deputy Secretary  
Medicaid Operations  
Agency for Healthcare Administration (AHCA)



# Wireless Handheld Clinical Pharmacology Drug Information Database and E-Prescribing

# *Wireless Handheld PDA*

## *The Opportunity for Change*

- ❖ In 2003, Governor Bush, the Florida Legislature and the Agency for Healthcare Administration (AHCA) took a proactive approach to providing a lever for change.
- ❖ AHCA developed a model by which clinical outcomes and Medicaid “over prescribing” could be positively impacted at the point of care.
- ❖ Florida, under the direction of AHCA, is at the forefront in using healthcare technology.

# *Wireless Handheld PDA*

## *Why Focus on Utilization?*

❖ **“Factors contributing to the increase in prescription drug expenditures include price, utilization, and product mix, with utilization as the largest contributing factor.”**

- Workshop: Agency for Health Research Quality (AHRQ) User Liaison Program (ULP), the U.S. Pharmacopeia Public Policy Center, and the Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS); held in Denver, Colorado, November 5-7, 2001.
- Presenter: David H. Kreling, Ph.D., Hemmel/Sanders Chair in Pharmacy Administration, Sonderegger Research Center, School of Pharmacy, University of Wisconsin, Madison, Wisconsin.

# *Wireless Handheld PDA*

## *Why Focus on Utilization?*

- ❖ Data from published research studies suggest that approximately 5% of preventable drug interactions lead to patient hospitalization. <sup>1, 2</sup>
- ❖ Results from such studies further suggest that hospitalizations resulting from preventable drug interactions are associated with an average increased cost per patient of \$4685 per incident. <sup>3</sup>

1. Lazarou J, Pomeranz BH, Corey PN. Incidence of adverse drug reactions in hospitalized patients: A meta-analysis of prospective studies. *JAMA*. 1998;279:1200-1205.
2. McDonnell PJ, Jacobs MR. Hospital admissions resulting from preventable adverse drug reactions. *Ann Pharmacother*. 2002;36:1331-1336.
3. Bates DW, Spell N, Cullen DJ, et al. The costs of adverse drug events in hospitalized patients. Adverse Drug Events Prevention Study Group. *JAMA*. 1997;277:307-311.

# *Wireless Handheld PDA About the Program*

- ❖ Florida uses wireless technology to make 100 days of our recipients' prescription drug history available to practitioners, which:
  - is available at the point of service
  - permits immediate utilization and compliance review
  - provides information about coverage and restrictions.
  - incorporates an e-prescribing function that permits immediate transmission of prescription authorization to the patient's pharmacy.
- ❖ Allows physician participation in prospective drug utilization review to:
  - Minimize adverse drug reactions
  - Detect overuse or under use of drugs
  - Detect duplicate therapies
  - Detect potential allergic responses
  - Screen for appropriate dosage

# *Wireless Handheld PDA About the Program*

## ❖ **Phase 1:**

- 1000 high-volume participating Medicaid providers
- Medicaid preferred drug list (PDL)
- 60-day patient specific prescription drug history
- Drug utilization reports (i.e. interaction alerts, etc.)

## ❖ **Phase 2:**

- Expand to 3000 total participating Medicaid providers
- 100-day patient specific prescription drug history
- Include electronic prescribing (e-prescribing)

# *Wireless Handheld PDA Factors to Optimizing Utilization*

## ❖ **Three Components:**

- ✓ Drug Information
- ✓ Patient Information
- ✓ Fraud and Abuse Detection

# *Florida Medicaid Handheld PDA Project General Overview*

- ❖ The PDA program provides clinical benefits by alerting the provider to potential drug-drug interactions and providing electronic prescribing to avoid costly medication errors.
- ❖ This Prescribing System will provide:
  - ✓ comprehensive recipient drug histories;
  - ✓ PDL status information;
  - ✓ clinical drug information;
  - ✓ drug-drug and drug-food interaction alerts; and
  - ✓ recommendations for alternative medications.

