



Medicare Electronic Prescribing (eRx) Incentive Program

Section 132 of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) authorizes a new and separate incentive program for eligible professionals who are successful electronic prescribers as defined by the MIPPA. Eligible professionals do not need to participate in PQRI to participate in the Electronic Prescribing (eRx) Incentive Program.

Eligible professionals who participate in this program can **earn up to 1% of the total estimated Medicare Part B charges** for furnished services in 2011 and 2012. In 2013, the incentive will be reduced to 0.5%. Beginning in 2012, **eligible professionals who are not using electronic prescribing will receive a payment adjustment or penalty, 1% less on all Medicare services in 2012, then 1.5% less in 2013 and 2% less in 2014.**

No Sign Up or Pre-Registration

There is no sign up or pre-registration for individual eligible professionals to participate in the eRx Incentive Program. However, there are certain limitations for who can qualify for eRx. First, an eligible professional must have and use a qualified eRx system and report on his or her adoption and use of the eRx system. Second, the eligible professional must meet the criteria for successful electronic prescriber specified by CMS for a particular reporting period. Finally, at least 10% of a successful electronic prescriber's Medicare Part B covered services must be made up of codes that appear in the denominator of the eRx measure.

What are the requirements for an eRx system?

- It must be able to generate a complete active medication list incorporating electronic data received from applicable pharmacies and pharmacy benefit managers, if available.
- Be able to select medications, print prescriptions, electronically transmit prescriptions and conduct all alerts.
- The system must be able to provide information related to lower cost, therapeutically appropriate alternatives (if any).
- Be able to provide information on formulary or tiered formulary medications, patient eligibility, and authorization requirements received electronically from the patient's drug plan, if available.

Who is eligible?

- Doctor of Medicine
- Doctor of Osteopathy
- Doctor of Podiatric Medicine
- Doctor of Optometry
- Doctor of Oral Surgery
- Doctor of Dental Medicine
- Doctor of Chiropractic
- Physician Assistant
- Nurse Practitioner
- Clinical Nurse Specialist
- Certified Registered Nurse Anesthetist
- Certified Nurse Midwife
- Clinic Social Worker
- Clinical Psychologist
- Registered Dietician
- Nutrition Professional
- Audiologists
- Physical Therapists
- Occupational Therapist
- Qualified Speech-Language Therapist

Instructions for E-Prescribing

In order to report this measure, a qualified eRx system that meets the aforementioned requirements must have been adopted.

The measure is to be reported for those patient visits that meet the denominator coding criteria for which an individual eligible professional has electronically prescribed at least one prescription

for a patient with Medicare Part B. Denominator coding criteria for this measure includes various ambulatory care settings. There is no specific diagnosis required for this measure. The individual eligible professional who generates at least one eRx associated with a patient visit on 25 or more unique events during the reporting period (January 1 through December 31) will be considered successful electronic prescribers. Faxes do not qualify as successful electronic prescribing. Successful electronic prescribers who also have at least 10% of their Medicare Part B charges comprised of the codes in the denominator of the measure will be incentive eligible.

Three Options for Reporting

1. Claims based reporting of the eRx measure. Report only one G-code (G8553).
2. Registry based reporting using a CMS-selected registry to submit 2011 data to CMS during the first quarter of 2011.
3. EHR based reporting using a CMS-selected electronic health record product, submitting 2011 data to CMS.

Hardship Codes

There are some cases where eligible professionals will not receive a penalty if they do not use e-prescribing. There are codes which are to be used **ONLY** when an eligible professional wished to request a significant hardship exemption from the application of the 2012 payment adjustment because the professional is unable to submit prescriptions electronically due to system hardship. In those cases the following codes must be used:

- **G8642:** The eligible professional practices in a rural area without sufficient high speed internet access and requests a hardship exemption from the application of the payment adjustment under section 1848(a)(5)(A) of the Social Security Act.
- **G8643:** The eligible professional practices in an area without sufficient available pharmacies for electronic prescribing and requests a hardship exemption from the application of the payment adjustment under section 1848(a)(5)(A) of the Social Security Act.