



RESOURCE AND PATIENT MANAGEMENT SYSTEM

# **Electronic Health Record**

**(EHR)**

## **ePrescribing (eRx) Addendum to User Manual**

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## **Preface**

ePrescribing (eRX) in the RPMS EHR has been redeveloped to meet criteria for the 2015 Edition certification.

## 1.0 Introduction

The 2015 Edition regulations around ePrescribing (eRx) include the following requirements:

- Enable the following transactions:
  - New Prescriptions
  - Change Prescriptions
  - Cancel Prescriptions
  - Renew Prescriptions
  - Receive Fill Status
  - Request and receive Medication History information
- Allow the reason for the prescription for **New**, **Change**, **Cancel**, and **Renew** transactions.
- Limit the ability to prescribe oral liquid medications in non-metric units such as household measurements (e.g., teaspoons).
- Ensure there are leading zeros and no trailing zeros in numbers with decimal points.

New prescriptions have been available in the Resource and Patient Management System (RPMS) Electronic Health Record (EHR) since EHR patch 12. The Indian Health Service (IHS) has sent the diagnosis attached to the medication order from the start and the new transactions being added will continue to send this information. The Cancel and Fill Status transactions were added in EHR patch 26 released in April 2020. Metric dosing for oral liquids and the leading and trailing zeros conformance were included in EHR patch 28 released in July 2020. The patch 29 release will add the Renew transactions, with Change transactions and Medication History coming in future releases.

In addition, two components have been added to assist sites and prescribers in managing the Surescripts (SS) requests:

- Surescripts Request Queue
- Surescripts Mailbox

The SS Request Queue is intended for non-prescribers to manage the requests, both monitoring compliance with the SS mandated response time to a request and performing limited mapping of requests that are not completely matched to an existing order in the EHR. The SS Mailbox is intended for the prescriber to use to see and manage their own orders and requests.

## 2.0 Surescripts Request/Response

Surescripts requests are inbound messages from the pharmacy to the provider asking for a change to a pending prescription or a renewal of a medication because the patient is out of refills. The message sent back to the pharmacy by the prescriber is the Surescripts response.

RPMS analyzes all incoming requests and compares the data to see if:

- A matching order exists in the database
- The patient name, birthdate, and sex match the patient in the request
- The prescriber matches
- The orderable item matches

If the patient, prescriber, and orderable item match an order in the system, the request is sent to the SS Mailbox and a notification is sent to the provider. These requests will also be visible in the SS Request Queue for monitoring purposes.

If the matching process is unable to match to the patient, prescriber, or orderable item, or any combination of the three, or if the order number matches to a different patient and prescriber than the request details, the request will be sent only to the SS Request Queue for the purposes of mapping and monitoring. Some requests are unable to be mapped, in which case the only option is to deny the request. In a few extremely rare circumstances, a request may be refused or denied by the system, such as when the pharmacy accidentally sends duplicate requests.

When the prescriber processes a request, an order is created. When the prescriber signs the resulting order, a response will be sent back to the pharmacy. If the prescriber deletes the order prior to signing, the request will return to the prescriber's processing queue.

Requests will match up or not match up to existing orders based on the mapping matrix (Section 2.1). The inability to match a request to an existing order may be because the original order was completely on paper with no entry in RPMS, or because the external pharmacy has different information for the patient or prescriber than exists in RPMS, or because of other issues such as a request somehow being sent on a patient that does not get seen at the facility at all.

## 2.1 Mapping Matrix

When a request comes to RPMS, the system attempts to map it to an existing order in RPMS based on the order number, patient, medication, and prescriber. When the system can create mappings, the following letters are assigned:

- O – Mapped on order number
- P – Mapped on patient

- M – Mapped on medication
- D – Mapped on prescriber

A single request can have more than one letter assigned. For example, OPMD is assigned when all four items can be mapped. When the order number sent in the request is not in RPMS or if the information in the referenced order does not match the information in the request, the system also assigns a Z. The information in the request may not match the information for the order number sent when the pharmacy accidentally sends the wrong order number which happens to match to a random order in the RPMS system.

For example, if the pharmacy sends an order number of 1234, and the local RPMS system is up to order number 345678, there may be an old order with the 1234 number, which is not the intended order the pharmacy is attempting to reference.

The criteria above will help establish the following:

- Whether the request will be:
  - Automatically sent to the SS Mailbox for processing
  - Shown as unmapped in the SS Request Queue
  - Automatically denied
- Which actions will be available for the request in the SS Request Queue:
  - Details
  - Map
  - Change Patient
  - Change Prescriber
  - Deny Request
- Which responses will be available to the prescriber:
  - Accept
  - Accept w/CHG
  - Replace
  - Deny

The RPMS program communicates this information to the EHR, then presents the user with the resulting choices. The Prescriber Order Number (PON) is the prescription number that is sent back from Surescripts in the renewal request. There will not be a PON if the original order was written completely on paper with no entry in EHR or RPMS.

Automatic responses sent by the system without the prescriber seeing a request should be rare to nonexistent and occur only if the request does not contain the Surescripts Pharmacy reference number.

Table 2-1: Mapping matrix for Surescripts requests

Mapping	In SS Mailbox initially?	Mapped/ Unmapped	Allowed Actions in SS Queue	Allowed Responses by Prescriber**
OPMD PMD	Yes	Mapped	Details Change Prescriber*	Accept Accept w/CHG Replace Deny
OMD OPD OD PD MD D	No	Unmapped	Details Map Change Patient Change Prescriber* Deny Request	Replace Deny
OPM OP OM PM O P M	No	Unmapped	Details Deny Request	<i>Item will not get this far</i>
OPMDZ*** OPMZ OPDZ OMDZ OPZ OMZ ODZ OZ	No	Unmapped	Details Deny Request	<i>Item will not get this far</i>

\*Until prescriber creates an order.

\*\*CS medications will have allowed responses of Replace and Deny only.

\*\*\*Z is used when the order number from the request is not in RPMS or contains information that does not match the request content.



## 3.0 New Parameters and Updates

Several new XPAR parameters have been added to support electronic prescribing, and one parameter should be checked and reset if needed.

### 3.1 APSP RENEW REQUEST

The APSP RENEW REQUEST parameter allows access to the SS Request Queue. It should be set for non-prescribers who will be managing the request queue.

### 3.2 APSP SS MAILBOX ACCESS

The APSP SS MAILBOX ACCESS parameter allows access to the SS Mailbox for request processing. It should be set for prescribers who are allowed to send medication orders through the Surescripts network.

### 3.3 APSP SS REQ HOSP LOC DEF

The APSP SS REQ HOSP LOC DEF parameter sets the default location used in processing Surescripts requests when the location cannot be determined by other means. Leaving this blank causes the prescriber to be asked to set the location when the location cannot be determined by other means. Set the parameter with a hospital location (i.e., scheduling clinic) that is appropriate for medication request processing.

### 3.4 APSP SS NDC SOURCE

The APSP SS NDC SOURCE parameter addresses a reported issue where the National Drug Code (NDC) that is sent to the external pharmacy with each Surescripts transaction may sometimes be invalid. In the past, the NDC associated with the VA National Drug File (NDF) entry was used as a standard representation of a product NDC, but it was determined that the representative NDC values in the National Drug File may not be updated appropriately. This parameter allows the site to continue to use the VA NDF file as the NDC source, or to choose to use the local drug file as the NDC source. It is very strongly recommended that sites using the Surescripts network set this parameter to use the local drug file, and to ensure that the NDCs in the local drug file are kept up to date.

### 3.5 APSP AUTO RX ADD PRV COMMENT

The APSP AUTO RX ADD PRV COMMENT parameter was delivered in a previous EHR patch. This parameter must be set to YES to allow the eRx functionality to work properly. Sites using the Surescripts functionality must check this parameter to ensure it is set to **YES**.

## 4.0 Surescripts Request Queue Component

The Surescripts Request Queue (also called Surescripts Queue or SS Queue) is a new component that must be added to the EHR graphical user interface (GUI) template before sites can manage the Surescripts requests. The queue is designed for a non-prescriber such as a pharmacist, nurse, pharmacy tech, or clerk to manage Surescripts requests, especially those that have been received but cannot be automatically sent to a prescriber for processing. An incoming message may not automatically go to a prescriber if it did not match to a patient, prescriber, or medication in the RPMS file and therefore needs human intervention.

This component's contents are not specific to the logged-in user but show requests for all prescribers.

### 4.1 Add the Component

The Surescripts Request Queue component (Figure 4-1) is a button-style component suitable to add to the header bar used in most EHR templates, and similar to the **Reminders**, **Postings**, and **Integrated Signature** buttons. Add the component to an EHR GUI template as usual.

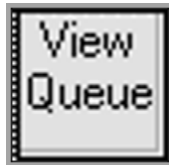


Figure 4-1: Surescripts Request Queue button

The properties of this object (Figure 4-2) allow the site to change the caption text and color, add a display count of the number of orders that require mapping, and link a Health Summary Report for the unmapped requests.



Properties for Surescripts Request Queue	
Property	Value
TOP	0
LEFT	315
HEIGHT	42
WIDTH	92
ALIGN	Left
ANCHORS	<input checked="" type="checkbox"/> Top; Left; Bottom
CAPTIONCOLOR1	
CAPTIONCOLOR2	
CAPTIONTEXT	SS Queue
DISPLAYCOUNT	<input checked="" type="checkbox"/> True
REPORT	IHS^7^ADULT REGULAR
<div style="text-align: right;"> <input type="button" value="OK"/> <input type="button" value="Cancel"/> <input type="button" value="Apply"/> </div>	

Figure 4-2: Properties for Surescripts Request Queue component

The REPORT property uses the format of **IHS^7^ADULT REGULAR**, where **IHS** denotes this is the IHS Health Summary Type, the **7** is the internal entry number (IEN) of the specific Health Summary, and **ADULT REGULAR** is the name of the specific Health Summary.

Any Health Summary Type available on the local database may be used here, including VA Health Summaries (use 1 in place of IHS). The Health Summary associated with this component will be represented as a link in the queue list. SS Queue managers will require, at minimum, demographic and medication data in the linked Health Summary.

- **CAPTIONCOLOR1** – Sets the color of the count text when no patient is selected or when the selected patient does not have pending requests.
- **CAPTIONCOLOR2** – Sets the color of the count text when the selected patient has pending requests.

- **DISPLAYCOUNT** – When selected, displays the number of requests that require mapping. This includes both unmapped Renew requests and unmapped Change requests (after Change is implemented in a future release), which display in different areas in the queue.

The Surescripts Queue component display changes after the user changes the caption and enables the display count (Figure 4-3).



Figure 4-3: Surescripts Queue display with caption change and enabled display count

Hovering the mouse pointer over the component provides helpful information regarding what is displayed (Figure 4-4).



Figure 4-4: SS Queue button with hover text displayed

## 4.2 Add Access to the Component

Access to the component is set through the APSP RENEW REQUEST parameter (see Section 3.1). Prescribers generally do not require access to this component. It is anticipated that most sites will delegate management of the queue to pharmacy or nursing personnel.

## 4.3 Orientation to the Surescripts Queue

The Surescripts Queue is designed to monitor and manage requests received from Surescripts. It is not designed for prescribers to respond to the requests; they should use the Notifications (Section 4.6.1) and SS Mailbox (Section 4.6.2) to respond.

Surescripts guidelines state that requests should be responded to within 72 hours of receipt. The Surescripts Queue allows selected users to monitor requests, manually map requests that did not map automatically, review denied requests, and review change requests. The queue has four tabs to facilitate these functions:

- **Renewals Pending Prescriber Response** – Contains orders that were automatically or manually mapped and are waiting to be processed and signed by the prescriber.
- **Renewal Requests Unmapped** – Contains orders waiting to be mapped.

- **Denied eRx Report** – Contains a list of requests denied by the prescriber or queue manager.
- **Change Requests** – Contains a list of change requests, including unmapped requests.

## 4.4 Managing the Surescripts Request Queue

Management of the Surescripts Queue is important to ensure the requests are being processed in a timely manner, and to ensure that requests that may have missing or incomplete data are mapped for the prescriber to process or denied if unable to be mapped.

### 4.4.1 Renewals Pending Prescriber Response

The **Renewals Pending Prescriber Response** tab (Figure 4-5) allows the queue manager to view pending requests that are still waiting for prescriber action, and also view which requests are in danger of exceeding the 72-hour response guideline.

Items display on the Renewals Pending Prescriber Response Queue (also called Pending Queue) if:

- They automatically mapped, or if mapping was completed from the **Renewal Requests Unmapped** tab  
and
- The prescriber has not yet processed or signed the resulting order

The following columns are present:

- **Processing Status**
- **Request Date/Time**
- **Patient Name Date of Birth Gender Phone**
- **Surescripts Request Details**
- **Prescriber**
- **Pharmacy Information**
- **RPMS Request Details**

Users may sort the lists by clicking in any of the column headers. Click once to sort low to high or A–Z. Click a second time to sort high to low or Z–A. A small light-gray triangle displays on the sorted column pointing up or down depending on the sort method.

Processing Status	Request Date/Time	Patient Name Date of Birth Gender Phone	Surescripts Request Details	Prescriber	Pharmacy Information
Pending review	06/24/2020 12:03	DEMO.MAF0UR (03/15/2000) Female	DESIPRAMINE 100MG TAB TAKE ONE (1) TABLET BY MOUTH AT BEDTIME D:30 QTY:30 RF:3 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO_PROVIDER MN	
Pending review	06/23/2020 09:35	DEMO.MATW0 (03/01/1985) Male	URSODIOL 300MG CAP TAKE ONE (1) CAPSULE BY MOUTH TWICE A DAY D:90 QTY:180 RF:2 DAW:NO Indication:	DEMO_PROVIDER MN	
Pending review	06/23/2020 12:45	DEMO.MAONE (03/01/1975) Female	GABAPENTIN 800MG TAKE ONE (1) TABLET BY MOUTH THREE TIMES A DAY D:30 QTY:90 RF:2 DAW:NO Indication: Chart evalu...	DEMO_PROVIDER MN	
Pending review	06/17/2020 10:14	DEMO.PATIENT Tw0 (06/14/2014) Female (555)555-2688	PRAVASTATIN 10MG TAB TAKE TWO (2) TABLETS BY MOUTH DY FOR CHOLESTEROL D:30 QTY:60 RF:2 DAW:NO Indication: Chart evaluation by healthcare professionalFOR CHOLE...	DEMO_PROVIDER MN	
Pending review	06/19/2020 14:01	DEMO.MADNE (03/01/1975) Female	MIRTAZAPINE 30MG TAB TAKE ONE (1) TABLET BY MOUTH DY D:90 QTY:90 RF:3 DAW:NO Indication:	DEMO_PROVIDER MN	

List restricted to Date Range:  
26-May-2020 to 25-Jun-2020

Change Date Range

Close

Figure 4-5: Renewals Pending Prescriber Response tab in the Surescripts queue

Because this list can become large at active sites, this tab includes a date restriction, which defaults to 30 days ago to yesterday. The date range selected is clearly listed at the bottom of the window. The user may adjust the date range displayed by clicking the **Change Date Range** button. This opens the **Date Range** dialog (Figure 4-6) to select the **Begin Date** and the **End Date**.

Date Range

Enter a date range:

Begin Date: 02-Jun-2020

End Date: 02-Jul-2020

OK Cancel

Figure 4-6: Date Range dialog to select the Begin Date and End Date

The user may right-click an entry in the list to display the available actions (Figure 4-7). The options available on this tab include **Details**, **Change Prescriber**, and **Refresh**. **Refresh** updates the display contents for the entire component. **Details** and **Change Prescriber** are discussed below.

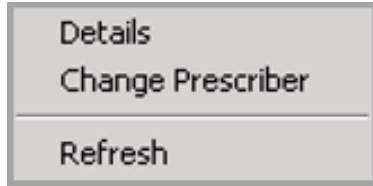


Figure 4-7: Renewals Pending Prescriber Response menu

#### 4.4.2 Details

Selecting **Details** displays the mapped data and the original Health Level Seven (HL7) message data from the renewal request so the user can compare the two (Figure 4-8).

The top portion contains the information in the original order, while the **DISPENSED Drug HL7 Information** section contains information on what the pharmacy actually dispensed (as determined from the message sent).

The **MAPPED DATA** section lists the patient, provider, and medication data that was used to map the request.

Information received for Message: 8907 200000136533

---

DISPLAYING Ordered med HL7 data:

Patient: DEMO,PATIENT TWO  
 Pt Data: DOB: Jun 14, 2014 SEX: F HRCN: 112192  
 Pt Address: PO BOX 450 ALB, NM 87119  
 Pt Comm:  
 Primary: (555)555-2688  
 Provider: DEMO,PROVIDER Ph: (505)248-1111  
 Prov Address: 0987654321 Longest Address Street ALBUQUERQUE, NM 87110

Medication: PRAVASTATIN 10MG TAB  
 SIG: TAKE TWO (2) TABLETS BY MOUTH DY FOR CHOLESTEROL  
 Supply: 30  
 Quantity: 60  
 Refills: 0  
 Dx: ZZZ999 Uncoded diagnosis  
 Sub: Allow Therapeutic Substitutions  
 Pharmacy: Bannockburn Pharmacy Ph (301)644-2418  
 Ph Address: 6798 Pyle Rd Bethesda, MD 20817  
 Notes to Pharm:

DISPENSED Drug HL7 Information

Dispensed Drug: PRAVASTATIN 10MG TAB (ND:42291066590)  
 SIG: TAKE TWO (2) TABLETS BY MOUTH DY FOR CHOLESTEROL  
 Supply: 30  
 Quantity: 60 Tablet  
 Fills: 2  
 Sub: Allow Therapeutic Substitutions  
 Written Date: 06/16/2020  
 Notes to Prov:

---

MAPPED DATA:

Patient: DEMO,PATIENT TWO  
 Pt Data: DOB: JUN 14, 2014 SEX: FEMALE HRCN: 112192  
 Address: PO BOX 450 ALB ,NEW MEXICO 87119  
 Pt Phone: (555)555-2688  
 Provider: DEMO,PROVIDER MN Ph:  
 Prov Address: ,

Medication: PRAVASTATIN TAB  
 SIG: TAKE TWO (2) TABLETS BY MOUTH DY  
 Supply: 30  
 Quantity: 60  
 Refills: 1  
 Dx: Uncoded diagnosis  
 Sub: Allow Substitution  
 Pharmacy: Bannockburn Pharmacy Ph: (301)644-2418  
 Ph Address: 6798 Pyle Rd Bethesda ,MD 20817

Dosing information: (multiple line items indicates complex dosing)

Font Size:

Figure 4-8: Surescripts Renewal Request details



### 4.4.3 Change Prescriber

Change Prescriber is available only when a request is in a status of Pending Review. It allows a queue manager to change the prescriber who will process the request. This is separate from the mapping process for a request where the prescriber is not automatically matched and would normally only be done if the original prescriber is not available, such as when a prescriber leaves a facility or is otherwise unavailable and has not identified a surrogate in the EHR system.

