



# 2009 Operating Plan

ePrescribe Florida

April 23, 2009

**Theme: Get to the top 10!**

**Today's Goal:** Prioritize and Identify who/when or delete

**Mission:** Promote Collaborative State efforts toward successful adoption of e-prescribing.

**Vision:** All Floridians have access to the benefits of improved health, safety, and affordability through e-prescribing.

**Chair:** Catherine Peper

**Executive Director:** Walt Culbertson

**Treasurer:** Ashley Allen

**Key Responsibilities**

1. e-Rx Adoption by Clinicians
2. Capability, Reporting and Metrics
3. Market Leadership
4. Pharmacy Adoption
5. Consumer Acceptance and Advocacy
6. Legislative and regulatory?

<p><b><u>Vendor &amp; PBM Solutions</u></b> (Merging Groups)</p>	<p><b><u>Provider Outreach</u></b> Dr. Tom Lampone, BCBSF - Chair Dr. Scott Latimer, Humana - Vice Chair</p>	<p><b><u>Pharmacy Outreach</u></b> Todd Hardman - SureScripts Casey Kozlowski - Walgreens</p>	<p><b><u>Metrics and Reporting</u></b> Christopher Sullivan Carolyn Turner</p>	<p><b><u>Marketing and Communications</u></b> Nancy Sabbag - BCBSF Michael Hughes – SureScripts Sue Miller – e-Transactions</p>
<p><b>Mission:</b> Provide all stakeholders access to information and tools that support the evaluation of e-prescribing solutions consistent with the goals of ePrescribe Florida.</p> <p><b>Vision:</b> Enable providers to readily identify qualified e-prescribing solutions capable of delivering FULLY INFORMED e-prescribing benefits recognized by ePrescribe Florida.</p> <p><b>Key Responsibilities</b></p> <ul style="list-style-type: none"> <li>• Augment other industry groups working e-Rx standards.</li> <li>• Set requirements for features/functions that dig deep in data issues.</li> <li>• My sunset group 4Q09 due to CCHIT certification process, UNLESS capability “floor” is set too low.</li> <li>• Educate other states/organizations on need and value of fully informed e-Rx.</li> <li>• Conduct monthly conference calls with vendor community.</li> </ul>	<p><b>Mission:</b> Foster and gain physician implementation and key stakeholder support of electronic prescribing.</p> <p><b>Vision:</b> All Florida prescribers have the information and tools necessary to understand and successfully transition to electronic prescribing.</p> <p><b>Key Responsibilities</b></p> <ul style="list-style-type: none"> <li>• Provide resource and conduit for solutions and information, through outreach programs, materials, forums, and partnerships.</li> <li>• Identification of barriers and opportunities from a stakeholder and industry perspective.</li> <li>• Target decision makers if provider offices (Office Manager, Nurse Practitioners, PAs)</li> <li>• Educate physicians on how to make the right decision up-front.</li> <li>• Future outreach to hospitals (CPOE, technology available).</li> </ul>	<p><b>Key Responsibilities</b></p> <ul style="list-style-type: none"> <li>• Increase number of independent pharmacies that are capable of receiving e-Rx.</li> <li>• Dispel myths through proactive education of pharmacies and pharmacists.</li> <li>• Educational sessions at pharmacy collages (5)</li> <li>• Help uncover and remove barriers</li> <li>• Act as voice of the pharmacy on relate issues (e.g., access to data to improve care).</li> <li>• Recruit hot on the bench pharmacy leaders (Publix, Winn-Dixie, Target).</li> </ul>	<p><b>Key Responsibilities</b></p> <ul style="list-style-type: none"> <li>• Determine analysis and reporting that would allow all stakeholders to understand the rate of adoption and calculate specific benefits of the adoption of e-health technology.</li> <li>• Define ability to use reporting data to evolve the collaboration message, incentive approaches and solution requirements.</li> <li>• Establish baseline (# of e-Rx, # of prescribers, # of high prescribers, # of pharmacies, # of plans).</li> <li>• Determine available methods of data gathering initially and ongoing.</li> <li>• Expand broader range of data (e.g., PQRI quality measures).</li> </ul>	<p><b>Key Responsibilities</b></p> <ul style="list-style-type: none"> <li>• Promotional/educational programs.</li> <li>• Communication of best practices and industry standards.</li> <li>• Increase awareness, understanding and acceptance of e-prescribing.</li> <li>• Explore other channels (AARP, Public TV or Cable media).</li> <li>• Consider contest.</li> <li>• Leverage FMAs 6 regional champions.</li> </ul> <p><b>Other Considerations</b> Legislative and Regularity environment</p>

