

# **Real-Time Prescription Benefits**

Access and Onboarding Handbook



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## **Part 1: Introduction**

RTB information is now available within the point-of-prescribing workflow in selected EHRs and e-prescribing solutions.

Providing RTB information at the point of prescribing provides the following benefits for physicians:

- Proven savings to patients
- Up-to-the minute information based on the patient's specific plan design and coverage
- Clinically mapped brand and generic alternatives drugs

Physicians who write prescriptions using an EHR that has been enabled with RTB can accomplish the following:

- Know if the drug is covered and the patient's out-of-pocket cost
- See and select clinically appropriate lower-cost brand or generic alternatives
- Know which therapy options require prior authorization (PA) or have other restrictions
- Process a PA in real-time from the EHR (if the EHR also supports ePA)

The purpose of this document is to provide an overview of key steps required for you and/or your health system to access and onboard RTB. The process will vary based on the size and complexity of your organization, and the type of EHR used for electronic prescribing.

## Part 2: How does RTB work within e-prescribing?

RTB is set up within the electronic prescribing workflow you perform already in your EHR. EHR vendors access RTB information from CVS Caremark<sup>®</sup> through Surescripts – which is the national network for electronic prescribing. The RTB data transaction flow is as follows

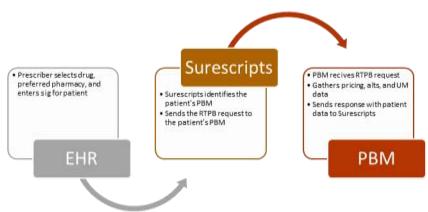
- <u>The physician enters prescription information (drug, quantity, sig, day supply, pharmacy) into</u> the e-prescribing workflow of the EHR
- The EHR e-prescribing system triggers a data call into Surescripts
- Surescripts transmits this data call into CVS Caremark
- <u>CVS Caremark "mock adjudicates" this drug to return back</u>
  - <u>Patient cost and coverage information of *requested drug for*:</u>
    - Requested pharmacy
    - <u>90-day supply at mail (if applicable)</u>



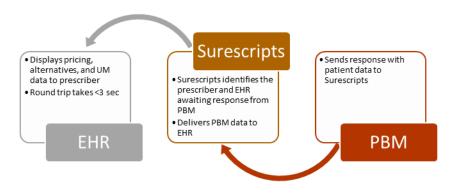
- <u>90-day supply at retail (if applicable)</u>
- Patient cost of *up to 5 clinically appropriate alternatives* covered by the patient's plan for:
  - Requested pharmacy
  - <u>90-day supply at mail (if applicable)</u>
  - <u>90-day supply at retail (if applicable)</u>
- The information is sent back to the EHR through Surescripts
- <u>The EHR presents this information within the e-prescribing workflow with an average response</u> time of 3 seconds or less.

#### **RTB Transaction Flow**

#### Flow of RTB Request from Prescriber EHR to PBM



Flow of RTB Response from PBM to Prescriber EHR:



From a physician EHR perspective, EHRs can be either *server-based* or *cloud-based*.

Server-based EHRs, such as Epic, Cerner, Allscripts TouchWorks and NextGen are managed on premise by your organization's information technology (IT) team. In order for RTB to become available in your EHR, IT must first upgrade your EHR to the latest version. EHR upgrades are large-scale IT projects, and typically take 3-5 months to complete, depending on the size/scale of your organization.

By comparison, cloud-based EHRs such as Practice Fusion, athenahealth and Modernizing Medicine are accessed via a web browser like Internet Explorer, Chrome, Firefox or Safari, from your laptop or



desktop computer in your office. Cloud-based EHRs are fully managed and supported by the EHR vendor, rather than an in-house IT staff. Cloud-based EHRs do not require you or your organization to take action to upgrade your EHR, other than to make sure you are logged off overnight when the vendor releases new features/functions in their system. Cloud-based EHRs notify customers in advance when new features/functions are being released, to ensure you and your staff prepare accordingly.

The table below lists EMR and e-prescribing solution vendors that are enabled for RTB *as of March,* **2019.** Server-based EHRs have the version number listed in the 'version' column. If you use one of the server-based EHRs, Part 4 addresses what to do if you are not on the right version of the EHR.