When this option is selected, the **Ordering Provider** dialog opens (Figure 4-9). A user will display in this list if they are a provider in the RPMS system and also have a Surescripts Prescriber Identifier (SPI) and the appropriate service level.

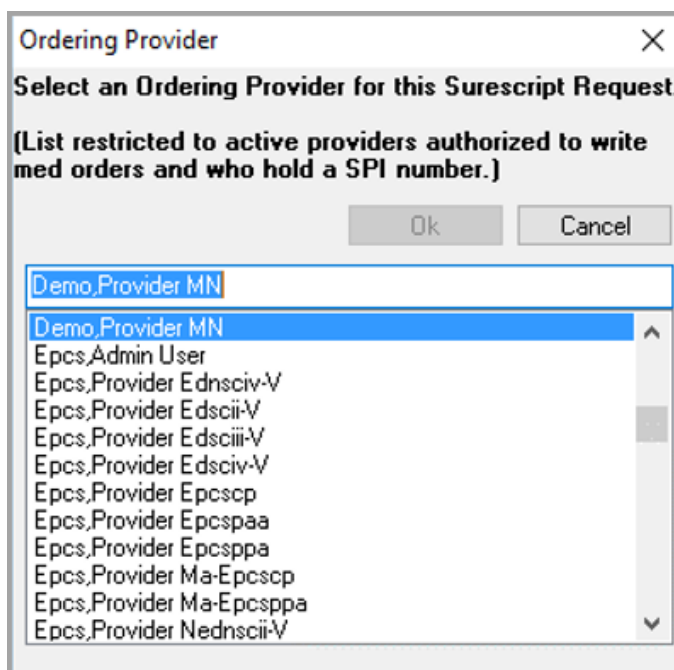


Figure 4-9: Ordering Provider dialog

Select a different prescriber, and the **OK** button becomes active. Click **OK** to confirm the new prescriber and display the updated request in the **Renewals Pending Prescriber Response** tab (Figure 4-10).

Processing Status	Request Date/Time	Patient Name Date of Birth Gender Phone	Surescripts Request Details	Prescriber	Pharmacy Information
Pending review	06/17/202...	DEMO PATIENT TWO 06/14/2014 Female (555)555-2688	PRAVASTATIN 10MG TAB TAKE TWO (2) TABLETS BY MOUTH DY FOR CHOLESTEROL D:30 QTY:60 RF:2 DAW:NO Indication: Chart evaluation by healthcare professional	EPCS ADMIN USER	

Figure 4-10: Updated prescriber in the Renewals Pending Prescriber Response tab

#### 4.4.4 Renewal Requests Unmapped

The **Renewal Requests Unmapped** tab allows the queue manager to see the renewal requests that were not automatically mapped. For items that allow it, the queue manager may manually map the request elements so that the provider may act on the request. Because Surescripts guidelines are that prescribers respond to requests within 72 hours of receipt, it is important that queue managers are regularly monitoring for requests that must be mapped.

Items display on the **Renewal Requests Unmapped** tab if they were unable to be automatically matched. The columns present include the following:

- **Processing Status**
- **Request Date/Time**
- **Patient Name Date of Birth Gender Phone**
- **Renewal Request Details**
- **Prescriber**
- **Pharmacy Information**
- **RPMS Request Details**
- **Patient Health Summary**

The user may sort the list by any of the columns by clicking in the column header. Click once to sort low to high or A–Z; click a second time to sort high to low or Z–A. A small light gray triangle will display on the sorted column pointing up or down depending on the sort method (Figure 4-11).

The user can review each item that failed to map. The **Health Summary** column contains a link (if configured in the component properties) that enables users to view patient data on a Health Summary to use while mapping. However, if the item failed to map to the patient, the Health Summary link will not work.

Processing Status	Request Date/Time	Patient Name Date of Birth Gender Phone	Renewal Request Details	Prescriber	Pharmacy Information	RPMS Request Details	Patient Health
Incomplete	06/23/2020 12:26	DEMO.MATHREE (03/01/1996) Male	KETOROLAC 10MG TABLET TAKE ONE (1) TABLET BY MOUTH FOUR TIMES A DAY IF NEEDED FOR PAIN D:10 QTY:40 RF:2 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO_PROVIDE...		Failed to map Patient [MAP OR DENY]	<a href="#">Health Si</a>
Incomplete	06/23/2020 09:45	DEMO.MATWOW-fak (03/01/1985) Male	RAMIPRIL 5MG CAP TAKE ONE (1) CAPSULE BY MOUTH DY D:90 QTY:90 RF:2 DAW:NO Indication:	DEMO_PROVIDE...		Failed to map Prescriber Failed to map Patient [DENY ONLY]	<a href="#">Health Si</a>
Incomplete	06/25/2020 09:06	DEMO.MAFIVE (03/15/2001) Male	THIAMINE HCL 100MG TAB TAKE TWO (2) TABLETS BY MOUTH DY FOR VITAMINS D:30 QTY:60 RF:3 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO_PROVIDE...		Failed to map Med [MAP OR DENY]	<a href="#">Health Si</a>

Figure 4-11: The SS Queue Renewal Requests Unmapped tab

The **Processing Status** column contains a red icon with the text Incomplete if the mapping has not yet begun. The **RPMS Request Details** column (Figure 4-12) contains the details of the mapping failures and notes if the request may be mapped or denied or if it may only be denied. Requests that fail to match to the prescriber may only be denied.

	RPMS Request Details
t	Failed to map Patient [MAP OR DENY]
D	Failed to map Prescriber Failed to map Patient [DENY ONLY]
D	Failed to map Med [MAP OR DENY]

Figure 4-12: A portion of the Renewal Requests Unmapped with RPMS Request Details

#### 4.4.4.1 Actions

The user may select an action by right-clicking the line item and selecting from the menu (Figure 4-13). Actions available on this tab include **Details**, **Map**, **Change Patient**, **Change Prescriber**, **Deny Renew Request**, and **Refresh**. Not all actions will be available on all requests.

**Refresh** will update the contents for the entire component. The other actions are described in detail below.

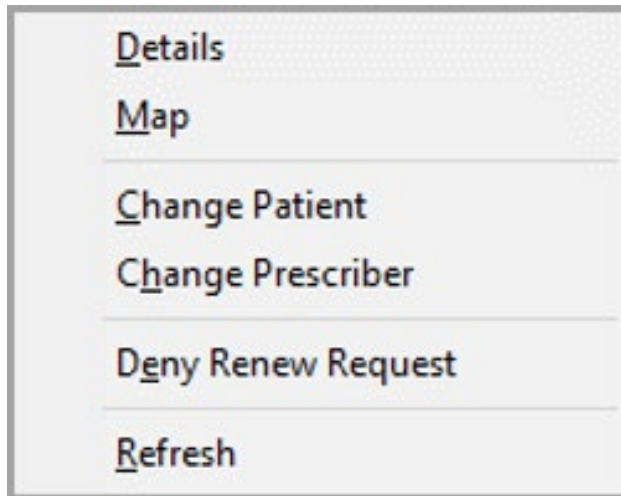


Figure 4-13: Renewal Requests Unmapped menu

##### 4.4.4.1.1 Details

See Section 4.4.2.

##### 4.4.4.1.2 Map

Selecting **Map** enables the user to map the data so that the prescriber may take action on the request. Once selected, the patient context in the EHR will change to the patient in the request (if the patient was matched and is not currently selected) or clear (if the patient was not matched).

Mapping requires a hospital location, also known as a clinic location. Most orders have a location embedded from the original order, or a location may be picked up from the **Visit** box if the prescriber had manually set a visit context for the chosen patient prior to opening the Mailbox. If neither option can be used, the APSP SS REQ HOSP LOC DEF parameter will determine the location used (see Section 3.3). If the parameter has not been defined, the user will see the Select Location window (Figure 4-14).

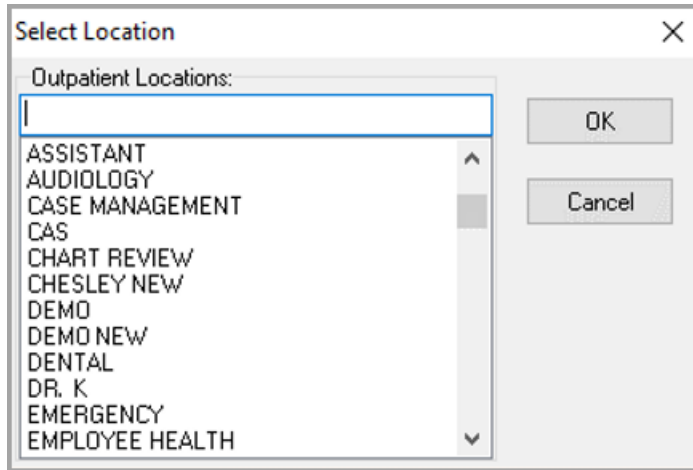


Figure 4-14: Select Location window

If the patient did not initially map, the **Patient Selection** dialog (Figure 4-15) displays prompting the user to select the correct patient.

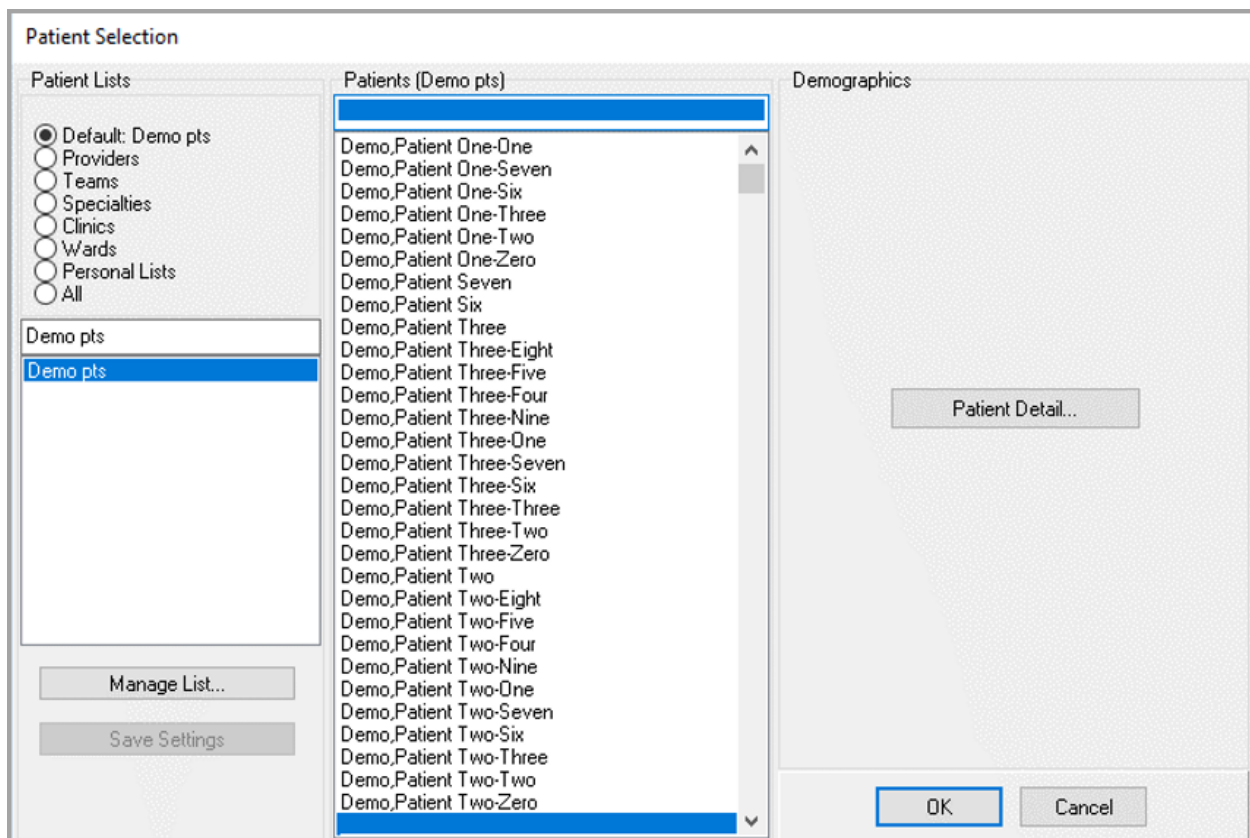


Figure 4-15: Patient Selection dialog

It may be helpful to open the request details and position it in view before attempting to map the patient, especially as these may not have a health record number or may use nicknames or have alternate name spellings, alternate birthdates, alternate addresses, etc. Using the request details and the patient details allows you to compare the information to select the right patient. Keep in mind that it is not unheard of for the pharmacy to have different spellings of patient names, use patient nicknames, or have a different date of birth on file for the patient.

In the example in Figure 4-16, the request details from the SS Queue component and the patient detail from the **Patient Selection** dialog are both open to compare additional demographic information, since the birthdate in RPMS does not match the birthdate sent by the pharmacy. The combined details ensure the queue manager is selecting the correct patient even when one piece of information does not match. In many cases the manager may still be reasonably sure of the correct patient, but if not, the request should be denied.

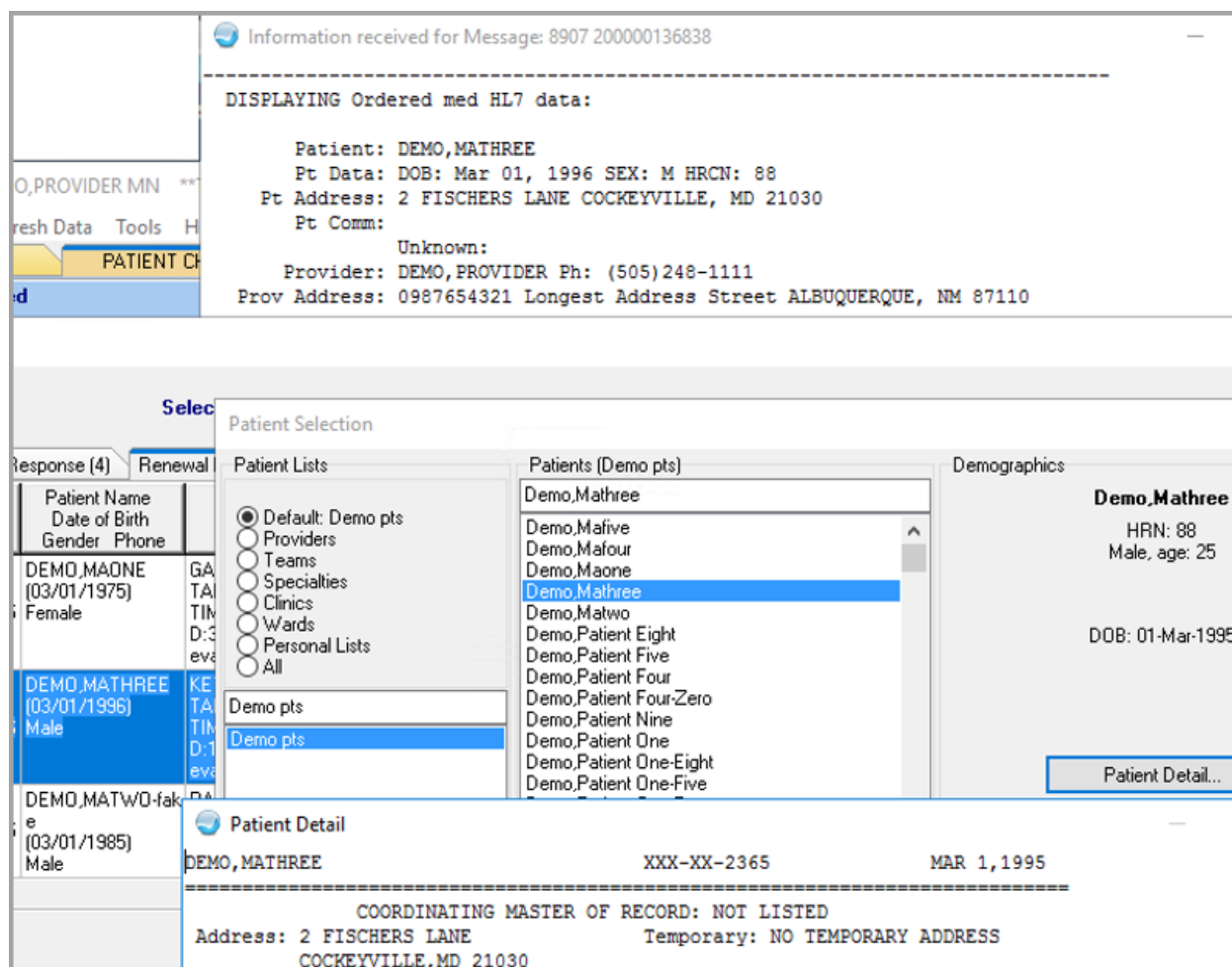


Figure 4-16: Portion of the Patient Selection dialog with Request details behind and Patient detail in front

If the medication matched (i.e., only the patient needed to be matched), then the **Information** window (Figure 4-17) displays stating that the mapping has been completed.

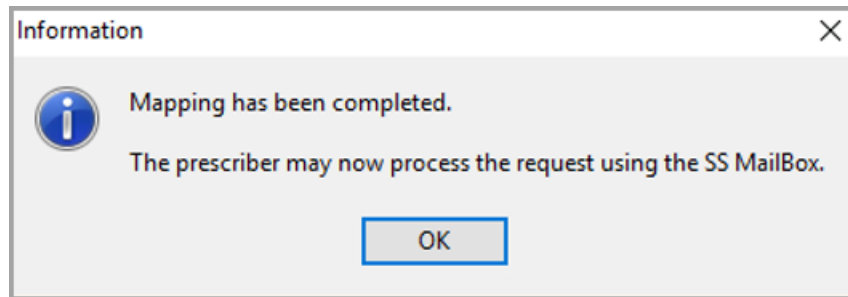


Figure 4-17: Information window for mapping completed

Clicking the **OK** button closes the window. The mapped request is dropped off the **Renewal Requests Unmapped** tab and appears in the prescriber's SS Mailbox for processing.

If the medication did not match, the **Surescripts Renewal Request Mapping Dialog** (Figure 4-18) opens to select the appropriate Orderable Item (OI) (Figure 4-19) and, if needed, other aspects normally present in the **Order** dialog.

Like the patient mapping, it is helpful to have the request details open and visible when attempting to map the medication to ensure that the correct medication, dose, and directions are selected. The information from the incoming request is prepopulated in the search box, but this tends to match a dispense drug rather than an OI (depending on the local drug file set up), so the user may need to adjust this to a less precise term to find the correct OI.