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			<b>Measure:</b> Refine and execute adoption plan to obtain a critical mass of targeted Florida clinicians who use fully informed e-prescribing capabilities. Promote and support the exchange of clinical information among providers and communities.																														
H			<ul style="list-style-type: none"> <li><b>Target Goals:</b> Increase the number of Florida clinicians using e-prescribing in 2009 by 2,500. Increase the trend % of e-prescriptions that are electronic from 6.9% in 12/08 to 14% by 12/09. Generate a total of 7.2M e-Prescriptions in 2009. Double the # eligibility/medication history request as a proxy for total number of fully informed prescriptions</li> </ul>																														
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Priority (H, M, L)	Capability, Reporting & Metrics  (includes patient safety and quality of care)	Metrics and Reporting Workgroup	<b>Measure:</b> Strengthen the overall strategy, infrastructure and capabilities available to Florida stakeholders and enable effective monitoring and evaluation programs using actionable data. Enable identification of the impact on medical cost savings and patient safety improvement.	<b>Planned Completion Date</b>		
					<b>Target Goals:</b> ePrescribe Florida solutions have a measurable impact on the quality of the care experience and cost of care.	
					1. Develop <b>core reporting</b> using baseline data from SureScripts (expressed as a % of eligible prescriptions that are electronic). The % increase in e-Rx rate should define goals for refill vs. new, refill requests from pharmacies and from PBMs; it should also include mail order pharmacy: <ul style="list-style-type: none"> <li>a. Determine how to keep denominator current to avoid calculation errors</li> <li>b. X reduction in medical errors and costs in 2009 (target)</li> </ul>	Sullivan / Turner
					2. Develop <b>state of readiness monitoring program</b> to look at other indicators and attributes that are needed to refine strategy such as: <ul style="list-style-type: none"> <li>a. Geographic break-downs (by metro area and # patients, # providers, # pharmacies</li> <li>b. % of pharmacies that are ready</li> <li>c. Number of capable Health Plans and % of Florida population represented</li> <li>d. Active prescribers by area</li> </ul>	
					3. Develop business and technical processes to enable quantification of <b>quality/cost of care</b> and fully define methodology to include (medication errors, ADEs, % of Rx's flagged that result in changes and identify the number of non-formulary prescriptions and % changed): <ul style="list-style-type: none"> <li>a. There are 9 Rx related deaths per day in Florida (and growing) – how can we prevent?</li> </ul>	1Q09
					4. Consider consumer “poly-pharmacy” campaign	
					5. Improve Florida’s ranking to top 10 by 2009	4Q09
					6. Manage acquisition for Medicaid Rx history data	Sullivan - 3Q09
					7. Plan for hospital based e-prescribing via CPOE	2010
					8. Documented study on where medication history currently resides and what the gaps are	
			9. Leverage County Health Departments and Florida association of County Health Offices			
			10. What are the issues or opportunities to increase the matching rate (and reduce patient not found)?			