# *E-Prescribing General Overview*

- ❖ Supported through a Web-based, real-time prescribing system.
- ❖ The system:
  - ✓ Allows providers to “write” prescriptions from a desktop computer or PDA-prompts for patients last pharmacy.
  - ✓ Allows electronic prescription submission to any pharmacy for dispensing and adjudication.
  - ✓ Is integrated with a clinical information database, which includes screening tools to reduce the potential for medication errors before they occur.
  - ✓ Employs Clinical Pharmacology and clinical report tools, empowering clinicians to screen a prescription for adverse effects.

# *E-Prescribing*

## *General Overview (continued)*

- ❖ The Prescribing System is capable of tracking:
  - ✓ who wrote the prescription,
  - ✓ for which recipient,
  - ✓ what was ordered,
  - ✓ when it was ordered,
  - ✓ where it was sent, and
  - ✓ what time it was filled.
  
- ❖ If the recipient does not pick up the prescription, the Prescribing System is capable of notifying the doctor.

# *E-Prescribing Data Tracking Capabilities*

## ❖ **Doctors can:**

- Track individual patients.
- Track prescription status – compliance, fraud and abuse.

## ❖ **Pharmacies can:**

- Track patient's drug profiles – clinical review, fraud and abuse monitoring.
- Track incoming prescription – improve workflow, minimize wait times.

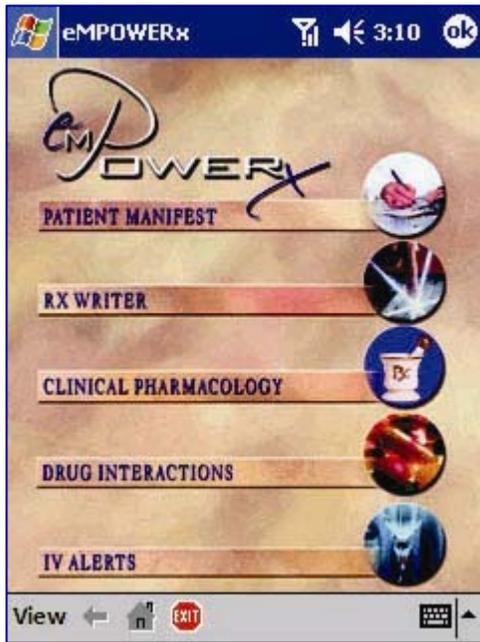
## ❖ **AHCA can:**

- Track prescriptions at the recipient, doctor, pharmacy or NDC level.
- Monitor outcomes resulting from drug therapy.

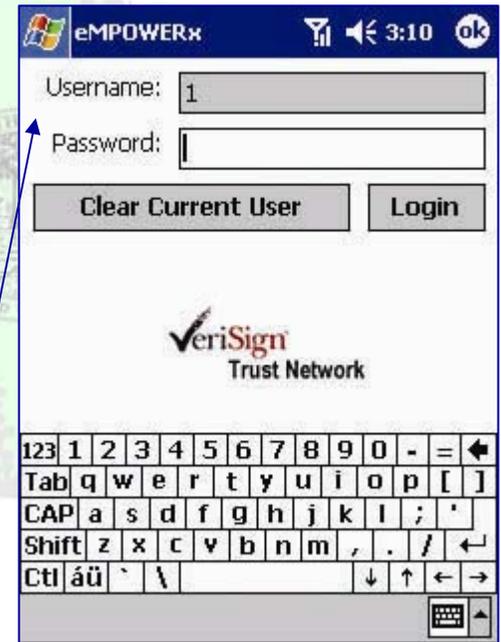


# About the Program

eMPOWERx, conceptualized by AHCA, delivers 100-day medication histories, PDL information, clinical drug data (dosing/side effects) and drug interaction reports to Medicaid providers at the point of care



Verisign, the world leader in electronic security, partnered to insure patient data was well protected