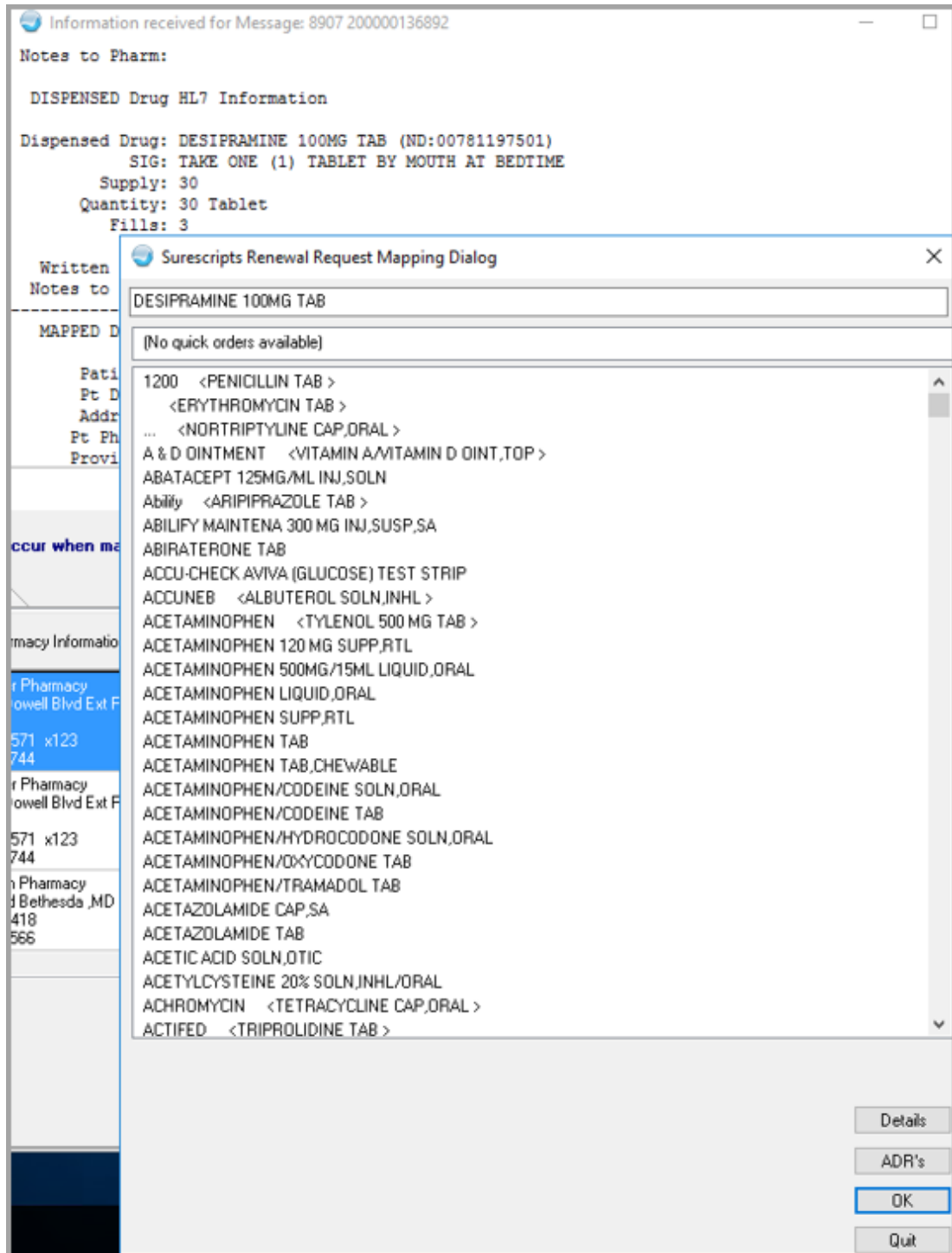


Figure 4-18: Surescripts Renewal Request Mapping dialog with prepopulated text and request details in background



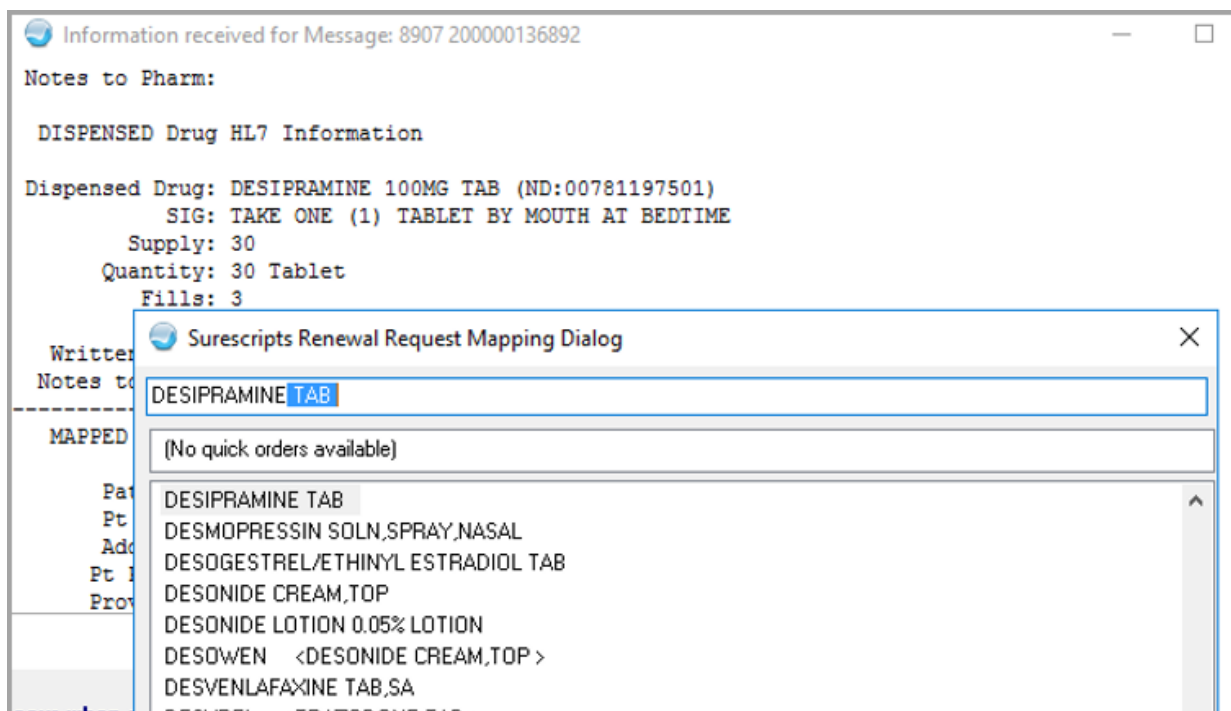


Figure 4-19: Matching an Orderable Item in the Surescripts Renewal Request mapping dialog

The dialog now displays the order elements (Figure 4-20). The fields in the order dialog will be populated with the incoming request information, or the information from the matching RPMS order, except for the **Dosage**, **Route**, and **Schedule** fields. Because of the way this information is transmitted to and from Surescripts, the information in these fields will read “See Sig,” “SEE SIG,” and “AS WRITTEN” respectively. The full information will be seen in the **Ordered Med** and **Med Dispensed** fields, and possibly in the summary at the bottom of the dialog, depending on how the specific drug is configured in the drug file at the site.

Unless the request information is unclear or the medication dispensed does not match the medication ordered, it is best for the queue manager to leave all the information as is, click **Save**, and let the prescriber adjust the order if needed. The prescriber will have the request details and the **Ordered Med** and **Med Dispensed** fields to use to ensure the request is answered appropriately.

DISPENSED Drug HL7 Information

Dispensed Drug: DESIPRAMINE 100MG TAB (ND:00781197501)  
 SIG: TAKE ONE (1) TABLET BY MOUTH AT BEDTIME  
 Supply: 30  
 Quantity: 30 Tablet  
 Fills: 3

Surescripts Renewal Request Mapping Dialog

DESIPRAMINE TAB Change

**Ordered Med:** DESIPRAMINE 100MG TAB Sig: TAKE ONE (1) TABLET BY MOUTH AT BEDTIME Qty: 30 Days: ^  
**Med Dispensed:** DESIPRAMINE 100MG TAB Quant:30 Tablet Sig: TAKE ONE (1) TABLET BY MOUTH AT ^

Dosage Complex

Dosage	Route	Schedule
See Sig	SEE SIG	AS WRITTEN <input type="checkbox"/> PRN
25MG NF 0.4263	ORAL	AS WRITTEN
50MG NF 0.8526		

Patient Instructions:

Days Supply: 30 Qty (TAB): 30 Refills: 2 Clinical Indication: Uncoded diagnosis ZZZ.999  Chronic Med  Disperse as Written

Pick Up:  Clinic  Mail  Window  Outside Pharmacy - eRx  Outside Pharmacy - Print

Pharmacy: Shollenberger Pharmacy 2002 S. McDowell Blvd Ext Petaluma CA 94954

Notes to Pharmacist:

DESIPRAMINE TAB  
 TAKE ONE (1) TABLET BY MOUTH AT BEDTIME  
 Quantity: 30 Days: 30 Refills: 2 \*Chronic Med: NO Disperse as Written: NO Indication: Uncoded diagnosis Pharmacy: Shollenberger Pharmacy 2002 S. McDowell Blvd Ext Petaluma CA 94954

Information transmitted to pharmacy:  
 PHARMACY: Shollenberger Pharmacy 2002 S. McDowell Blvd Ext, Petaluma, CA 94954  
 7079845571x123

PRESCRIBER: DEMO.PROVIDER MN  
 2017 DEMO CLINIC CHIT 0987654321 Longest Address Street, ALBUQUERQUE, NEW MEXICO 87110-1234  
 5052481111

\*Order elements that are NOT transmitted to Surescripts Pharmacy

Details  
 ADR's  
 Save  
 Quit

Figure 4-20: The Surescripts Renewal Request Mapping dialog showing order elements with request details positioned in background

Once the medication mapping is complete, click **Save** to save the order. If the system is unable to find the dispense drug, the **Select a Dispense Drug** dialog (Figure 4-21) may display. Select the appropriate drug according to the information in the **Med Dispensed** field and click **OK**.

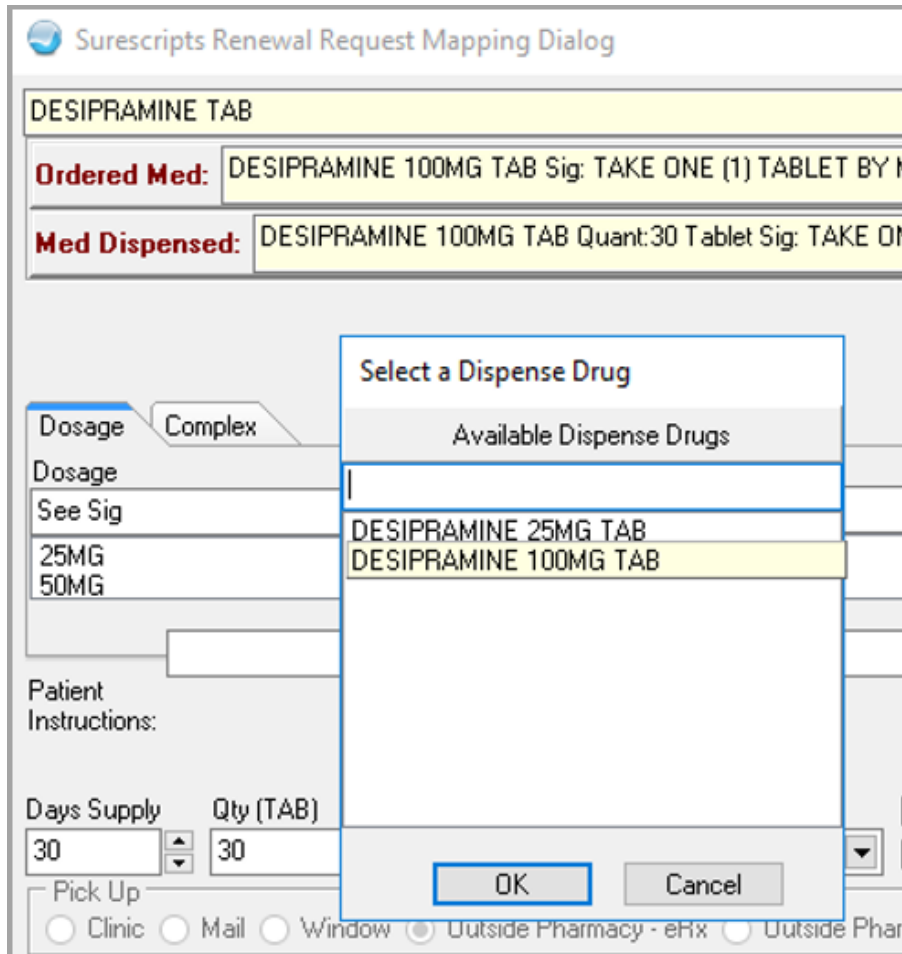


Figure 4-21: Select a Dispense Drug dialog with a portion of the Surescripts Renewal Request Mapping Dialog in the background

The dialog closes. This is the final item to be mapped in the process, so no Information window is seen. The request is automatically removed from the **Renewal Requests Unmapped** tab. The queue manager may view the request on the Renewals Pending Prescriber Response if desired.

#### 4.4.4.1.3 Change Patient

The **Renewal Requests Unmapped** tab allows the user to change the patient without performing the remaining mapping. This would be used in limited circumstances, such as when the patient can be easily mapped, but the other mapping may take research. For the normal mapping process, use the **Map** action and not the **Change Patient** action. To access this option, right-click the line item and select **Change Patient** (Figure 4-22).

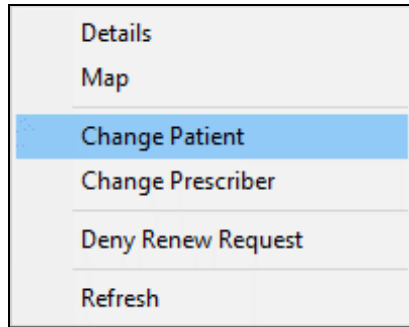


Figure 4-22: Renewal Requests Unmapped tab – Change Patient menu option

Keep in mind that incoming requests without an order number will not contain the patient’s health record number, only the name, address, and date of birth. It may be helpful to first open the details, position them to be readable, then select the **Change Patient** action (Figure 4-23).

Compare the information carefully, using the Patient Detail if needed, then select the appropriate patient. Because the pharmacy may have different information on file than is present in RPMS, the queue manager should be cautious in changing the patient. In many cases, the manager may still be reasonably sure of the correct patient, but if not, it is best to not change the patient without confirming the patient identity with the pharmacy.

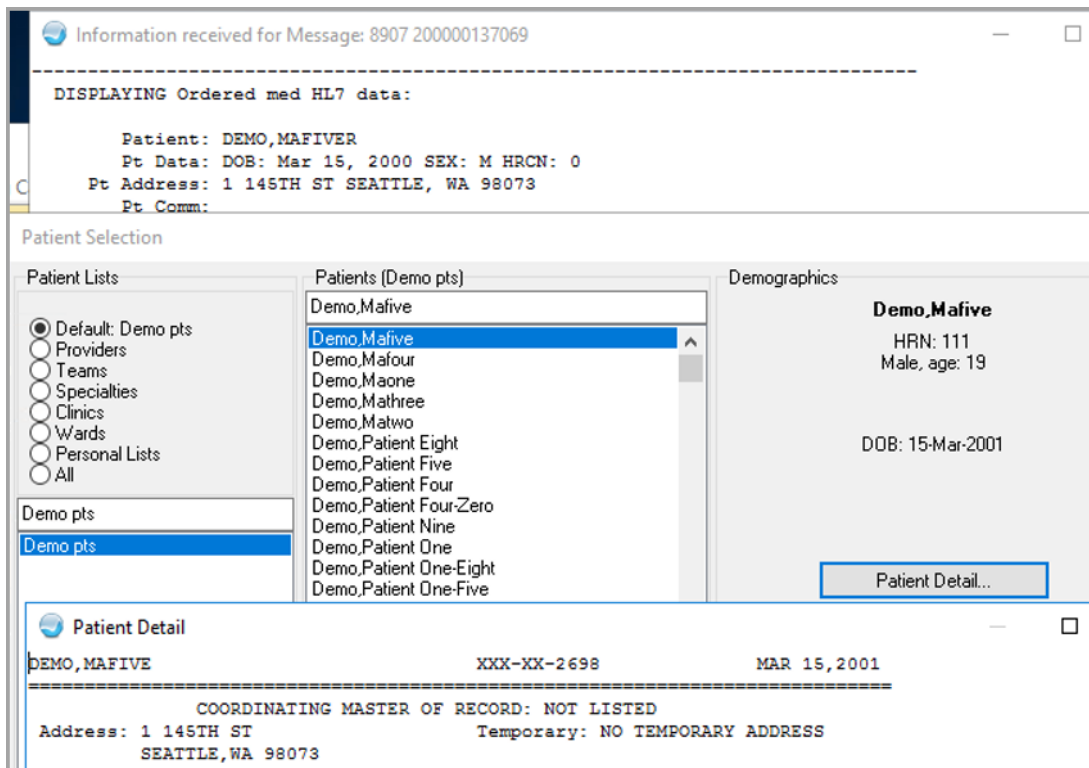


Figure 4-23: Change Patient action Patient Selection dialog with Request Detail behind and Patient Detail in front

Once the appropriate patient is selected, click **OK**. The patient context in EHR will change at this point. Warnings may display if applicable, such as unsigned orders, for the previously selected patient.

#### 4.4.4.1.4 Change Prescriber

See Section 4.4.3.

#### 4.4.4.1.5 Deny Renew Request

The person processing the queue may be able to ascertain that the request will not be approved and choose to do a deny early in the process, or the request may be limited to deny only (e.g., if prescriber cannot be matched). Potential reasons to deny early in the process include that the patient is deceased or not in the database, the medication is not in the database, or that there is insufficient information in the request to determine the patient, prescriber, or medication.

To deny a request from the **Renewal Requests Unmapped** tab list, right-click the line item and select **Deny Renew Request**.