Vendor	Version	Cloud based
Electronic Health Records		
AdvancedMD Advanced EHR	N/A	✓
Allscripts Healthcare Solutions – Enterprise	N/A	✓
EHR		
Aprima	V2016.0.1612.2146	
Cerner Millennium	V2015.01.25	
Claimat eMedicalNotes	V3.0	
Comtron Medgen EHR	N/A	$\checkmark$
Epic EpicCare	Epic 2018	
MD Office Manager GeeseMed EHR	N/A	$\checkmark$
Medical Office Solutions Adaptamed	N/A	$\checkmark$
MedNet Medical Solutions emr4MD	N/A	$\checkmark$
Modernizing Medicine EMA	N/A	$\checkmark$
MTBC ChartsPro	N/A	$\checkmark$
NextGen	N/A	
Office Ally EHR 24/7	N/A	$\checkmark$
Practice Fusion	N/A	$\checkmark$
Quest Quanum	N/A	$\checkmark$
Waiting Room Solutions WRS Health	V5.0	
E-prescribing solutions		
Allscripts ePrescribe	N/A	$\checkmark$
DrFirst Rcopia	N/A	✓
eazyScripts	N/A	✓
InstantDx OnCallData	N/A	<ul> <li>✓</li> </ul>
MD Toolbox	N/A	<ul> <li>✓</li> </ul>
Specialty Portal/Hub solutions		
Asembia	N/A	$\checkmark$
United Biosource	N/A	$\checkmark$
VirMedica	N/A	$\checkmark$



#### Upcoming EHR vendors adding RTB capabilities (estimated timeline)

Vendor	Version	Cloud based	Est. Timeline
Electronic Health Records			
eClinicalWorks	TBD	✓	Q1 2020
Netsmart	N/A		Q1 2020
Meditab	N/A		Q1 2020
NewCrop	N/A		Q1 2020

Surescripts list of EHR vendors enabled for RTB can be found via the link below: http://surescripts.com/network-alliance/real-time-prescription-benefit-technology-vendors/.

## Part 3: What to do if you are on the right version, but do not see RTB?

Physicians and administrators at health care organization with an Information Services/IT department are advised to follow existing processes to request new functionality in their EHR and/or to find out when new EHR functionality will be made available.

If RTB was not made available with the EHR upgrade, your organization may have chosen to defer turning on RTB until the upgrade is complete, and manage turning on RTB as a separate, and significantly smaller, IT project. Your organization's ambulatory EHR team, with the assistance of the EHR vendor, will enable EHR settings and perform comprehensive testing to ensure RTB is working properly *AND* will not disrupt other related clinical workflows in the EHR. These smaller IT projects can range between 20-50 resource hours.

## Part 4: What if you are not on the right version of your EHR?

- > If you are on one of the EHRs in the list above, but unclear about the version you are on:
  - o Contact your IT Help Desk and ask which EHR version is currently being supported
- If you are on one of the EHRs in the list above, and IT confirmed you are on not on the right version:
   Your IT department will have upgrade your organization's EHR to the latest version

Your organization's IT administrator can provide further details as to when your organization will be upgrading to the latest version, listed above. The chief medical information officer (CMIO) at your organization is a physician colleague who can share insight into when the next EHR upgrade is scheduled to occur.

If your IT administrator has further questions, have them contact CVS Health's Account Manager, Jeff Schultz at Surescripts at (651) 855-3000, who can put your IT administrator in contact with your organization's Surescripts representative.



## Part 5: What to do if you DO NOT see your EHR on the RTB enabled list?

RTB is available from EHRs that cover 80 percent of all prescribers. However, there are EHR vendors that have not yet contracted with Surescripts to accept and display RTB information.

Should you find that your EHR is not on the list of vendors contracted and/or enabled for RTB (in Part 2 above), contact your EHR vendor and ask that they engage with Surescripts to provide RTB information.

Vendors are advised to submit a request for Surescripts certification on Surescripts website: <u>http://surescripts.com/enhance-prescribing/e-prescribing/#e\_prescribing\_cert\_form</u>. Vendors can also contact Surescripts at (651) 855-3000 and ask to speak CVS Caremark's Account Manager, Jeff Shultz, to connect your vendor with the correct Surescripts representative.

Content you can use in an email to your EHR vendor can be found in Appendix B at the end of this document.