Priority (H, M, L)			Measure: Florida and National Market Stakeholders view ePrescribe Florida as a leader in innovation and local HIT efforts. Position Florida to win a Safe Rx award for 2009. Work with CCHIT on standards and CMS on incentives. Broaden reach of ePrescribe Florida to gain agreement on common approach in at least 3 other states in 2009.																					
	Market Leader	Steering Committee	Target Goals: Develop plans and actions to participate and to influence national and regional forums, and associations. Increase true participation of all health plans.																					
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	Pharmacy Adoption	Pharmacy Outreach	Measure: Increase the number of independent pharmacies who are activated to receive e-prescriptions and reduce negative "myths" about e-prescribing through the large chain pharmacies																					
				Target Goal: Target independent pharmacies who are enabled but not live and are interested in e-Rx (increase the % of independents)																				
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	Patient & Consumer Acceptance		Measure: Educate and engage Florida consumers to increase awareness, understanding and acceptance of e-Prescribing and mobilize consumers as advocates to "ask their doctor" about e-Prescribing. Neutralize consumer distrust of e-Prescribing																					
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			1. Encourage all health plans and Medicaid & Medicare to educate consumers, pilot with BCBSF	
			2. Patient blog: Save time! Ask your physician, pharmacy and insurance plan if they are ready?	
<b>M</b>	<b>Comm. &amp; Marketing</b>		<b>Measure:</b> Design, develop and implement effective communication strategy to engage all stakeholders and increase awareness, understanding and acceptance of e-prescribing and minimize barriers. Educate on potential government mandates.	
			<b>Tactic(s) required to support achieving target goal</b>	<b>Planned Completion Date</b>
<b>M</b>			1. Develop a full year plan and calendar of events for the steering committee to prioritize and leverage all member organizations' publications and meetings	
<b>H</b>			2. Define artifacts and collateral material that has to be produced. Education on "fully informed e-Prescribing" (not just transmission)	
<b>M</b>			3. Integration opportunity library – general	
<b>H</b>			4. Educate physicians on incentives and mandates (scare them to action). Consider "sales" training for health plans and other field reps from other stakeholders	
<b>H</b>			5. Outreach to PBMs, Health Plans, members and general public	
<b>M</b>			6. Execute an integrated market plan (adoption, communication market map, and speakers bureau)	
<b>M</b>			7. Leverage e-mail and distribution lists, cable TV and Floridahealthfinder.gov	
<b>H</b>	<b>Vendor Solutions</b>	Vendor Solutions Workgroup	<b>Measure:</b> Be recognized as the preferred non-biased information source for organizations considering e-Rx or EMR with e-Rx functionality: Physicians & Groups, Allied Health, Hospitals & Systems, and Health Plans & Payers.	
			<b>Target Goals:</b> Provide an efficient platform to share technical information and best practices. Create "Buyers Guide" tailored to share information specific to key objectives & needs of multiple healthcare organization types: POC e-RX software, PBM, e-Rx capabilities, and EMR initiatives.	
			<b>Tactic(s) required to support achieving target goal</b>	<b>Planned Completion Date</b>
<b>M</b>			1. Leverage <b>other organizations' criteria and evaluation processes</b> to eliminate duplication and vendor hassle factor. Partner with CCHIT for e-Rx functions and requirements. Work with SureScripts to evaluate perceptions of work thus far, to create recommendations around Health Plan & PBM support assessments. <ul style="list-style-type: none"> <li>a. Can they add ePrescribe America registered vendors?</li> <li>b. Share features and functions with SureScripts</li> <li>c. Can they revalidate criteria?</li> <li>d. Challenge is that SureScripts' focus is on end of e-Rx spectrum, meaning PBM or pharmacy connectivity, not the actual functionality in the application</li> <li>e. Raise the bar for 2009 to stay registered until CCHIT is up to speed</li> <li>f. Consider Registered and "Gold" Registered to highlight features that drive connectivity</li> <li>g. Identify more presentation / visibility opportunities</li> </ul>	
<b>M</b>		2. <b>EMR Vendor Strategy:</b> Facilitate IT integration to support interoperability work, EMR vendor solution such that we have high confidence that it will be secure, efficient and able to send / receive in industry standards (e.g. CCR / CCD / CDA format to/from select sources). Release and upgrade staging plan.		

L			<p>3. Define <b>PBM/ health plan requirements</b> &amp; engage stakeholders to enable fully informed e-Rx:</p> <ul style="list-style-type: none"> <li>a. By Plan type such as managed care vs. FFS? Mail order vs. Pharmacy?</li> <li>b. Back-end connections to payers – data requirements for PBMs and Plans</li> <li>c. Define minimum data set needed for patient specific formulary compliance (TIER or just Y or N)</li> <li>d. Capability granularity: renewals only, new or both? Step therapy required? Prior authorization?</li> <li>e. Consider separate registration status for fully informed vs. e-Rx (med history...)</li> <li>f. What PBMs are not connected?</li> <li>g. SureScripts has criteria to be certified in program (to connect)</li> <li>h. How to check compliance with NCPDP standards?</li> <li>i. Some large employer groups have their own PBM</li> </ul>	<p>Sure Scripts, ePrescribe Florida</p>
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