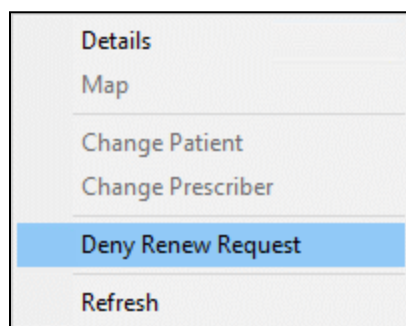


Figure 4-24: Deny Renew Request context menu option

The **Reason for Denial** dialog displays. Select the appropriate reason or select **Enter Free Text** and type in the desired message. In most cases, the listed reasons should be sufficient and free text should not be necessary. The full list of available reasons includes:

- Patient Unknown to the Provider
- Patient never under Provider care
- Patient no longer under Provider care
- Patient has requested refill too soon
- Medication never prescribed for the patient
- Patient should contact Provider first
- Fill/Refill not appropriate
- Patient needs appointment

- Prescriber not associated with this practice or location
- Request already responded to by other means (e.g. phone or fax)
- Medication denied at patient request
- Patient had allergy to requested medication
- Medication has been discontinued

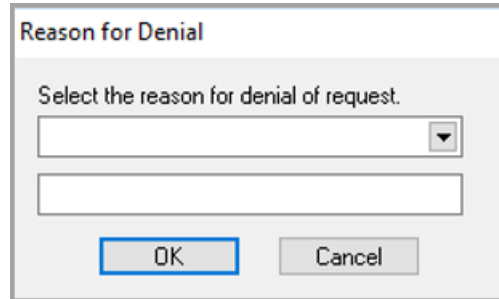


Figure 4-25: Reason for Denial dialog

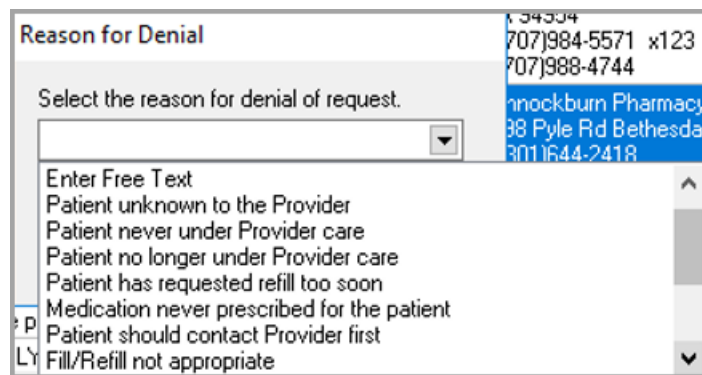


Figure 4-26: Reason for Denial dialog with some reason options displayed

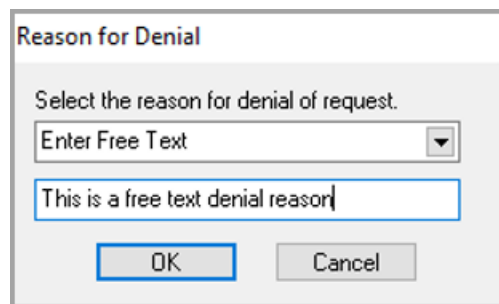


Figure 4-27: Reason for Denial dialog with free text message

After selecting or typing in the reason, click **OK** to send the Deny message.

### 4.4.5 Denied eRx Report

This tab displays the requests that have been denied by the prescriber or queue manager. The denied requests display for purposes of auditing and accountability. The columns present include the following:

- Request Denied on
- Request Date/Time
- Patient Name Date of Birth Gender Phone
- Request Details
- Prescriber
- Pharmacy Information
- Request Q Manager (Activity Action User)
- Reason Request Denied (Activity Action)
- Request Type

The user may sort the list by any of the columns by clicking in the column header. Click once to sort low to high or A–Z; click a second time to sort high to low or Z–A. A small light gray triangle will display on the sorted column pointing up or down depending on the sort method (Figure 4-28).

Request Denied on	Request Date/Time	Patient Name Date of Birth Gender Phone	Request Details	Prescriber	Pharmacy Information	Request Q Manager (Activity Action User)	Reason Request Denied (Activity Action)	Request Type
06/30/2020 13:47	06/30/2020 13:46	mafour.PATIENT (03/15/2000) Female	CARBIDOPA/LEVODOPA 25/100 TAKE 1 TABLET BY MOUTH FOUR TIMES A DAY D:30 QTY:30 RF:2 DAW:NO Indication: Immunization	DEMO.PROVIDER ...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	POSTMASTER	AF-Pharmacy RX# has been processed before. Please contact provider.	RxRenewal
06/30/2020 13:46:50	06/30/2020 13:40	DEMO.PATIENT ONE.TW0 (05/07/2015) Female (555)555-4731	CARBIDOPA/LEVODOPA 25/100 TAKE 1 TABLET BY MOUTH FOUR TIMES A DAY D:30 QTY:30 RF:3 DAW:NO Indication: Immunization	DEMO.PROVIDER ...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	DEMO.PROVIDER MN	AA-Patient unknown to the Provider	RxRenewal
06/30/2020 13:46:50	06/30/2020 13:38	DEMO.PATIENT (05/07/2015) Female (555)555-4731	CARBIDOPA/LEVODOPA 25/100 TAKE 1 TABLET BY MOUTH FOUR TIMES A DAY	DEMO.PROVIDER ...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	DEMO.PROVIDER MN	AF-Duplicate of request already processed by provider	RxRenewal

List restricted to Date Range: 02-Jun-2020 to 02-Jul-2020

Change Date Range

Close

Figure 4-28: Denied eRx Report

The display is limited by date range, and the default is for the past 30 days. The user may adjust the date range displayed by clicking the **Change Date Range** button. This opens the **Date Range** dialog to select the **Begin Date** and the **End Date** (Figure 4-29).

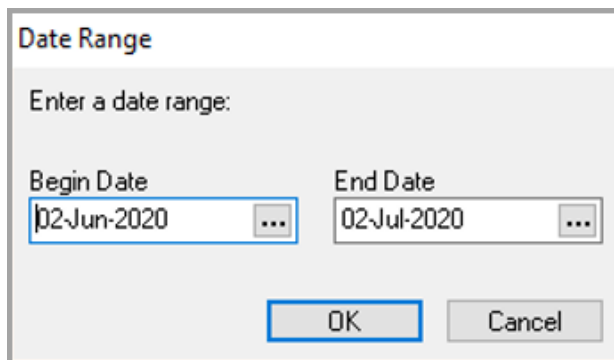


Figure 4-29: Date Range dialog to select the Begin Date and End Date

The user may select an action by right-clicking the line item and selecting from the menu. Actions available on this tab include **Details** and **Refresh** (Figure 4-30).

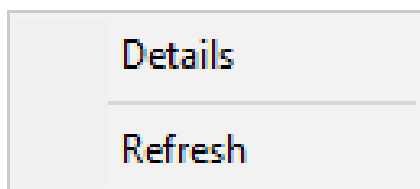


Figure 4-30: Context menu for Denied eRx Report tab

**Refresh** will update the contents for the entire component. The Details option is described in Section 4.4.2.

#### 4.4.6 Change Requests

The **Change Requests** tab, when Change is enabled, will show all change requests (which include validation requests). There are option-button controls to adjust the view to unmapped, pending review, or unsigned.

Change requests will be enabled in a future EHR patch.

### 4.5 Surescripts Mailbox Component

The Surescripts Mailbox (also called SS Mailbox or Mailbox) is a new component that must be added to the EHR GUI template before prescribers can manage their incoming requests from Surescripts. This component's content is specific to the logged-in user.



### 4.5.1 Adding the Component

The SS Mailbox is a button-style component suitable to add to the header bar used in most EHR templates, similar to the **Reminders**, **Postings**, and **Signature** buttons. Add the component to an EHR Template as usual.



Figure 4-31: Surescripts Mailbox button

The component includes a count of renew requests, change requests, and validation (prescriber authorization) requests. The properties of this object allow the site to change the caption text and the colors on the count.

Properties for Surescripts Mailbox	
Property	Value
TOP	17
LEFT	428
HEIGHT	30
WIDTH	30
ALIGN	None
ANCHORS	<input checked="" type="checkbox"/> Top; Left
CAPTIONCOLOR1	<span style="background-color: blue; color: white;"> </span>
CAPTIONCOLOR2	<span style="background-color: red; color: white;"> </span>
CAPTIONTEXT	SS Mailbox
<input type="button" value="OK"/> <input type="button" value="Cancel"/> <input type="button" value="Apply"/>	

Figure 4-32: Surescripts Mailbox properties

**CAPTIONCOLOR1** sets the color of the count when there is no selected patient or when the selected patient has no pending requests.

**CAPTIONCOLOR2** sets the color of the count when the selected patient has pending requests.

The function of the component is discussed in the sections below.

#### 4.5.2 Add Access to the Component

Access to the SS Mailbox component is set through the APSP SS MAILBOX ACCESS parameter (Section 3.2). Prescribers who use the Surescripts network and are set up to receive requests should be given access. If a prescriber does not use the Surescripts system, they do not require access to this component. Likewise, non-prescribers do not require access to this component.

#### 4.5.3 Orientation to the Surescripts Mailbox

The SS Mailbox component uses the group layout. In addition, there is a legend area and a date range selector.

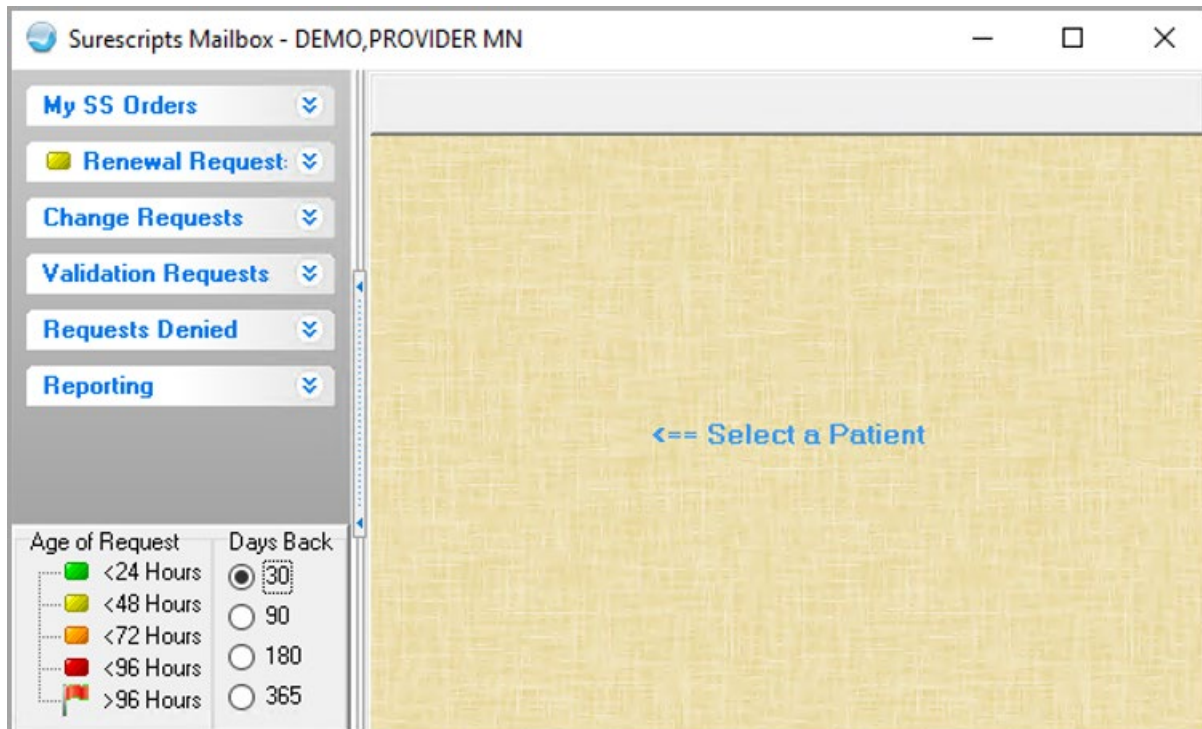


Figure 4-33: The Surescripts Mailbox default view

The groupings are:

- **My SS Orders** – Shows all orders sent by the logged-in user during the date range selected, sorted by patient name.

- **Renewal Requests** – Shows all pending renewal requests from the date range selected, sorted by patient name, and shows an icon denoting the age of the oldest request in the group if there are any pending requests.
- **Change Requests** – When enabled by a future EHR patch, this will show all pending change requests that are not requesting validation of prescriber information from the date range selected, sorted by patient name, and will show an icon denoting the age of the oldest request in the group if there are any pending requests. Until it is enabled, this group will be blank.
- **Validation Requests** – When enabled by a future EHR patch, will show all pending change requests that seek validation of prescriber information from the date range selected, sorted by patient name, and will show an icon denoting the age of the oldest request in the group if there are any pending requests. Until it is enabled, this group will be blank.
- **Requests Denied** – Shows the requests for the prescriber within the date range selected that have been denied, sorted by patient name.
- **Reporting** – Allows the user to see reports of their Surescripts requests with varying level of detail and within selectable time frames.

The legend shows the icons and colors used to denote the age of the request, with time frames of less than 24 hours, less than 48 hours, less than 72 hours, less than 96 hours, and greater than 96 hours.

The component defaults to a date range of 30 days back from today. The user may adjust the date range by selecting a different option button. The other options include 90 days, 180 days, or 365 days back from today.

**Note:** The larger the date range, the slower the component will respond.

## 4.6 Prescriber Processing of Requests

RPMS analyzes all incoming requests and compares the data to see if:

- A matching order exists in the database
- The patient name, birthdate, and sex match the patient in the request
- The prescriber matches
- The orderable item matches

If the patient, prescriber, and orderable item match an order in the system, the request is sent to the SS Mailbox and a notification is sent to the prescriber.

If the items do not match, they are sent to the Surescripts Queue (see Section 4.3) for mapping or denial.

In a very few cases, the requests may not go to either location, but instead be rejected by the system. This situation would be rare and is usually related to accidental duplicate requests being sent by the pharmacy. When this happens, the prescriber will receive an informational notification about the request.

## 4.6.1 Notifications

A variety of notifications are available for Surescripts requests, in addition to the existing notifications related to Surescripts processing such as the transmission failure notifications. The most common new notification is that the prescriber has Surescripts requests to process. Another new notification is sent when a prescriber processes a request and does not sign the resulting order; it is a variation of the “unsigned order” notification. A duplicate request notification should be rare and would occur if the pharmacy sends additional requests for the same renew transaction after one was already processed (e.g., as might occur with a communications glitch). If a request is received but the RPMS order number sent by the pharmacy does not exist or matches to an RPMS order number where the patient and prescriber information is mismatched to the request information, the request is rejected or sent to the SS Queue and the prescriber receives a notification. The new notifications are discussed in more detail below.

### 4.6.1.1 Surescripts Pending Request

The Surescripts Pending Request notification (Figure 4-34) alerts the prescriber to one or more pending requests that must be processed. There will be a single entry of this notification as long as there are pending requests. If the notification is processed or removed, it will regenerate if there are still pending requests or if a new request is received.



Figure 4-34 A portion of the Notifications for All Patients component with the Surescripts Pending Request notification

The Surescripts Pending Request notification (Figure 4-35) is not associated with a specific patient because it is simply denoting that one or more pending requests are present, and these may be related to multiple patients.

To process this notification, use the usual processes of double-clicking the notification, or highlighting the notification and clicking **Selected** or clicking **All**.



Figure 4-35: Notification Process options

Processing the notification opens the SS Mailbox. From there, the prescriber may process the requests as described in Section 4.6.2.

#### 4.6.1.2 Surescripts Request Requires Electronic Signature

The **Surescripts Request Requires Electronic Signature** notification (Figure 4-36) is similar to the usual unsigned order notification but has specific wording related to Surescripts. This notification will be sent when a request has been processed but not yet signed.

**Note:** If an unsigned order is deleted prior to signing, the request will revert to the unprocessed state, and if needed, the Surescripts Pending Request notification will regenerate.

Notifications for All Patients			
	Patient	Location	Notification
	DEMO,PATIENT THREE (112212)		Surescripts request requires electronic signature.

Figure 4-36: A portion of the Notifications for All Patients component with the Surescripts request requires electronic signature notification

Processing this notification will follow the same behavior as the current unsigned order notification.

### 4.6.1.3 Duplicate Requests

Occasionally, a pharmacy may accidentally send more than one request for the same patient and medication at the same time. If one or more duplicates are received prior to processing, they are associated with the request that is displayed to the prescriber and the prescriber may view those duplicates (see Section 4.6.2). If one or more duplicates are received after the prescriber has processed the request, the prescriber will receive a notification for each duplicate.

There are two duplicate request notifications (Figure 4-37 and Figure 4-38), one for a standard duplicate, and another for when the patient does not match the information on the order number sent. A portion of the patient name and the health record number are appended to the title of these notifications when the system can determine the patient.

Notifications for All Patients			
	Patient	Location	Notification ▲
	 DEMO,PATIENT NINE (112312)		DEMO,PATI (112312)Duplicate SS Request received

Figure 4-37: A portion of the Notifications for All Patients with the Duplicate SS Request received notification

Notifications for All Patients			
	Patient	Location	Notification ▲
	 DEMO,MATWO (77)		DEMO,MATW (77)SS prescription number received that did not match patient.

Figure 4-38: A portion of the Notifications for All Patients with the Duplicate SS prescription number received that did not match patient notification

These notifications are information only, so processing these notifications will bring up additional information (Figure 4-39 and Figure 4-40). The requests may be retained for future reference or deleted.

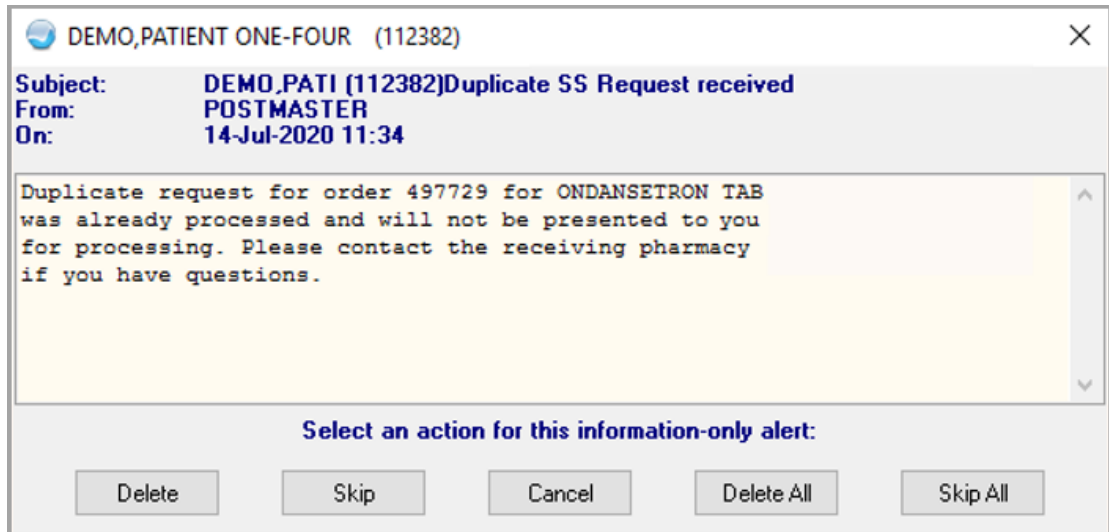


Figure 4-39: The Duplicate SS Request received notification details

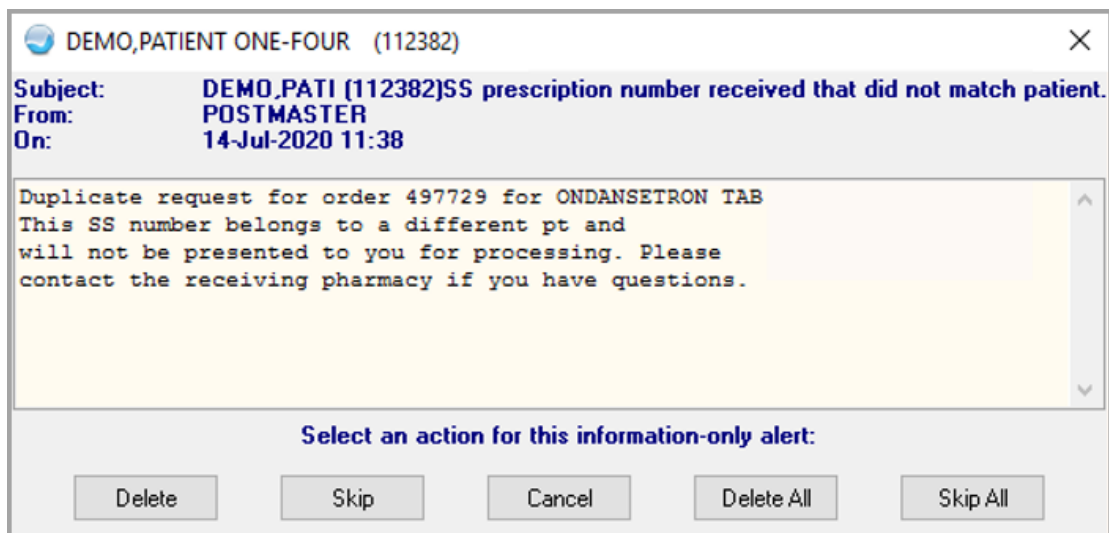


Figure 4-40: The SS prescriptions number received that did not match patient notification details

#### 4.6.1.4 PON Does Not Match Our Records

When the request contains a Prescriber Order Number (PON) that does not exist in the RPMS system, the PON Does Not Match Our Records notification is sent to the prescriber. A portion of the patient name and the health record number are appended to the title of the notification when the system can determine the patient.