# How It Works

eMPOWERx 3:43

Update Patient Data Manage Patients

Search Patients:

ID	Last Name	First Name	Pr
201	Doe 2	John	Me
301	Doe 3	John	Me
401	Doe 4	John	Me
501	Doe 5	John	Me
601	Doe 6	John	Me
701	Doe 7	John	Me
801	Doe 8	John	Me
901	Doe 9	John	Me
2001	Female	White	Me
2503855	Guy	Old	Ot
1	HealthEase	Staywell	Sta
2135254	Jones	Thomas	Me

View

Patient's name is selected off of the list specific to each provider

eMPOWERx 3:42

Patient: Jones, Susan  
Medicaid #2195630

Medications

Medication	Date
LACTINOL-E CREME	07/21/2004
DEXTROSE 5%/WAT...	07/20/2004
GLUCOTROL XL 5MG...	07/19/2004

Brand Count: 0

View Actions

In a split second a 100-day history is pulled up and drug interaction/allergy reports are run



## *Sending an Rx*

eMPOWERx 4:05 ok

Dose: 1 Unit: Tablet

Frequency: once daily

Additional Instructions: By Mouth

Disp: 30 Refills: 0

PRN  As Directed

Medically Necessary

Back Confirm Prescription

Add Medication to Favorites

Actions

With a couple more taps the Rx is completed

The electronic Rx was reviewed, in real time, for PDL compliance, brand limits, drug interactions and patient allergies.

eMPOWERx 4:06

Confirm Prescription

Location: Default

Patient: [blurred]

Pharmacy: [blurred]

Medication: [blurred]

Sig: 1 Tablet once daily  
By Mouth As Directed

Dispense: 30

Refills: 0

Cancel Edit Sign

Actions





# Electronic Prescriptions

With the tap of a stylus, an eRx can be generated.

eMPowerRx 3:59 ok

Location	Default
Patient:	Doe, Jane
Birth Date:	04/10/1978
Pharmacy	ECKERD CORPORATION
Medication	Not Selected
Favorites	
Indication:	Not Selected

VeriSign Trust Network

Clear Prescription Next

View Actions

Patient demographics auto-populate and real time PDL and clinical decision support is provided

If there are clinical issues, the provider is alerted and clinical information is provided

eMPowerRx 2:21

### Prescription Alert

Interactions were found with this prescription. What would you like to do?

