Definition of Terms

**Permissible Prescriptions** – The concept of only permissible prescriptions refers to the current restrictions established by the Department of Justice on electronic prescribing for controlled substances in Schedule II-V. (The substances in Schedule II-V can be found at [http://www.deadiversion.usdoj.gov/schedules/orangebook/e_cs_sched.pdf](http://www.deadiversion.usdoj.gov/schedules/orangebook/e_cs_sched.pdf)). Any prescription not subject to these restrictions would be permissible.

**Prescription** – The authorization by an EP to a pharmacist to dispense a drug that the pharmacist would not dispense to the patient without such authorization.

Attestation Requirements

**NUMERATOR / DENOMINATOR / EXCLUSION**

- **DENOMINATOR**: Number of prescriptions written for drugs requiring a prescription in order to be dispensed other than controlled substances during the EHR reporting period.
- **NUMERATOR**: Number of prescriptions in the denominator generated and transmitted electronically.
EXCLUSIONS:

EPs who write fewer than 100 prescriptions during the EHR reporting period would be excluded from this requirement. EPs must enter the number of prescriptions written during the EHR reporting period in the Exclusion box to attest to exclusion from this requirement.

EPs who do not have a pharmacy within their organization, and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP’s practice location at the start of his/her EHR reporting period, would be excluded from this requirement.

The resulting percentage (Numerator ÷ Denominator) must be more than 40 percent in order for an EP to meet this measure.

Additional Information

- The provider is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained using certified EHR technology.
- Authorizations for items such as durable medical equipment, or other items and services that may require EP authorization before the patient could receive them, are not included in the definition of prescriptions. These are excluded from the numerator and the denominator of the measure.
- Instances where patients specifically request a paper prescription may not be excluded from the denominator of this measure. The denominator includes all prescriptions written by the EP during the EHR reporting period.
- Although the Department of Justice recently published an Interim Final Rule that allows the electronic prescribing of controlled substances, these recent guidelines could not be incorporated into the Medicare and Medicaid EHR Incentive Programs. The determination of whether a prescription is a "permissible prescription" for purposes of this measure should be made based on the guidelines for prescribing Schedule II-V controlled substances in effect on or before January 13, 2010.
- EPs cannot receive incentive payments for e-prescribing under both the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) and the Medicare EHR Incentive Program for the same year. However, EPs can receive payments from both the MIPPA E-Prescribing Incentive Program and the Medicaid EHR Incentive Program for the same year.
- Providers can use intermediary networks that convert information from the certified EHR into a computer-based fax in order to meet this measure as long as the EP generates an electronic prescription and transmits it electronically using the standards of certified EHR technology to the intermediary network, and this results in the prescription being filled without the need for the provider to communicate the prescription in an alternative manner.
- Prescriptions transmitted electronically within an organization (the same legal entity) do not need to use the NCPDP standards. However, an EP’s EHR must meet all applicable certification criteria and be certified as having the capability of meeting the external transmission requirements of §170.304(b). In addition, the EHR that is used to transmit prescriptions within the organization would need to be Certified EHR Technology. For more information, refer to ONC’s FAQ at http://healthit.hhs.gov/portal/server.pt/community/onc_regulations_faqs/3163/faq_22/21286.
• EPs should include in the numerator and denominator both types of electronic transmissions (those within and outside the organization) for the measure of this objective.
• For purposes of counting prescriptions "generated and transmitted electronically," we consider the generation and transmission of prescriptions to occur constructively if the prescriber and dispenser are the same person and/or are accessing the same record in an integrated EHR to creating an order in a system that is electronically transmitted to an internal pharmacy.
• This specification sheet has been updated to reflect the applicable Stage 1 provisions in the Stage 2 Meaningful Use Final Rule, published on September 4, 2012.

Certification and Standards Criteria
Below is the corresponding certification and standards criteria for electronic health record technology that supports achieving the meaningful use of this objective.

<table>
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<th>Certification Criteria*</th>
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| §170.314(b)(3) Electronic prescribing | Enable a user to electronically create prescriptions and prescription-related information for electronic transmission in accordance with:
(i) The standard specified in § 170.205(b)(2); and
(ii) At a minimum, the version of the standard specified in § 170.207(d)(2). |

*Additional certification criteria may apply. Review the ONC 2014 Edition EHR Certification Criteria Grid Mapped to Meaningful Use Stage 1 for more information.

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