Notifications for All Patients			
	Patient	Locati...	Notification
 	DEMO,PATIENT ONE-FOUR (112382)		DEMO,PATI (112382)PON does not match our records

Figure 4-41: A portion of the Notifications for All Patients with the PON does not match our records notification

This notification is information only, so processing will simply bring up additional information. The requests may be retained for future reference or may be deleted.

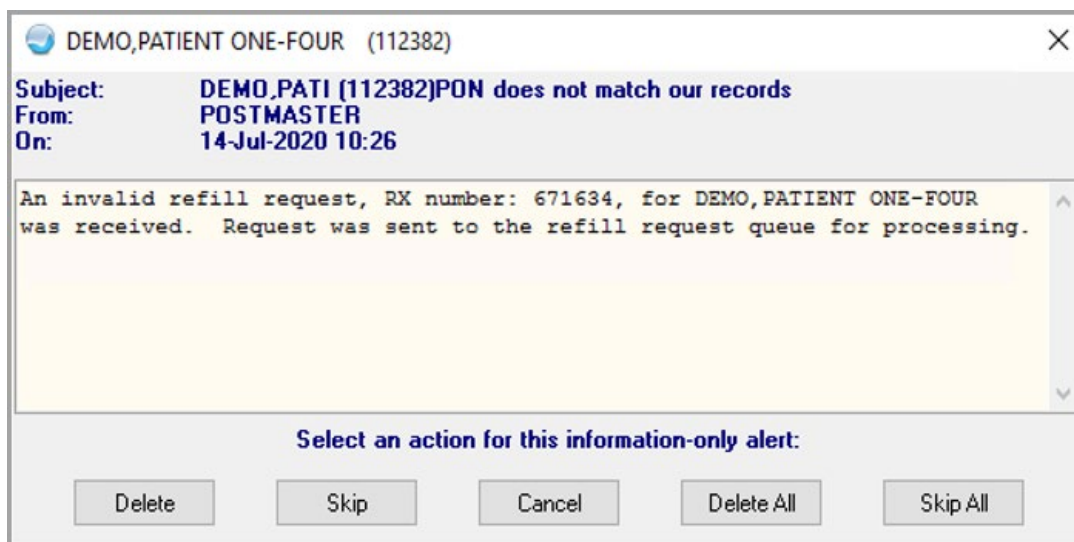


Figure 4-42: The PON Does Not Match Our Records notification details

## 4.6.2 SS Mailbox

The SS Mailbox is the prescriber's main component for all Surescripts information and request processing. As noted in Section 4.5.3, the mailbox has sections to show all SS orders; renewal, change and validation requests; denials; and reporting. All information in this component is specific to the logged in user. When processing requests, the procedures and screens seen will be different depending on which type of request is being processed.

**Note:** While Validation requests are listed separately in the SS Mailbox because different screens are needed to obtain the information to process the request, they are actually a subtype of a Change request from the perspective of the Surescripts transaction types.

The Mailbox may be accessed by clicking the **SS Mailbox** button or by processing the Surescripts Pending Request notification (Figure 4-43).

The default view has all the groups collapsed.



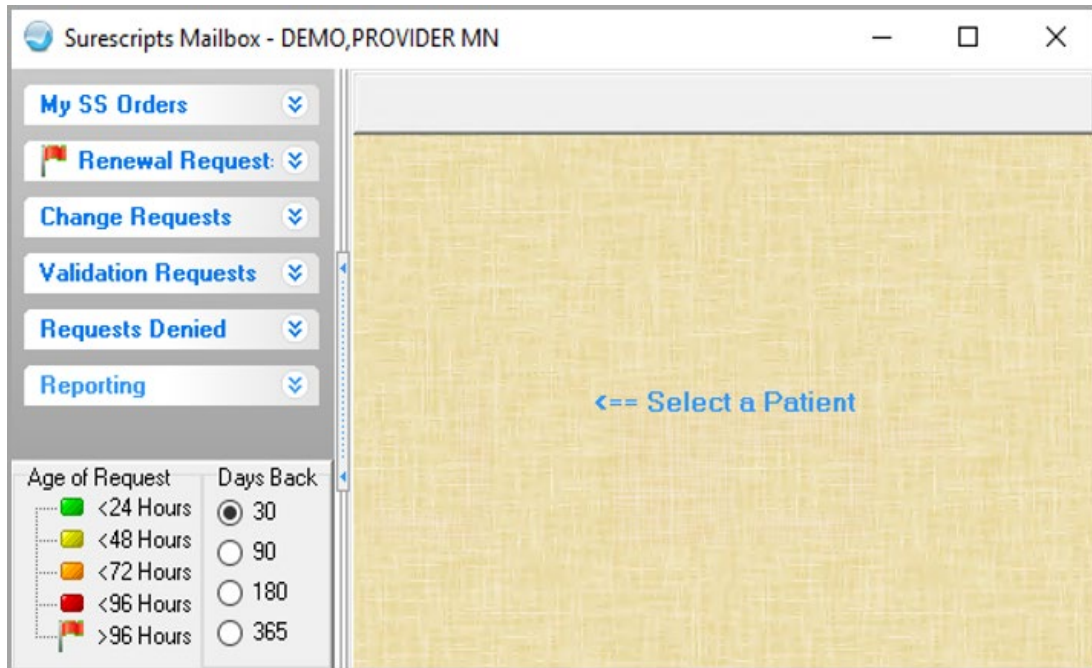


Figure 4-43: Surescripts Mailbox

Clicking a group name expands the group to list the patient names (Figure 4-44).

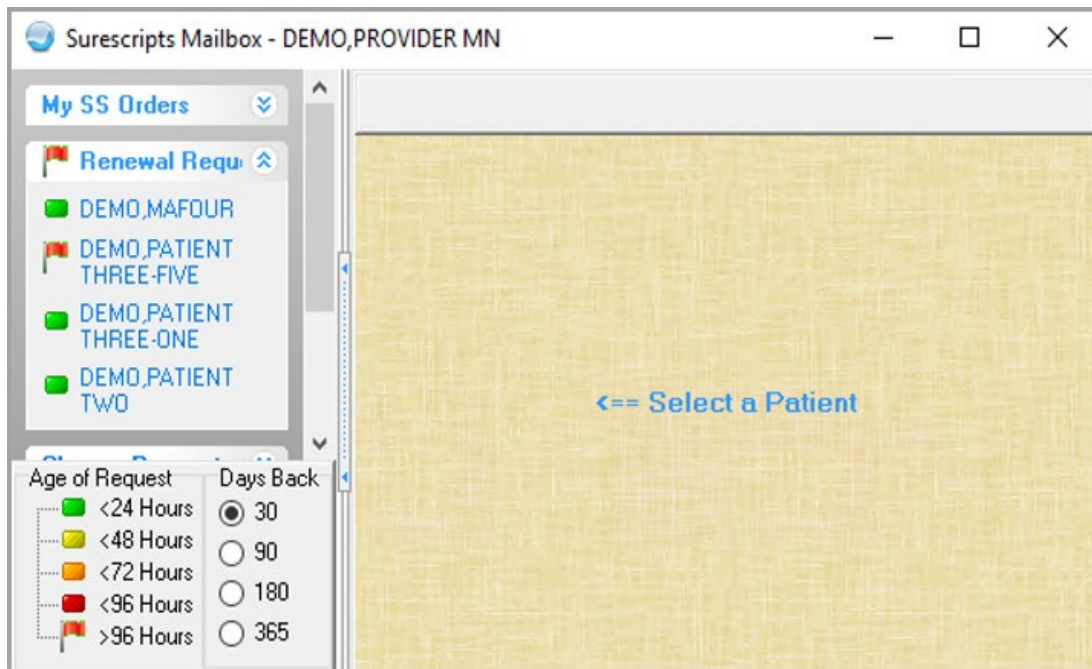


Figure 4-44: Surescripts Mailbox expanded group

The majority of the actions taken within this component will be inside one of the group sections after selecting a patient, but there is a **Refresh** function (Figure 4-45) that can be accessed by right-clicking in a blank space in the **Group** listing. Selecting **Refresh** reloads the contents of the component and reverts to the default view.

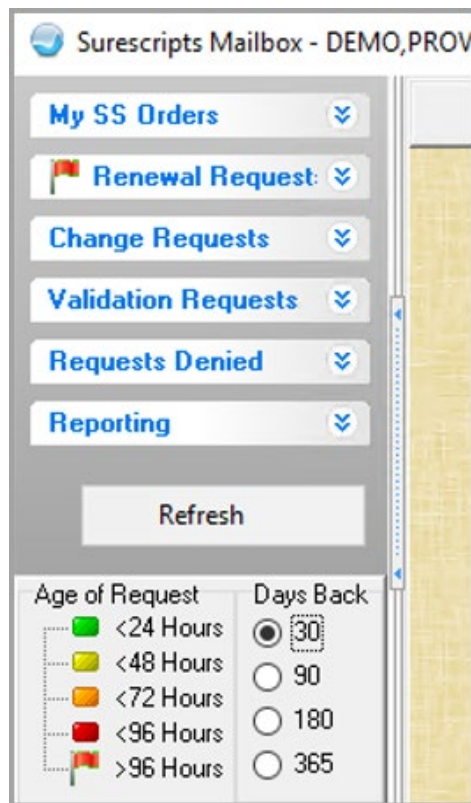


Figure 4-45: Surescripts Mailbox Refresh action

#### 4.6.2.1 Renewal Requests

Renewal requests are those that ask for an existing order to be renewed or have refills added. In most cases there will be an existing order in EHR to match the request to, though there may be instances where the original order was written entirely on paper and does not exist in EHR at all, especially when sites are first starting to use eRx or EPCS.

##### 4.6.2.1.1 Processing Step One

To process a Renewal request, start by opening the **Renewal Request** group and select a patient. The icons to the left of the patient name indicate how old the request is, according to the legend at the bottom. Surescripts guidelines state that requests should be processed within 72 hours, so prescribers should check for and process requests regularly.

#### 4.6.2.1.2 Processing Step Two

Once a patient is selected, the pending requests are listed in the right pane (Figure 4-46). The prescriber may double-click the request to see the details (see Section 4.4.2) or right-click and select **Details**. To process the request, right-click and select **Process Request**.

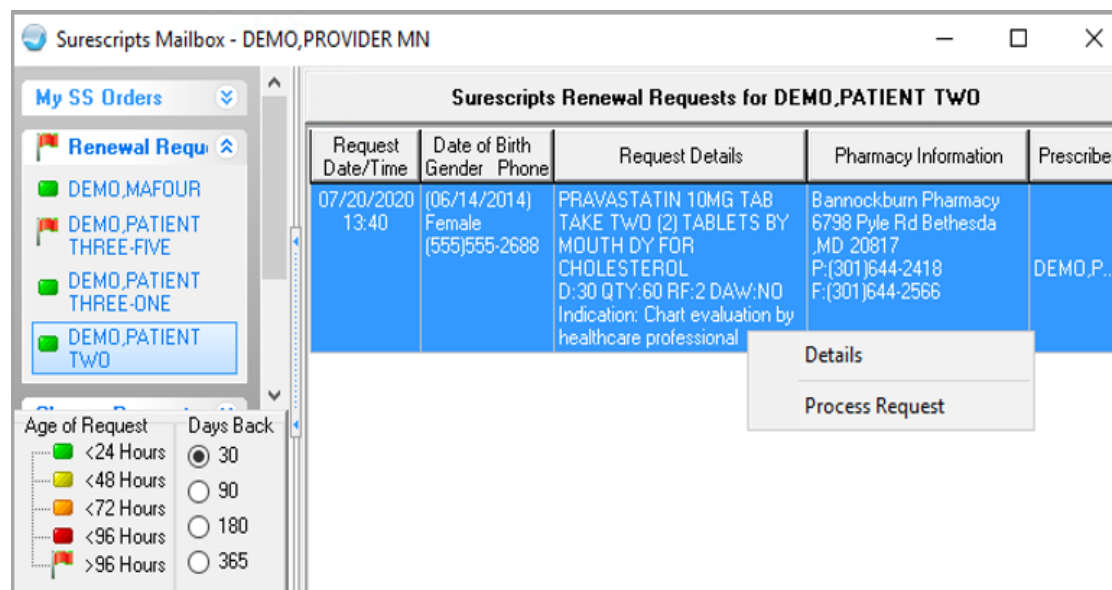


Figure 4-46: A portion of the SS Mailbox with the right-click actions of Details and Process Request

#### Confirm Warning

If the prescriber accessed the Mailbox from a notification, the **Confirm** warning (Figure 4-47) may display if the patient context changes (e.g., a patient was already selected before opening the Mailbox and then the user selects a different patient and starts to process a request). Click **Yes** to continue processing the new patient, or **No** to remain on the original patient.

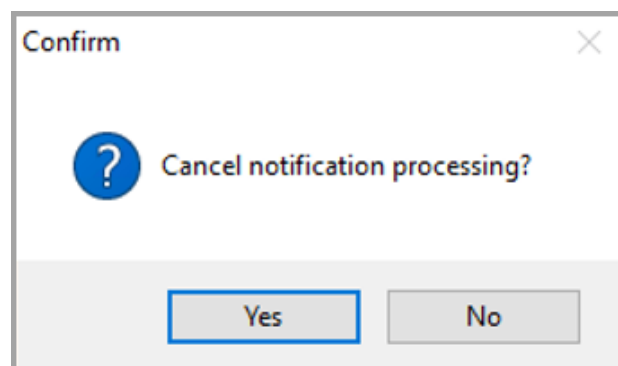


Figure 4-47: The Confirm warning when changing patients

## Visit Context

If the system is unable to determine a visit context for the renewal action, the **Select a Location** box displays.

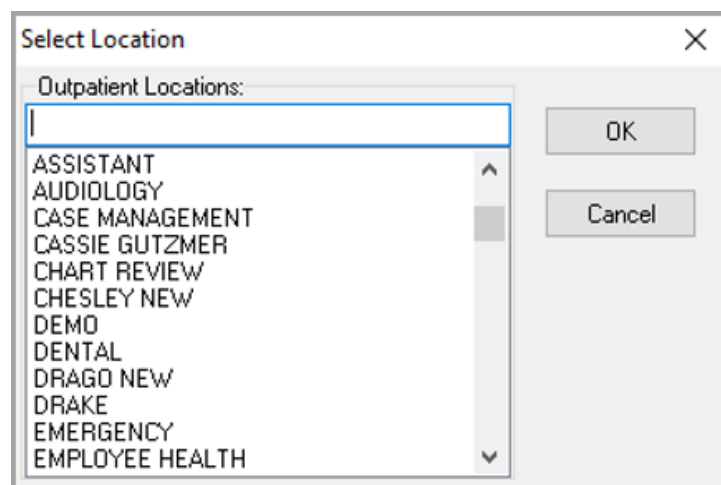


Figure 4-48: Select Location dialog

If a location is not selected, a warning message displays that a location must be selected to continue.

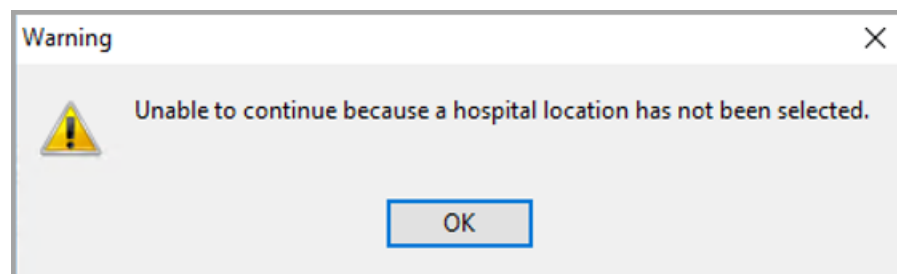


Figure 4-49: The warning message for hospital location

Click **OK** to close the warning. Right-click the item and select **Process Request** to start again.

### 4.6.2.1.3 Processing Step Three

The **Renewal Request Action** dialog (Figure 4-50) opens. The requesting pharmacy name is appended to the title. The window shows the normal ordering dialog elements along with additional information as follows:

- **Ordered Med** – This is the medication order as it exists in EHR.
- **Dispensed Med** – This is the medication as it was dispensed from the pharmacy. It will most often be the same, but may differ if the original was a brand item and the pharmacy dispensed generic, or if a change request was done non-electronically and the EHR order was not updated, etc.

- **Action Pane** – The actions available will depend on factors such as CS schedule of the requested medication, or whether the incoming message matched the existing order details or needed mapping before processing.
- **Related Requests** (if applicable) – This will be present only if duplicate requests were received. Duplicate requests should be rare.
- **Authorized Fills** – This is the total number of fills being requested and will include the fill for now plus any refills. For example, if the pharmacy requests one fill, the Authorized Fills is 1. However, if the pharmacy requests a fill for now plus 2 refills in the future, the Authorized Fills will be 3.
- **Details** – This allows the prescriber to view the details of the request as described in Section 4.4.2.

In addition, there is an action button that initially reads Select Action. The label will update based on the action selected, so that if Accept is selected in the Action pane, the button label will read Accept. This button, similar to the **Accept Order** button for new eRx orders, is not selectable until the prescriber has reviewed all the summary information for the order.