**View Interactions**

eMPowerRx 2:22 ok

**Amphetamine; Dextroamphetamine (ADDERALL 15MG TABLET) and Sertraline (ZOLOFT 25MG TABLET)**

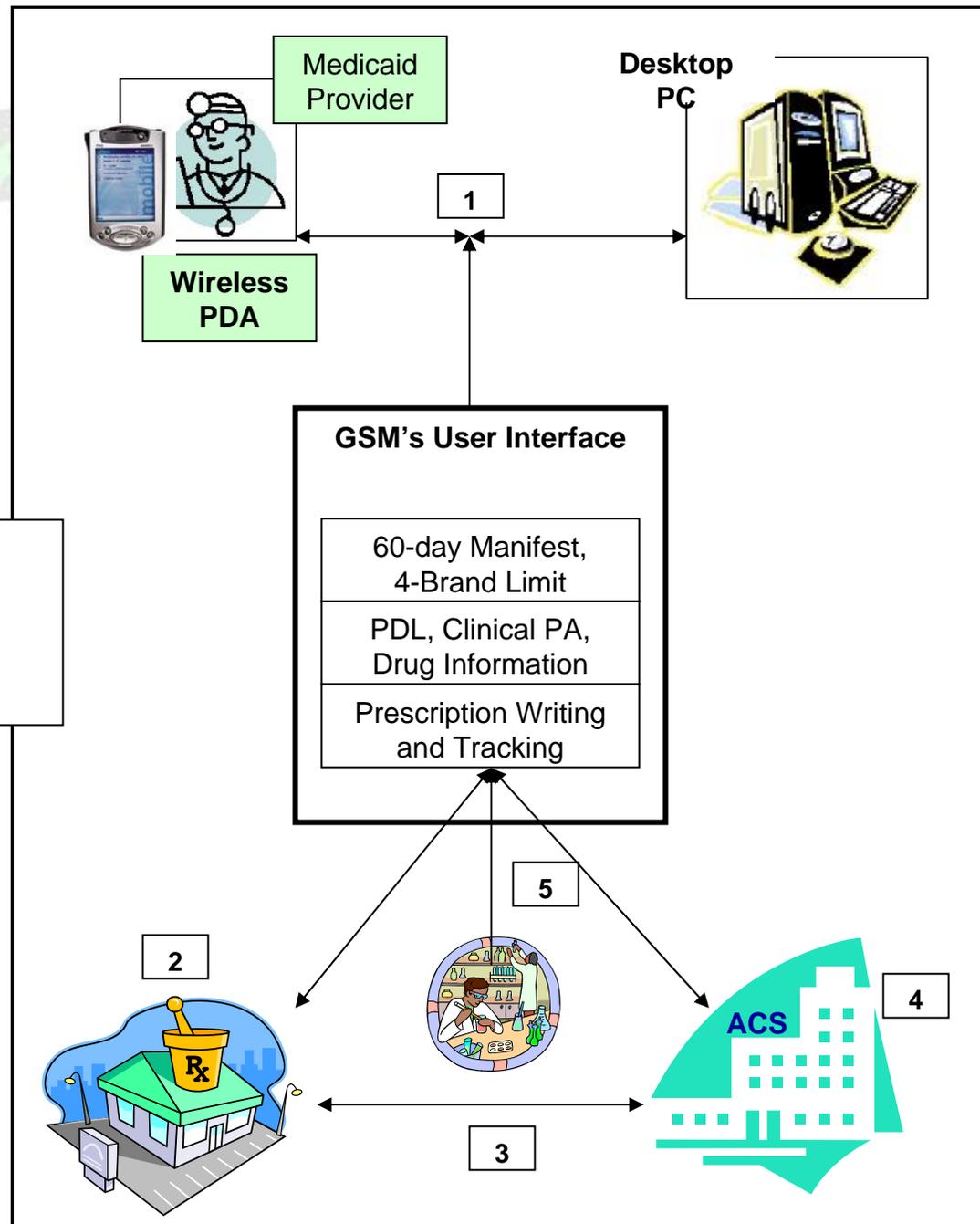
**Severity: High**

Amphetamine and dextroamphetamine may stimulate the release of serotonin in the CNS and thus may interact with other serotonergic agents, such as duloxetine, the SSRIs, nefazodone, or venlafaxine. These interactions could lead to serotonin excess and, potentially, the 'serotonin syndrome' (presenting as agitation, restlessness, aggressive behavior, insomnia, poor concentration, headache, paresthesia, incoordination, worsening of obsessive thoughts or compulsive behaviors,

**Clear Prescription**

View Actions

# Project Approach



# *E-Prescribing Savings to Florida*

- ❖ Florida providers have sent **361,586** electronic prescriptions since the inception of the e-prescribing system.
- ❖ Based on the aforementioned data, if 5% of the high and very high drug interactions identified by the Prescribing System would have otherwise led to patient hospitalization at a cost of \$4,685 per incident, the implementation and use of the Prescribing System saved the State of Florida more than \$4,833,514.50.
- ❖ Data continues to reflect that providers who use the PDA write fewer prescriptions on average.