#### Part 6: FAQs

- Will the prescriber be charged for using RTB?
  - No. EHR vendors are making RTB available as a new standard feature covered under the vendor's Master Service Agreement
  - Standard features are covered by license/maintenance or subscription fees vendors charge prescriber organizations for the use of their EHR software
  - Consult with your vendor's account manager to determine whether any interfaces need to be purchased to support the RTB service
- My organization contracts directly with Surescripts for electronic prescribing. Do I need to sign any paperwork with Surescripts for RTB?
  - Only organizations that already contract directly with Surescripts for e-prescribing services (i.e., organizations that use the Epic EHR) will need to sign a contract amendment to add the RTB service to the existing set of services Surescripts provides the organization. As referenced above, Surescripts does not charge prescribers a fee for RTB.
- Once my organization upgrades my EHR to the latest version, will I start receiving RTB information?
  - Not necessarily. EHRs such as Epic and Cerner allow their clients to determine when turning on RTB is right for them. Please see part 3 of this document on: "What to do if you are on the right version, but do not see RTB?"
- How long will it take to turn on RTB in my EHR?
  - EHR upgrade projects can take 2-3 month, or longer depending on the organization and the EHR being used. In contrast, cloud-based EHRs do not require this process.
  - Turning on RTB at organizations that have upgraded to the latest version is an IT project ranging from 20-50 resource hours
- How do I know if I am on a cloud-based EHR?
  - If you log into a website to use your EHR, you are likely on a cloud-based system. If you are still not sure, please contact your EHR system administrator or vendor.
  - o Reference the table on pages 2 and 3 above for a list of cloud-based EHRs



- Is RTB information specific to a plan member? How does it take into account member's formulary information?
  - CVS Caremark's RTB capability is powered by the company's proprietary engine, Script Intelligence, and database of clinically mapped therapeutic alternatives. The database displays up to five clinically appropriate lower-cost brand or generic alternatives with equal or better formulary status on the patient's specific pharmacy benefit design, and the real-time, out-of-pocket cost for each based on where they are in their deductible. In addition, information on any restrictions is displayed, such as whether or not a PA is required.
- Is RTB available for all members CVS Caremark provides PBM services for?
  - o Yes.
- Besides prescribers, is RTB information available to members or pharmacists?
  - Yes. CVS Caremark members can see RTB information on Caremark.com and the CVS Caremark smartphone app. CVS pharmacists can see RTB information for any CVS Caremark member at all CVS Pharmacy<sup>®</sup> locations nationwide.



## **Appendix A. Supplemental Epic Information**

#### Awareness and Prioritization:

- Epic "It's Possible" Video
- <u>Prepare for Future Development: Real-Time Prescription Benefits in Epic 2018</u>

#### Contracting

Epic's approach is unique compared to other EHR vendors. Where other EHR vendors manage connectivity with Surescripts for e-prescribing services, including RTB on behalf of their clients, prescriber organizations which use Epic contract directly (individually) with Surescripts and manage their own connectivity to the Surescripts Network. The steps for Epic clients to pursue RTPB are as follows:

- 1. **IT leadership** contact their **Epic account manager** to inform the vendor they intend to implement RTB. Two additional interfaces will need to be purchased from Epic for RTPB.
- 2. **IT leadership** contact their **Surescripts account manager** for the contract amendment for the RTB service. Surescripts does not charge prescriber organizations a fee for the RTB service.

IT leadership will coordinate with a member of the organization's General Counsel as necessary for contract signatures.

#### Implementation (for IT):

- Nova release note <u>646882</u>
- <u>Set Up Clinical Estimates for Prescriptions</u>
- <u>Outgoing Real-Time Prescription Benefit Inquiry and Response Interface Reference</u> <u>Guide</u>
- Interfaces Build Wizard

#### Level of Effort Estimates:

- EpicCare Ambulatory Resource (~ 6 hrs)
- Bridges/EDI Resource (approximately (~35 hrs)
  - Use the Surescripts Admin Console to run through a handful of RTB test scripts
  - Work with your Epic Bridges TS representative to perform connectivity testing
  - Epic's Ambulatory TS will assist in coordinating and facilitating testing with Surescripts in Surescripts staging environment
  - Total hours for both build and testing will vary by prescriber organization



## Appendix B: Letter template to your EHR vendor

## The following language can be used to copy-paste into a letter or email to your EHR vendor, or into your EHR vendor's standard ticketing system for requesting EHR enhancements:

I would like the Real-Time Prescription Benefits service to be added as a standard feature in my EHR's electronic prescribing workflow as soon as possible.

In addition, it is critical to my patients and my practice that Real-Time Prescription Benefits information be provided by Surescripts. Many of my patient's pharmacy benefits are managed by CVS Caremark. Surescripts Real-Time Prescription Benefits service is the only solution on the market which provides patient cost, formulary alternatives, and prescription coverage details in real time directly from CVS Caremark.

The process to request certification for Surescripts Real-Time Prescription Benefits service can be started from Surescripts website: <u>http://surescripts.com/enhance-prescribing/e-prescribing/#e\_prescribing\_cert\_form</u>, or contact CVS Health's Account Manager from Surescripts, Jeff Schultz, at (651) 855-3000 to connect you with the correct Surescripts representative.