**Renewal Request Action from Bannockburn Pharmacy**

**ETODOLAC TAB,SA**

**Ordered Med:** ETODOLAC 500MG SA TAB Sig: TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK Qty: 30 Days: 30 Refills: 0

**Dispensed Med:** ETODOLAC 500MG SA TAB Quant:30 Tablet Sig: TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK

**Dosage Complex**

Dosage	Quantity	Refills	Route	Schedule
See Sig			SEE SIG	AS WRITTEN <input type="checkbox"/> PRN
500MG	2.4656		ORAL	QAM
1000MG	4.9312			QID
				QPM
				TID
				TODAY
				UD
				WEEKLY
				AS WRITTEN

**Patient Instructions:** WITH FOOD OR MILK

**Days Supply:** 30 **Quantity:** 30 **Refills:** 1 **Clinical Indication:** Low back pain M54.5  Chronic Med  Dispense as Written

**Pick Up:**  Clinic  Mail  Window  Outside Pharmacy - eRx  Outside Pharmacy - Print

**Pharmacy:** Bannockburn Pharmacy 6798 Pyle Rd Bethesda MD 20817

**Notes to Pharmacist:**

**Priority:** ROUTINE  Discharge Medication

**2 Authorized Fills**

**Details...**

**Select Action**

**ADR's**

**ETODOLAC TAB,SA**  
 TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK WITH FOOD OR MILK  
 Quantity: 30 Tablet Days: 30 Refills: 1 \*Chronic Med: NO Dispense as Written: NO Indication: Low back pain Pharmacy: Bannockburn Pharmacy 6798 Pyle Rd Bethesda MD 20817  
 Date Written: 03-Jul-2020

**RECEIVING PHARMACY:**Bannockburn Pharmacy  
 6798 Pyle Rd , Bethesda, MD 20817  
 P:3016442418

**PATIENT:**  
 Demo, Patient Three 02-Oct-1974 F  
 BOX 147, ALB, NEW MEXICO 87119  
 H:5555555060  
 W:

Figure 4-50: Renewal Request Action dialog

Initially, none of the actions are selected (Figure 4-51). Specific actions may not be available depending on the type of request and whether the request had to be mapped or not. Prescribers should carefully review the **Ordered** and **Dispensed** medication fields for differences prior to taking action.

The actions have the following functionality:

- **No Action** – This is the same as closing the dialog without selecting any action. The request can be processed at a later time. The request will initially drop off the patient group but be restored if the component is refreshed or closed and re-opened.

**Renewal Request Action from Bannockburn Pharmacy**

ETODOLAC TAB.SA

**Ordered Med:** ETODOLAC 500MG SA TAB Sig: TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK Qty: 30 Days: 30 Refills: 0

**Dispensed Med:** ETODOLAC 500MG SA TAB Quant:30 Tablet Sig: TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK

**Dosage Complex**

Dosage	Route	Schedule
See Sig	SEE SIG	AS WRITTEN <input type="checkbox"/> PRN
500MG 2.4656	ORAL	QAM
1000MG 4.9312		QID
		QPM
		TID
		TODAY
		UD
		WEEKLY
		AS WRITTEN

**Patient Instructions:** WITH FOOD OR MILK

Days Supply: 30 Quantity: 30 Refills: 1 Clinical Indication: Low back pain M54.5  Chronic Med  Dispense as Written

**Pick Up:**  Clinic  Mail  Window  Outside Pharmacy - eRx  Outside Pharmacy - Print

Pharmacy: Bannockburn Pharmacy 6798 Pyle Rd Bethesda MD 20817  Discharge Medication

Priority: ROUTINE

Notes to Pharmacist:

**0 Authorized Fills**

Details...

No Action

ADR's

ETODOLAC TAB.SA  
TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK WITH FOOD OR MILK  
Quantity: 30 Tablet Days: 30 Refills: 1 \*Chronic Med: NO Dispense as Written: NO Indication: Low back pain Pharmacy: Bannockburn Pharmacy 6798 Pyle Rd Bethesda MD 20817  
Date Written: 03-Jul-2020

RECEIVING PHARMACY: Bannockburn Pharmacy  
6798 Pyle Rd, Bethesda, MD 20817  
P: 3016442418

PATIENT:  
Demo, Patient Three 02-Oct-1974 F  
BOX 147, ALB, NEW MEXICO 87119  
H: 5555555060  
W:

Figure 4-51: Renewal Request Action dialog with No Action selected

- **Accept** – This will create a new order with the information as requested by the pharmacy with no editing allowed for any field.

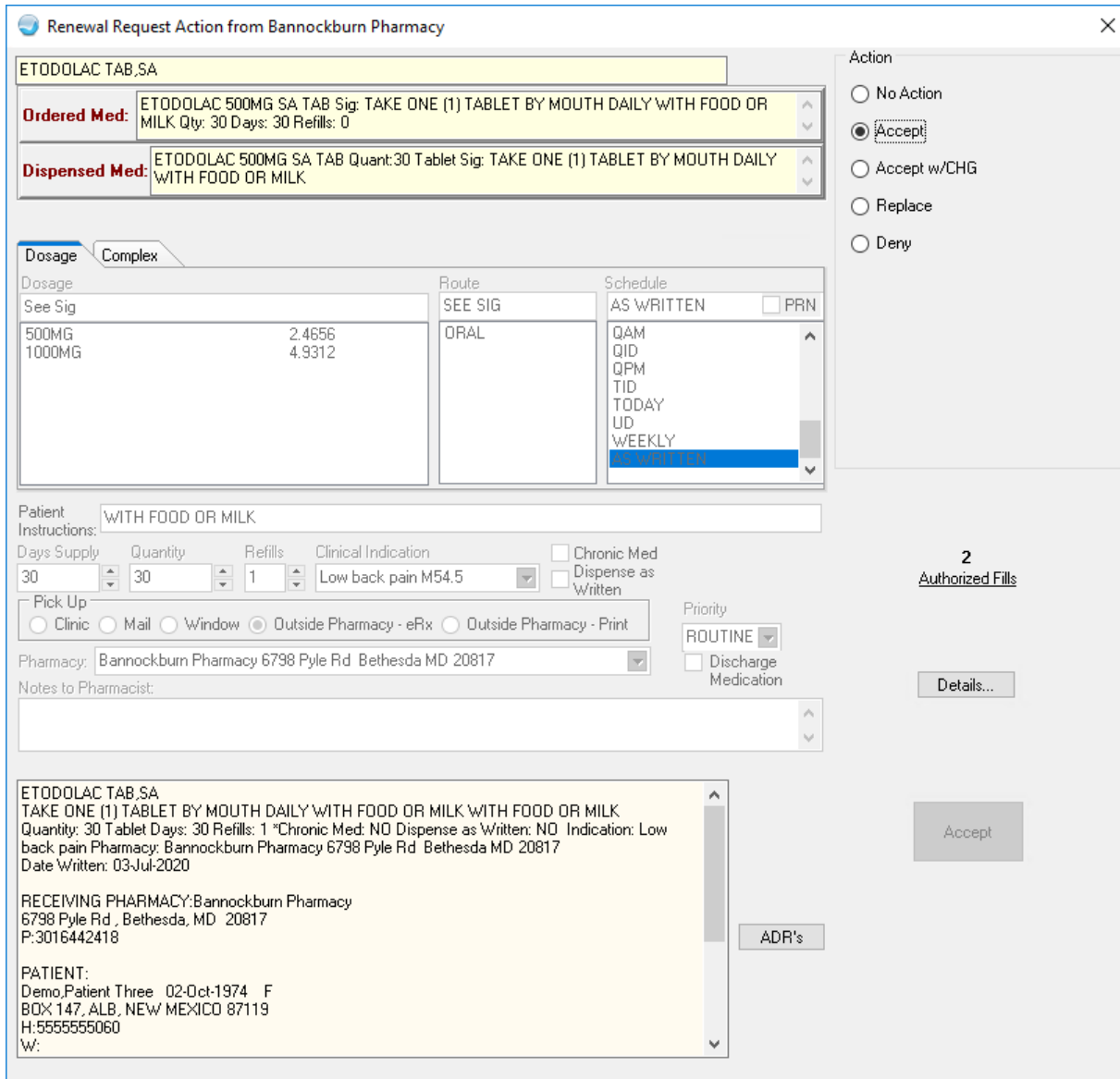


Figure 4-52: Renewal Request Action dialog with Accept selected

- **Accept w/CHG** – This creates a new order with the information as requested by the pharmacy but allows the prescriber to adjust the refills only (Figure 4-53).



**Renewal Request Action from Bannockburn Pharmacy**

ETODOLAC TAB,SA

**Ordered Med:** ETODOLAC 500MG SA TAB Sig: TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK Qty: 30 Days: 30 Refills: 0

**Dispensed Med:** ETODOLAC 500MG SA TAB Quant:30 Tablet Sig: TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK

**Action**

No Action

Accept

Accept w/CHG

Replace

Deny

**Dosage** **Complex**

Dosage	Route	Schedule
See Sig	SEE SIG	AS WRITTEN <input type="checkbox"/> PRN
500MG 2.4656	ORAL	QAM
1000MG 4.9312		QID
		QPM
		TID
		TODAY
		UD
		WEEKLY
		AS WRITTEN

**Patient Instructions:** WITH FOOD OR MILK

**Days Supply:** 30 **Quantity:** 30 **Refills:** 1 **Clinical Indication:** Low back pain M54.5  Chronic Med  Dispense as Written

**Pick Up:**  Clinic  Mail  Window  Outside Pharmacy - eRx  Outside Pharmacy - Print

**Pharmacy:** Bannockburn Pharmacy 6798 Pyle Rd Bethesda MD 20817  Discharge Medication

**Priority:** ROUTINE

**2 Authorized Fills**

**Details...**

**Accept w/CHG**

**ADR's**

ETODOLAC TAB,SA  
TAKE ONE (1) TABLET BY MOUTH DAILY WITH FOOD OR MILK WITH FOOD OR MILK  
Quantity: 30 Tablet Days: 30 Refills: 1 \*Chronic Med: NO Dispense as Written: NO Indication: Low back pain Pharmacy: Bannockburn Pharmacy 6798 Pyle Rd Bethesda MD 20817  
Date Written: 03-Jul-2020

RECEIVING PHARMACY: Bannockburn Pharmacy  
6798 Pyle Rd, Bethesda, MD 20817  
P:3016442418

PATIENT:  
Demo, Patient Three 02-Oct-1974 F  
BOX 147, ALB, NEW MEXICO 87119  
H:5555555060  
W:

Figure 4-53: Renewal Request Action dialog with Accept w/CHG selected

- Replace** – This creates a new order with the information as requested by the pharmacy but allows editing of any field, including the medication (Figure 4-54). In order to create a legible order, the **Dosage**, **Route**, and **Schedule** fields are blanked out and the prescriber must re-select the values.

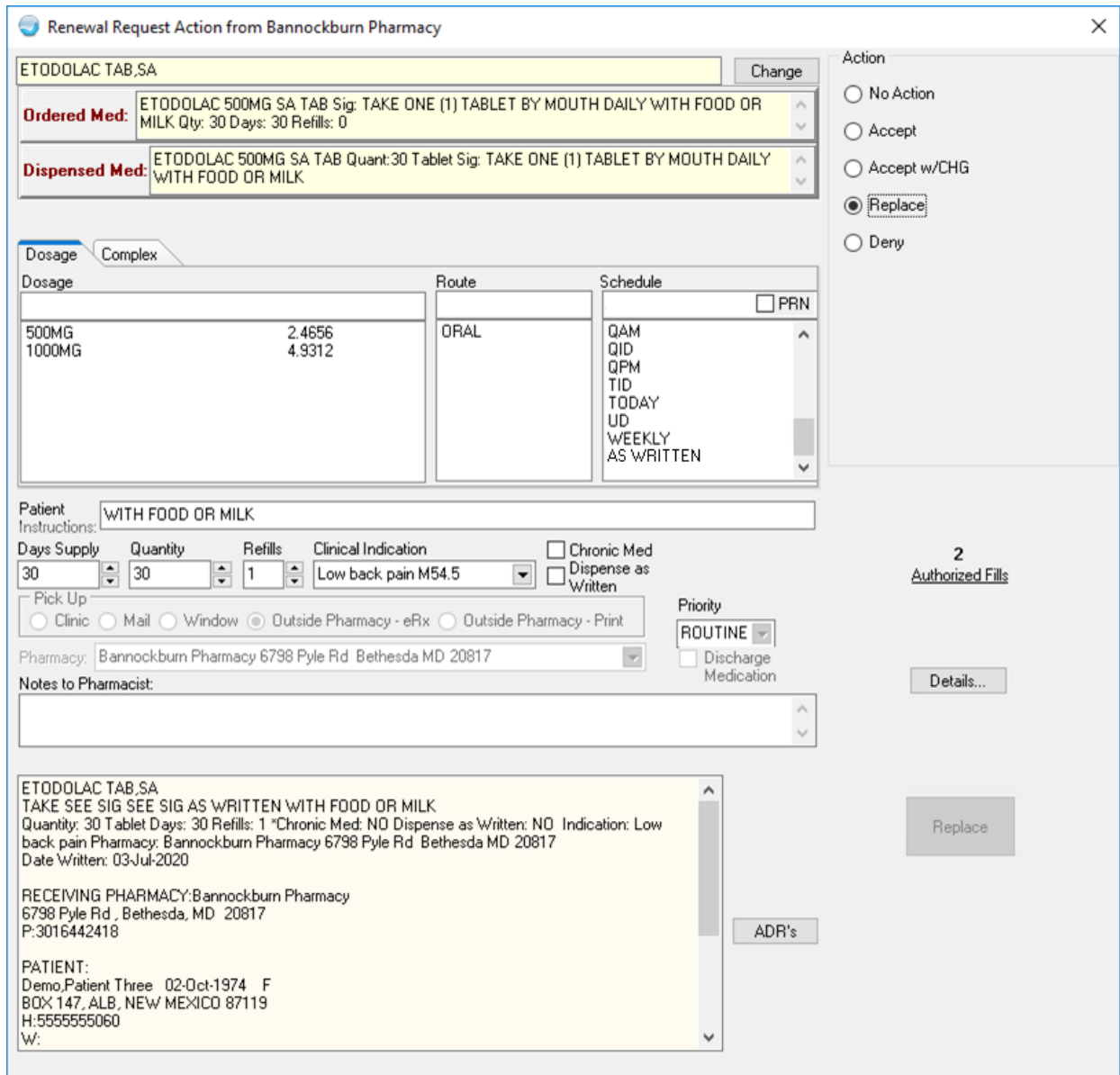


Figure 4-54: Renewal Request Action dialog with Replace selected

- Deny** – This will deny the request. The prescriber will select or type in a reason for the denial (Figure 4-55). The full list of denial reasons is listed in Section 4.4.4.1.5.

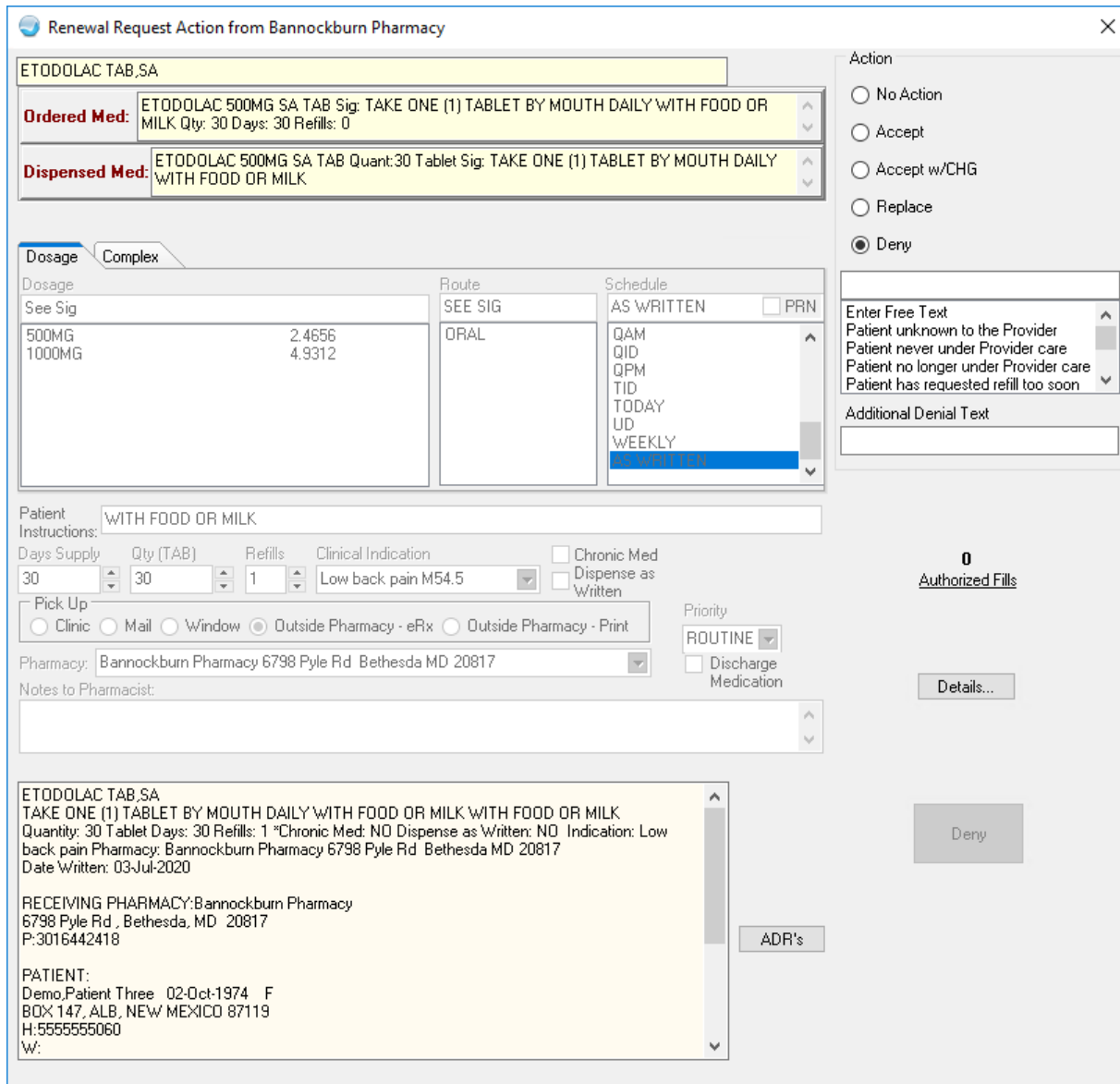


Figure 4-55: Renewal Request Action dialog with Deny selected

### Ordered Med and Dispensed Med Do Not Match

If the Ordered Med and Dispensed Med do not match, the user receives a warning message (Figure 4-56). In many cases this is because of a brand vs. generic mismatch but might also be because an order was originally on paper or a change was made via phone or other non-eRx means and the EHR order was not updated.

