

## 2010 Electronic Prescribing Incentive Program – Adoption/Use of Medication Electronic Prescribing Measure Release Notes

CMS is pleased to announce the release of the 2010 Electronic Prescribing (eRx) Incentive Program – Adoption/Use of Medication Electronic Prescribing Measure Release Notes. Measure developers, professional organizations, and other eRx stakeholders have provided comment, clarifications, and technical corrections. The list below details changes to this existing measure made since the release of the 2009 eRx Measure Specification.

- **Reporting Option Updates**
  - 2010 REPORTING OPTIONS FOR THE ELECTRONIC PRESCRIBING MEASURE: “ONLY FOR INDIVIDUAL CLAIMS-BASED AND REGISTRY-BASED REPORTING (*THESE SPECIFICATIONS DO NOT APPLY TO THE FOLLOWING REPORTING OPTIONS: EHR-BASED SUBMISSION OR GROUP PRACTICE REPORTING OPTION [GPRO].*)”
  - Added “Qualified” to ELECTRONIC PRESCRIBING (eRx) SYSTEM MUST HAVE BEEN ADOPTED
- **Instruction Updates**
  - Updated: “In order to report this measure, a qualified eRx system that meets the above 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”
  - Added: “The diagnosis associated with the patient encounter that requires the eRx may be used to report the eRx G-code. 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 will be eligible for incentive payment”
  - Added to Measure Instructions, “Measure Reporting via Registry,” and “Measure Reporting via Claims”
  - Added to Measure Reporting via claims, “(Faxes do not qualify as electronic prescribing)”
  - Added to Measure Reporting via Registry, “A denominator CPT code and an electronically generated and transmitted prescription (not faxed) are required to report the measure”
- **Numerator Updates**
  - Updated: “A qualified eRx system (as specified above) has been adopted and the following G-code applies to the patient visit”
  - Added to the Numerator coding: “and Transmitted” via Qualified eRx System
  - Added to the Numerator coding: G8553: At least one electronic prescription created during the encounter was generated and transmitted electronically using a qualified eRx system
  - Deleted from Numerator coding: G8443, G8445, G8446

- **Denominator Updates**
  - Deleted from the Denominator Coding: CPT codes 99241, 99242, 99243, 99244, 99245
  - Added to the Denominator Coding: CPT codes 90862, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350
- **Definitions Updates**
  - Added Definition: **Electronic Prescribing Event** – For the purposes of this measure, an electronic prescribing event includes all prescriptions electronically prescribed during a patient visit.
  - Added Definition: **Successful Individual Electronic Prescriber – Incentive Eligible** – A successful individual eRx prescriber, eligible to receive an incentive payment, must generate and report one or more eRx associated with a patient visit, a minimum of 25 unique visits per year. Each visit must be accompanied by the eRx G-code attesting that during the patient visit at least one prescription was electronically prescribed. Electronically generated prescriptions not associated with a denominator eligible patient visit do not count towards the minimum of 25 different eRx events. Additionally, 10% of an eligible professional's Medicare Part B charges must be comprised of the codes in the denominator of the measure to be incentive eligible.
  - Updated Definition: **DME Supplies** – Prescriptions for diabetic supplies may be electronically prescribed. Some pharmacies may require additional documentation secondary to internal policies which may be mandatory in case of audits; others may require a signed copy of the order with signature to be kept for verification purposes.
- **Global edits:**
  - Replaced e-prescribing with electronic prescribing or eRx throughout the document
  - Replaced “providers” with eligible professionals throughout the document
  - Added “Individual” before eligible electronic (or eRx) prescriber