***FLORIDA'S  
TRANSPARENCY  
INITIATIVES***

**FLORIDA  
MEDICAID** 

# *Florida's Vision*

- ❖ Collaborative Leadership between Governor Bush and Florida Legislature
- ❖ Transparent Health Care Delivery System
- ❖ “The 2004 Affordable Health Care for Floridians Act”
  - 2004 → HB 1629
  - 2006 → HB 7030
- ❖ Stakeholder Advisory Council
- ❖ Consumer-Focused Websites
- ❖ Informed Choice of Healthcare Providers

# *Transparency Initiatives: Pieces of the Puzzle*

- ❖ **Prescription Drugs Retail Prices**

[www.MyFloridaRx.com](http://www.MyFloridaRx.com) (July 2005)

- ❖ **Health Care Facilities**

[www.FloridaCompareCare.gov](http://www.FloridaCompareCare.gov) (November 2005)

- Hospitals

- Ambulatory Surgery Centers (ASCs)

- ❖ **Health Plans** (October 2006)

- ❖ **Physicians** (Spring 2007)

# *Stakeholders: Building Consensus*

Agency for Health Care Administration (AHCA)



Comprehensive Health Information System  
(CHIS) Advisory Council



Technical Workgroups:

- Health Plan
- Facilities/Ambulatory Surgical Center
- Hospital Acquired Infections
- Physicians
- Public Relations

# ***Building Consensus: Each Stakeholder Brings Unique Ideas and Perspectives***

Participating representatives include:

- ✓ Hospitals
- ✓ Physicians
- ✓ Health Plans
- ✓ Consumers
- ✓ Employers
- ✓ Academic
- ✓ State Agencies

# *Pieces of the Puzzle*

[www.FloridaHealthStat.com](http://www.FloridaHealthStat.com)

- ❖ Where Florida's Health Data resides, including:
  - list of licensed health care facilities and providers in Florida;
  - detailed information on patient data from hospitals and ambulatory surgery centers;
  - information on insurance programs such as Medicare, Medicaid, and KidCare;
  - prescription drug programs;
  - concerns for seniors and for families;
  - consumer publications; and
  - statistical health reports.

# *Pieces of the Puzzle*

*[www.FloridaCompareCare.gov](http://www.FloridaCompareCare.gov)*

*(a component of [www.FloridaHealthStat.com](http://www.FloridaHealthStat.com))*

- ❖ Collaborative stakeholder approach
- ❖ Consumer-friendly, dynamic database and verbiage
- ❖ Helpful information for consumers' health care decisions
- ❖ Assists self-payer patients as well as those with insurance
- ❖ Customer Satisfaction Survey
- ❖ Used 3M Health Information Systems Software for risk-adjustment for comparing facilities.
- ❖ Agency for Health Research and Quality (AHRQ) performance measures and quality indicators.

# *Phase 1 of Website Release*

## *(in-patient hospitals)*

- ❖ Total Number of Hospitalizations
- ❖ Average Charges Risk Adjusted
- ❖ Average Length of Stay Risk Adjusted
- ❖ Readmission Rates Risk Adjusted
- ❖ Complication/Infection Rates
- ❖ Mortality Rates
- ❖ Hospital Characteristics/Services

# *Pieces of the Puzzle*

*[www.MyFloridaRx.com](http://www.MyFloridaRx.com)*

- ❖ Consumers may shop for the lowest price for top 50 prescription name-brand and generic drugs.
- ❖ Compare pharmacy store prices on a local and statewide level (by zip code).
- ❖ Updated monthly.
- ❖ Data source: Usual and Customary Charges (retail prices) billed to Florida Medicaid.
- ❖ Collaborative effort of AHCA and the Office of Attorney General.

# *Future Plans*

1. Outreach and Education
  - Consumers
  - Employers, payers
  - Providers
  - Media
2. Continue long-term relationships
  - Comprehensive Health Information System (CHIS) Advisory Council, Workgroups
  - Providers: Hospitals, Physicians
  - Consumers: focus groups, surveys
  - Employers

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**Sybil M. Richard**  
Assistant Deputy Secretary  
Medicaid Operations  
Agency for Healthcare Administration (AHCA)

**Phone: (850) 488-3560**

**[richards@ahca.myflorida.com](mailto:richards@ahca.myflorida.com)**

**Agency Website: <http://www.fdhc.state.fl.us/index.shtml>**