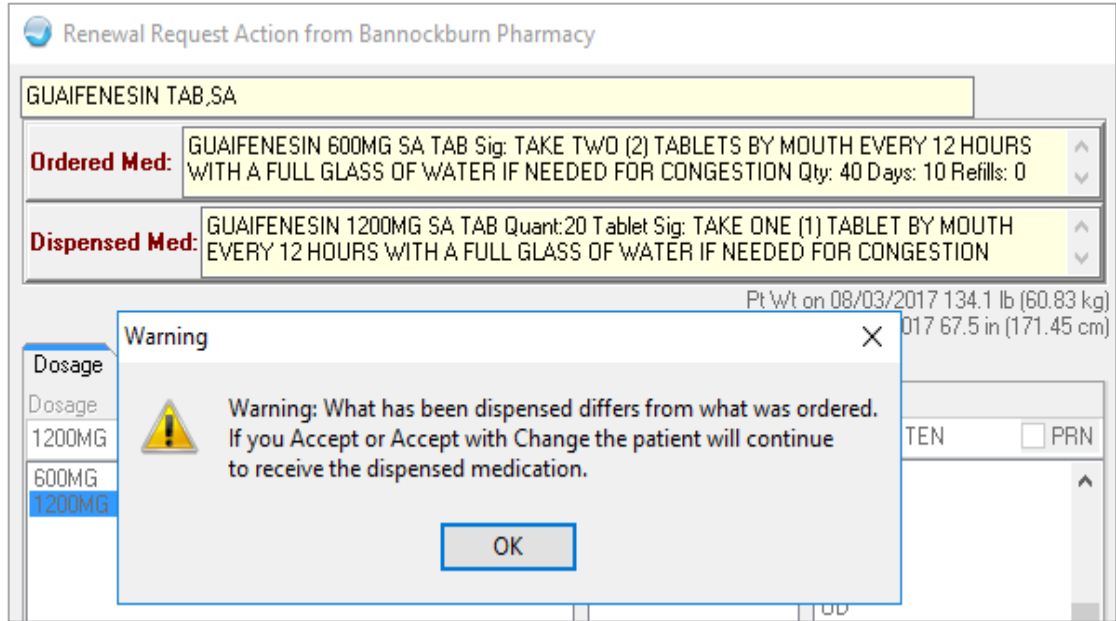


Figure 4-56: A portion of the Renewal Request Action dialog with Warning for medication dispensed mismatch

**Actions Not Selectable**

In some instances, specific actions may not be selectable (Figure 4-57). For example, Renewal requests for controlled substances (CS) may only be denied or replaced for legal reasons (Figure 4-58). Items that required mapping are similarly restricted as the return message will be slightly different from the incoming message.

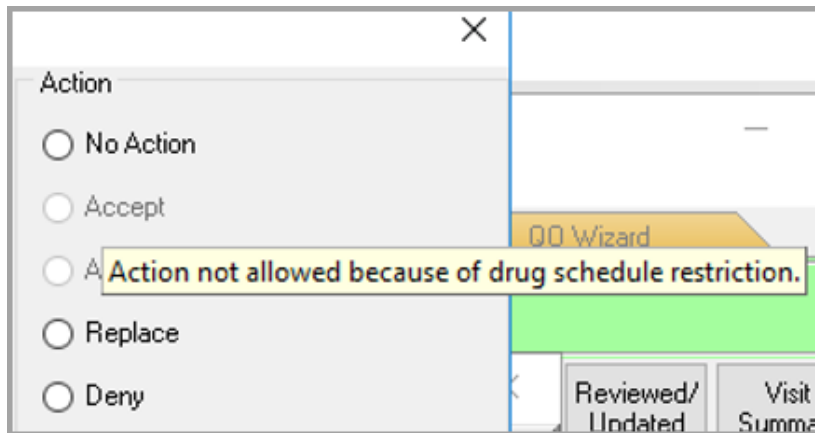


Figure 4-57: Action pane with CS hover text

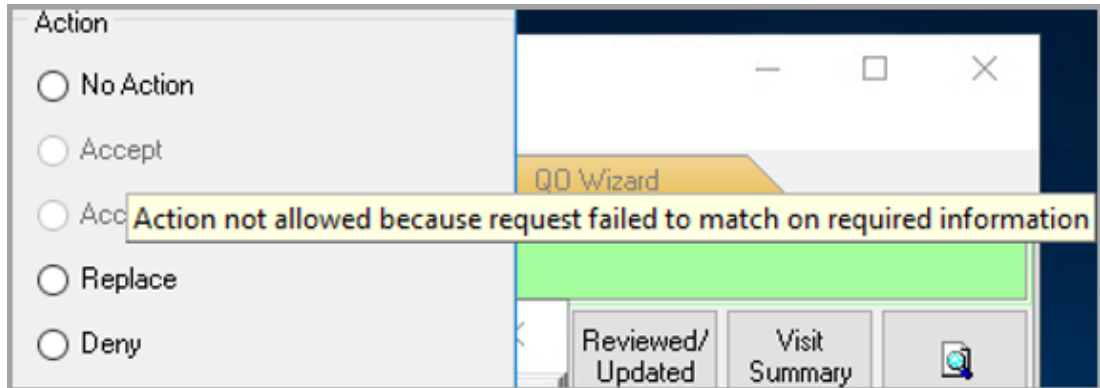


Figure 4-58: Action pane with mismatch hover text

In one additional instance, the prescriber may not be able to successfully select **Accept** or **Accept w/CHG** even when they are technically available. If the clinical indication in the request does not have a valid SNOMED CT code associated with it (e.g., by matching to an existing order), the incoming request may not result in a valid clinical indication within the EHR, and is often paired with a **Days Supply** of zero (Figure 4-59).

**Note:** Surescripts and the external pharmacies use the ICD-10 coding system and not the SNOMED CT coding system used in the EHR. It is possible that the information in the **Clinical Indication** field will show the associated ICD-10 terminology and not the original SNOMED CT terminology.

Figure 4-59: A portion of the Renewal Request Action dialog with Days Supply and Clinical Indication fields

Because a SNOMED CT coded clinical indication and a non-zero days' supply are required in the EHR, the order cannot be saved until the **Clinical Indication** and **Days Supply** fields are updated (Figure 4-60). The **Accept** and **Accept with Change** are available because the failure to save the order is not related to the specific request from the Surescripts pharmacy but is from internal IHS policies.

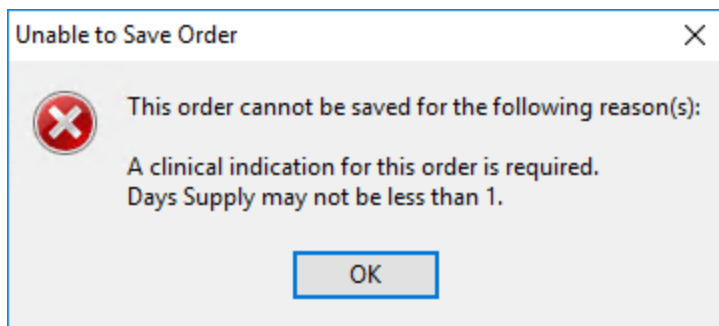


Figure 4-60: Unable to Save Order warning for Clinical Indication and Days Supply

Because of Surescripts and NCPDP rules, the **Clinical Indication** and **Days Supply** fields may not be edited unless the **Replace** action is selected. Therefore, if a prescriber sees the above error message, they should select the **Replace** action to open the fields for editing and adjust the **Days Supply** and **Clinical Indication** fields appropriately (Figure 4-61).

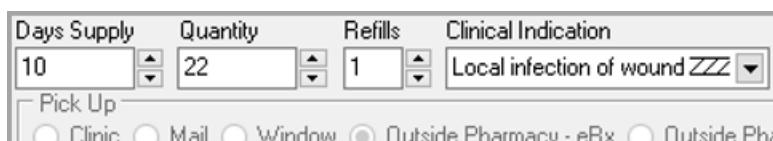


Figure 4-61: A portion of the Renewal Request Action dialog with updated Days Supply and Clinical Indication fields

#### 4.6.2.1.4 Processing Step Four

Once the request has been reviewed and the prescriber has selected an action, the prescriber must review the order details in the same manner as a new eRx order. Scroll down in the summary box to ensure all the text has been reviewed (Figure 4-62). Once at the bottom of the summary box, the **Action** button becomes selectable.

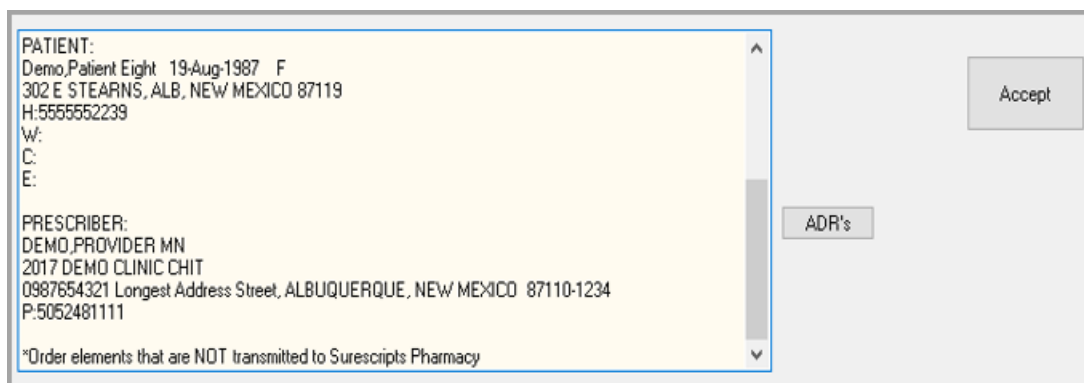


Figure 4-62: A portion of the Renewal Request Action dialog showing the summary pane scrolled to the bottom and selectable Action button

Click the **Action** button and the **Review/Sign Changes** window (Figure 4-63) displays. If the request contains a CS medication, the Electronic Prescribing of Controlled Substances (EPCS) rules and signature window applies.

The prescriber will not be able to create the Renewal Response for a CS medication if they are not set up for EPCS and are not EPCS enabled with Surescripts (Figure 4-64).

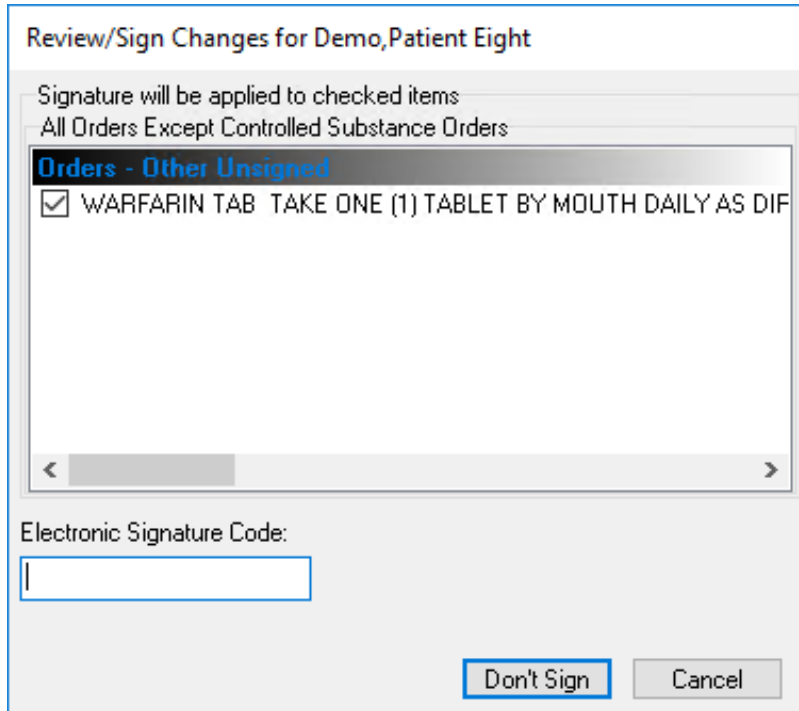


Figure 4-63: Review/Sign Changes window for non-CS medication

**Review/Sign Changes for Demo, Maone**

DEMO, MAONE  
 Date of Issuance: Jul 08, 2020  
 Provider: DEMO, PROVIDER MN  
 0987654321 Longest Address Street  
 ALBUQUERQUE, NEW MEXICO 87110-1234  
 DEA: AN1357905 DEA X: XN1357905

Signature will be applied to checked items

**Controlled Substance Orders - Two-Factor authentication required**

**Orders - Other Unsigned**

ACETAMINOPHEN/CODEINE TAB TAKE SEE SIG SEE SIG AS WR

By completing the two-factor authentication protocol at this time, you are legally signing the prescription(s) and authorizing the transmission of the above information to the pharmacy for dispensing. The two-factor authentication protocol may only be completed by the practitioner whose name and DEA registration number appear above.

Electronic Signature Code:   Force Hardcopy

Figure 4-64: Review/Sign Changes window for CS medication

The renewal response will transmit to the external pharmacy upon signature. The original order will be discontinued, and the new order will display in the Medication Management and Orders components.

**Transmission Failures**

Transmission failures (Figure 4-65) will be handled the same as for new prescription transactions. A notification of transmission failure (Figure 4-66) is received, and the user may choose to retransmit or print or contact the pharmacy by other methods.


Notifications for All Patients			
	Patient	Location	Notification
	DEMO, PATIENT THREE-EIGHT (112742)		DEMO, PATI (112742) ERROR: eRx did not transmit.

Figure 4-65: Notification for transmission failure



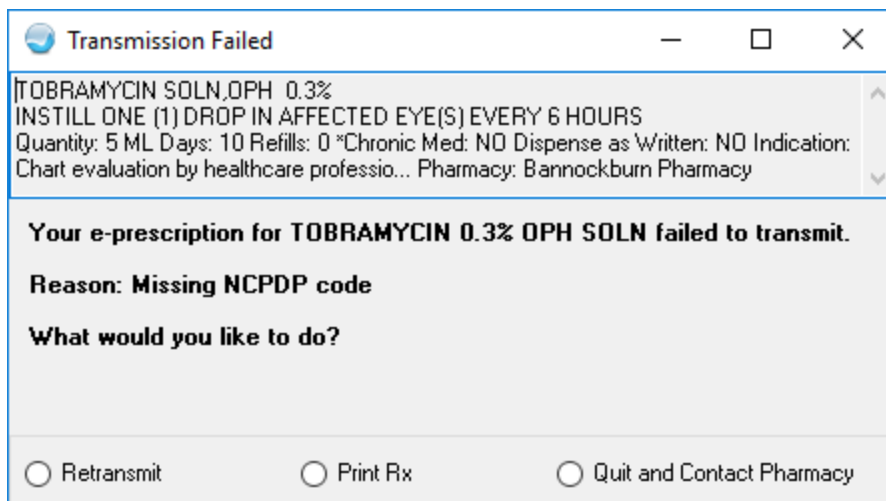


Figure 4-66: Transmission Failed processing screen for eRx did not transmit notification

If the user retransmits the message, the status bar will show the order has been retransmitted (Figure 4-67).

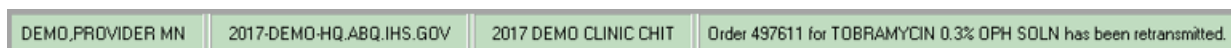


Figure 4-67: Status bar with retransmit message

### Unsigned Orders

If the prescriber decides not to sign, the order will remain in a pending status. The order can be signed by any of the usual methods for signing pending orders, including right-clicking the order in the Orders component and choosing to sign selected, processing the unsigned order notification, or using the **Integrated Signature** button.

If the pending order is discontinued prior to signing, the order is deleted but the request will revert to pending review and will re-appear in the SS Mailbox. If a notification is not already present, the Surescripts Pending Request notification is regenerated.

If the pharmacy sends a duplicate request after processing but before signing the pending order, the order will be deleted, and the request will revert to pending review and will re-appear in the SS Mailbox. If a notification is not already present, the Surescripts Pending Request notification is regenerated.

#### 4.6.2.2 Change

Change requests are not currently available for IHS. This section remains empty until a future EHR patch enables this functionality.

### 4.6.2.3 Validation

Validation requests are not currently available for IHS. This section remains empty until a future EHR patch enables this functionality.

### 4.6.3 Surrogates

Surescripts guidelines state that requests should be responded to within 72 hours, which may not be possible if the original prescriber is not available. When a surrogate is set, the Surescripts requests and notifications will honor the surrogate setting. The prescriber who is set as the surrogate will see some changes in the SS Mailbox to show that they are a surrogate, and which requests are for another prescriber.

The main **Mailbox** window (Figure 4-68) has a new icon to indicate the logged in user is a surrogate for someone else. Additionally, the patient names that are associated with the other prescriber are in italic font.

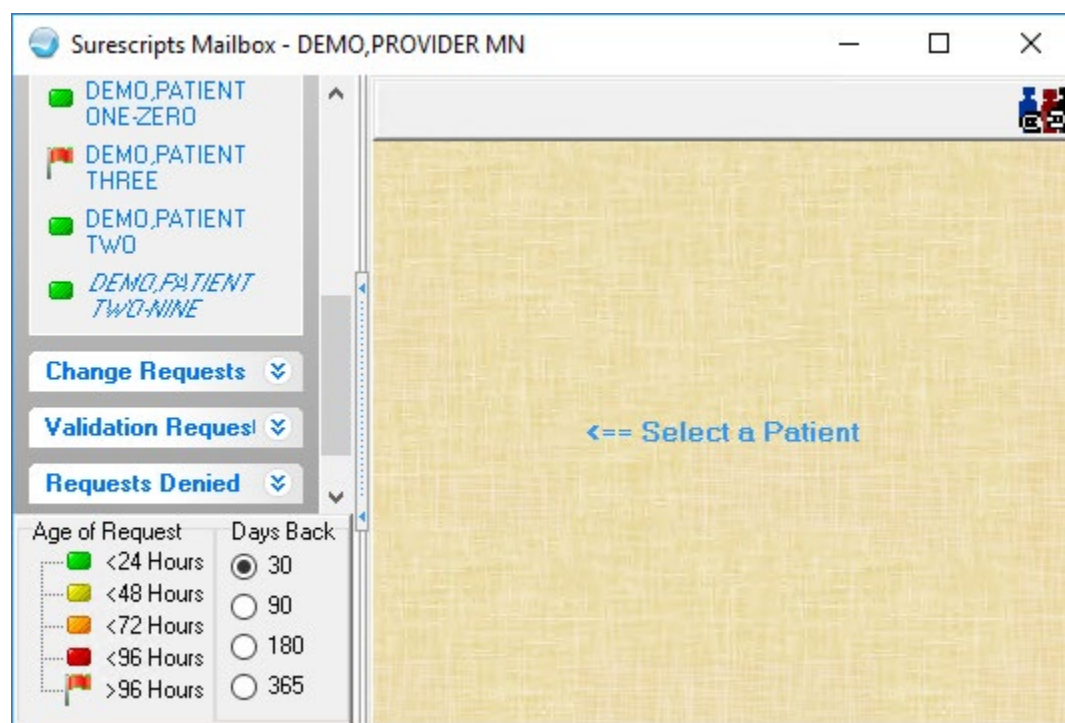


Figure 4-68: Surescripts Mailbox with surrogate icon and patient in italics

Clicking the icon opens an **Information** window (Figure 4-69) with the name or names and dates for which the surrogate setting is active. If no end date is listed, the surrogate setting remains until manually removed.

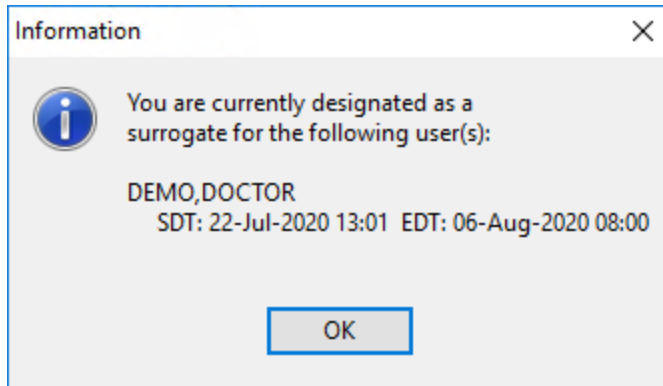


Figure 4-69: The Information window for surrogate settings

On the **Renewal Request Action** dialog (Figure 4-70), the option for **Accept** will not be selectable, since the ordering and responding prescribers will be different (Figure 4-71), as described in the hover text for **Accept**.

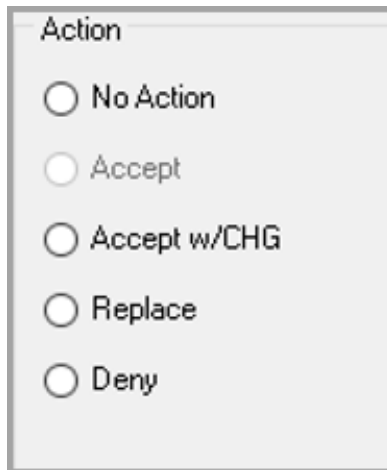


Figure 4-70: A portion of the Renewal Request Action dialog with Accept not available to select

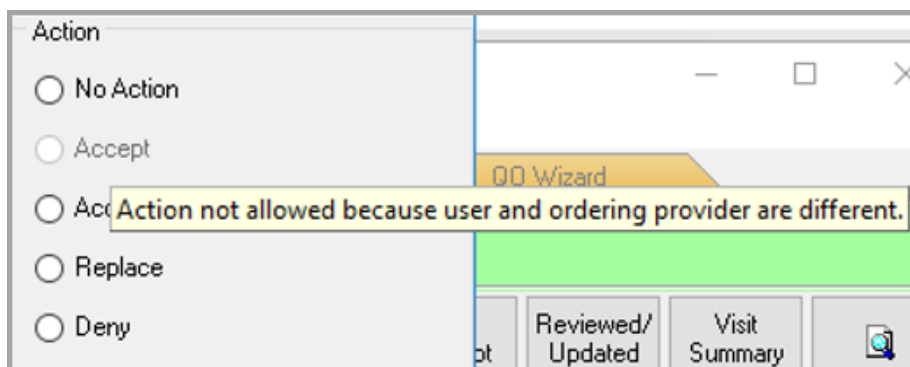


Figure 4-71: Hover text for the Accept action

## 5.0 Miscellaneous Medication Related Changes

### 5.1 Fix for Invalid NDC Sent to Surescripts from National Drug File

When IHS first began using the Surescripts network, there was concern that the local drug file National Drug Code (NDC) fields may not be kept up to date. The decision was made to instead look at the VA National Drug File (NDF) entry and the NDC to GCNSEQ link field to find a reliable NDC to send with the prescription to the external pharmacy.

It was recently determined that these entries are also not kept up to date and several medications were being sent with an invalid NDC. A new parameter was implemented, APSP SS NDC SOURCE, to allow sites to send either the VA NDF file NDC or the local drug file NDC (see Section 3.4). Sites using the Surescripts network are very strongly encouraged to set the parameter to the local drug file, and to update the NDC numbers in this file regularly.

### 5.2 Add TSPS to Restricted Terms for Oral Liquid Medications

The restrictions on terms to use in doses for Outpatient orders for oral liquid medications were added in EHR patch 28. This patch adds an additional term, TSPS, to the restricted list.

### 5.3 Fix for APSP NCPDP CONTROL CODES Entry for Z03 Pen Needles

The **APSP NCPDP CONTROL CODES** file contains, among other things, the codes for specific dispense units that must be sent with the Surescripts prescriptions. The original documentation from the National Council for Prescription Drug Programs (NCPDP) contained a typo for the code associated with Pen Needles and the typo was perpetuated into the file, causing a mismatch from the term description to the sent code. This patch corrects the typo for the Pen Needle term, and site may now use that term in the **DISP UNIT NCPDP CODE** field for any Pen Needle entry in the local drug file.

## Appendix A Rules of Behavior

The Resource and Patient Management (RPMS) system is a United States Department of Health and Human Services (HHS), Indian Health Service (IHS) information system that is **FOR OFFICIAL USE ONLY**. The RPMS system is subject to monitoring; therefore, no expectation of privacy shall be assumed. Individuals found performing unauthorized activities are subject to disciplinary action including criminal prosecution.

All users (Contractors and IHS Employees) of RPMS will be provided a copy of the Rules of Behavior (ROB) and must acknowledge that they have received and read them prior to being granted access to a RPMS system, in accordance IHS policy.

- For a listing of general ROB for all users, see the most recent edition of *IHS General User Security Handbook* (SOP 06-11a).
- For a listing of system administrators/managers rules, see the most recent edition of the *IHS Technical and Managerial Handbook* (SOP 06-11b).

Both documents are available at this IHS Web site:

<https://home.ihs.gov/security/index.cfm>.

<p><b>Note:</b> Users must be logged on to the IHS D1 Intranet to access these documents.</p>
---

The ROB listed in the following sections are specific to RPMS.

### A.1 All RPMS Users

In addition to these rules, each application may include additional ROB that may be defined within the documentation of that application (e.g., Dental, Pharmacy).

#### A.1.1 Access

RPMS users shall

- Only use data for which you have been granted authorization.
- Only give information to personnel who have access authority and have a need to know.
- Always verify a caller's identification and job purpose with your supervisor or the entity provided as employer before providing any type of information system access, sensitive information, or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions *Indian Health Manual* Part 8, "Information Resources Management," Chapter 6, "Limited Personal Use of Information Technology Resources."

RPMS users shall not

- Retrieve information for someone who does not have authority to access the information.
- Access, research, or change any user account, file, directory, table, or record not required to perform their *official* duties.
- Store sensitive files on a PC hard drive, or portable devices or media, if access to the PC or files cannot be physically or technically limited.
- Exceed their authorized access limits in RPMS by changing information or searching databases beyond the responsibilities of their jobs or by divulging information to anyone not authorized to know that information.

### A.1.2 Information Accessibility

RPMS shall restrict access to information based on the type and identity of the user. However, regardless of the type of user, access shall be restricted to the minimum level necessary to perform the job.

RPMS users shall

- Access only those documents they created and those other documents to which they have a valid need-to-know and to which they have specifically granted access through an RPMS application based on their menus (job roles), keys, and FileMan access codes. Some users may be afforded additional privileges based on the functions they perform, such as system administrator or application administrator.
- Acquire a written preauthorization in accordance with IHS policies and procedures prior to interconnection to or transferring data from RPMS.

### A.1.3 Accountability

RPMS users shall

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Log out of the system whenever they leave the vicinity of their personal computers (PCs).
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO)
- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.

- Abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior, and information technology (IT) information processes.

#### A.1.4 Confidentiality

RPMS users shall

- Be aware of the sensitivity of electronic and hard copy information, and protect it accordingly.
- Store hard copy reports/storage media containing confidential information in a locked room or cabinet.
- Erase sensitive data on storage media prior to reusing or disposing of the media.
- Protect all RPMS terminals from public viewing at all times.
- Abide by all Health Insurance Portability and Accountability Act (HIPAA) regulations to ensure patient confidentiality.

RPMS users shall not

- Allow confidential information to remain on the PC screen when someone who is not authorized to that data is in the vicinity.
- Store sensitive files on a portable device or media without encrypting.

#### A.1.5 Integrity

RPMS users shall

- Protect their systems against viruses and similar malicious programs.
- Observe all software license agreements.
- Follow industry standard procedures for maintaining and managing RPMS hardware, operating system software, application software, and/or database software and database tables.
- Comply with all copyright regulations and license agreements associated with RPMS software.

RPMS users shall not

- Violate federal copyright laws.
- Install or use unauthorized software within the system libraries or folders.
- Use freeware, shareware, or public domain software on/with the system without their manager's written permission and without scanning it for viruses first.

### A.1.6 System Logon

RPMS users shall

- Have a unique User Identification/Account name and password.
- Be granted access based on authenticating the account name and password entered.
- Be locked out of an account after five successive failed login attempts within a specified time period (e.g., one hour).

### A.1.7 Passwords

RPMS users shall

- Change passwords a minimum of every 90 days.
- Create passwords with a minimum of eight characters.
- If the system allows, use a combination of alpha-numeric characters for passwords, with at least one uppercase letter, one lower case letter, and one number. It is recommended, if possible, that a special character also be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or store them in a safe place (do not store passwords in login scripts or batch files).
- Change passwords immediately if password has been seen, guessed, or otherwise compromised, and report the compromise or suspected compromise to their ISSO.
- Keep user identifications (IDs) and passwords confidential.

RPMS users shall not

- Use common words found in any dictionary as a password.
- Use obvious readable passwords or passwords that incorporate personal data elements (e.g., user's name, date of birth, address, telephone number, or social security number; names of children or spouses; favorite band, sports team, or automobile; or other personal attributes).
- Share passwords/IDs with anyone or accept the use of another's password/ID, even if offered.
- Reuse passwords. A new password must contain no more than five characters per eight characters from the previous password.
- Post passwords.
- Keep a password list in an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.



- Give a password out over the phone.

### A.1.8 Backups

RPMS users shall

- Plan for contingencies such as physical disasters, loss of processing, and disclosure of information by preparing alternate work strategies and system recovery mechanisms.
- Make backups of systems and files on a regular, defined basis.
- If possible, store backups away from the system in a secure environment.

### A.1.9 Reporting

RPMS users shall

- Contact and inform their ISSO that they have identified an IT security incident and begin the reporting process by providing an IT Incident Reporting Form regarding this incident.
- Report security incidents as detailed in the *IHS Incident Handling Guide* (SOP 05-03).

RPMS users shall not

- Assume that someone else has already reported an incident. The risk of an incident going unreported far outweighs the possibility that an incident gets reported more than once.

### A.1.10 Session Timeouts

RPMS system implements system-based timeouts that back users out of a prompt after no more than 5 minutes of inactivity.

RPMS users shall

- Utilize a screen saver with password protection set to suspend operations at no greater than 10 minutes of inactivity. This will prevent inappropriate access and viewing of any material displayed on the screen after some period of inactivity.

### A.1.11 Hardware

RPMS users shall

- Avoid placing system equipment near obvious environmental hazards (e.g., water pipes).
- Keep an inventory of all system equipment.

- Keep records of maintenance/repairs performed on system equipment.

RPMS users shall not

- Eat or drink near system equipment.

### A.1.12 Awareness

RPMS users shall

- Participate in organization-wide security training as required.
- Read and adhere to security information pertaining to system hardware and software.
- Take the annual information security awareness.
- Read all applicable RPMS manuals for the applications used in their jobs.

### A.1.13 Remote Access

Each subscriber organization establishes its own policies for determining which employees may work at home or in other remote workplace locations. Any remote work arrangement should include policies that

- Are in writing.
- Provide authentication of the remote user through the use of ID and password or other acceptable technical means.
- Outline the work requirements and the security safeguards and procedures the employee is expected to follow.
- Ensure adequate storage of files, removal, and nonrecovery of temporary files created in processing sensitive data, virus protection, and intrusion detection, and provide physical security for government equipment and sensitive data.
- Establish mechanisms to back up data created and/or stored at alternate work locations.

Remote RPMS users shall

- Remotely access RPMS through a virtual private network (VPN) whenever possible. Use of direct dial in access must be justified and approved in writing and its use secured in accordance with industry best practices or government procedures.

Remote RPMS users shall not

- Disable any encryption established for network, internet, and Web browser communications.

## A.2 RPMS Developers

RPMS developers shall

- Always be mindful of protecting the confidentiality, availability, and integrity of RPMS when writing or revising code.
- Always follow the IHS RPMS Programming Standards and Conventions (SAC) when developing for RPMS.
- Only access information or code within the namespaces for which they have been assigned as part of their duties.
- Remember that all RPMS code is the property of the U.S. Government, not the developer.
- Not access live production systems without obtaining appropriate written access, and shall only retain that access for the shortest period possible to accomplish the task that requires the access.
- Observe separation of duties policies and procedures to the fullest extent possible.
- Document or comment all changes to any RPMS software at the time the change or update is made. Documentation shall include the programmer's initials, date of change, and reason for the change.
- Use checksums or other integrity mechanism when releasing their certified applications to assure the integrity of the routines within their RPMS applications.
- Follow industry best standards for systems they are assigned to develop or maintain, and abide by all Department and Agency policies and procedures.
- Document and implement security processes whenever available.

RPMS developers shall not

- Write any code that adversely impacts RPMS, such as backdoor access, "Easter eggs," time bombs, or any other malicious code or make inappropriate comments within the code, manuals, or help frames.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

## A.3 Privileged Users

Personnel who have significant access to processes and data in RPMS, such as, system security administrators, systems administrators, and database administrators, have added responsibilities to ensure the secure operation of RPMS.

Privileged RPMS users shall

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government personnel and contractor personnel understand and comply with license requirements. End users, supervisors, and functional managers are ultimately responsible for this compliance.
- Advise the system owner on matters concerning information technology security.
- Assist the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery plans are conveyed to the person responsible for maintaining continuity of operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual has responsibility for several functions (i.e., transaction entry and transaction approval).
- Watch for unscheduled, unusual, and unauthorized programs.
- Help train system users on the appropriate use and security of the system.
- Establish protective controls to ensure the accountability, integrity, confidentiality, and availability of the system.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible from the time that the user is no longer authorized system. Passwords forgotten by their owner should be replaced, not reissued.
- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords, and delete or reassign related active and backup files.

- Use a suspend program to prevent an unauthorized user from logging on with the current user's ID if the system is left on and unattended.
- Verify the identity of the user when resetting passwords. This can be done either in person or having the user answer a question that can be compared to one in the administrator's database.
- Shall follow industry best standards for systems they are assigned to, and abide by all Department and Agency policies and procedures.

Privileged RPMS users shall not

- Access any files, records, systems, etc., that are not explicitly needed to perform their duties
- Grant any user or system administrator access to RPMS unless proper documentation is provided.

Release any sensitive agency or patient information.

## Glossary

### **Accept**

In the context of a Surescripts Renew request, a response to the pharmacy with no changes from the original request.

### **Accept w/CHG**

The abbreviated form of Accept with Change

### **Accept with Change**

In the context of a Surescripts Renew request, a response to the pharmacy with changes to the number of refills only compared to the original request.

### **APSP**

The namespace of the IHS modifications to the Outpatient Pharmacy Suite.

### **Cancel**

In the context of ePrescribing, a medication order transaction that is sent by the prescriber to the pharmacy rescinding authorization for a previous order.

### **Change**

In the context of ePrescribing, a medication order transaction that is sent by the pharmacy and responded to by the prescriber. This type of message is requesting an alteration of an existing order.

### **Deny**

In the context of a Surescripts Renew request, a response to the pharmacy that disapproves the request resulting in no additional fills of the medication.

### **Dispense Drug**

In the context of RPMS medication ordering, the item that is sent to the pharmacy to be dispensed. The dispense drug is a specific drug item with a specific strength, dosage form, and package size and has a specific NDC number.

### **ePrescribing**

The electronic transmission of prescription order data, usually through an intermediary, from a prescriber's system to a pharmacy's system.

### **Fill Status**

In the context of ePrescribing, a message sent from the pharmacy to the prescriber confirming that a medication order has been dispensed to the patient.

**Medication History**

In the context of ePrescribing and Certified EHR, a type of transaction that shows the patient's current and past medication dispensings based on transactions processed through the patient's insurance or through the intermediary's systems.

**New**

In the context of ePrescribing, a medication order message that is created by the prescriber and sent to the pharmacy and that is not associated with a previous message.

**Orderable Item**

In the context of RPMS medication ordering, the item that the prescriber selects in the EHR when creating an order. The orderable item is usually a more general term for the drug entity, with one or more dispense drugs attached to it, usually of the same dosage form but different strengths.

**Parameter**

In the context of RPMS, a way to adjust the look, access, or functionality of some aspect of the RPMS EHR system.

**Renew**

In the context of ePrescribing, a medication order transaction that is sent by the pharmacy and responded to by the prescriber. This type of message is requesting authorization for additional fills of a previous order.

**Replace**

In the context of a Surescripts Renew request, a response to the pharmacy with changes beyond the number of refills compared to the original request.

**Surescripts**

A Virginia based information technology company that supports ePrescribing and other health information exchange.

**Surescripts Mailbox**

The RPMS EHR component that allows authorized prescribers to review past orders and review and respond to requests received from Surescripts pharmacies.

**Surescripts Request Queue**

The RPMS EHR component that allows select users to monitor, manage, and review requests received from Surescripts pharmacies.

**Surrogate**

In the context of RPMS and EHR, a user who is designated to act on behalf of another user, particularly for the purpose of responding to notifications.

**Transaction**

In the context of ePrescribing, the back and forth messaging related to transmission of medication order related information between the pharmacy and the prescriber.

**XPAR**

The namespace of the RPMS General Parameter Tools.



## Acronym List

Acronym	Meaning
CS	Controlled Substance
CISO	Chief Information Security Officer
EHR	Electronic Health Record
EPCS	Electronic Prescribing of Controlled Substances
eRx	Electronic Prescribing
GUI	Graphical User Interface
HL7	Health Level Seven
HHS	U.S. Department of Health and Human Services
HIMS	Health Information Management System
HIPAA	Health Information Portability and Accountability Act
ICD-10	International Classification of Diseases, Tenth Revision
ID	Identification
IEN	Internal Entry Number
IHS	Indian Health Service
ISSO	Information System Security Officer
IT	Information Technology
NCPDP	National Council for Prescription Drug Programs
NDC	National Drug Code
NDF	National Drug File
OI	Orderable Item
ONC	Office of the National Coordinator
PC	Personal Computer
PON	Prescriber Order Number
ROB	Rules of Behavior
RPMS	Resource and Patient Management System
SAC	Standards and Conventions
SNOMED CT	Systematized Nomenclature of Medicine Clinical Terms
SPI	Surescripts Prescriber Identifier
SS	Surescripts
VA	Department of Veterans Affairs
VistA	Veterans Health Information Systems and Technology Architecture
VPN	Virtual Private Network

## Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

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