

Peer Perspectives on Electronic Prescribing: Building efficiency, providing checks and balances



SITUATION

Dr. Gul Chablani has always been fascinated by technology, so on several occasions over the last decade, he tried to set up a database to streamline and centralize prescription-related information for all of his patients, and gain electronic access to patient data, in order to improve efficiency and minimize reliance on paper charts. However, daunted by the limited software options that were available in the mid-1990s, Dr. Chablani soon abandoned his grassroots efforts.

Nevertheless, he kept up with electronic innovations that were profiled in the medical trade press. "Our staff was spending too much time tied up on the phone lines, being kept on hold, trying to navigate through the pharmacies' tedious, menu-driven phone systems, and spelling out patients' names and medications," says Dr. Chablani. "And the extensive recordkeeping requirements needed to stay on top of all prescription-related information was onerous."

IMPLEMENTATION

In 2002, Dr. Chablani selected OnCallData — an electronic prescribing (e-prescribing) application from InstantDx, which is certified to connect to the vast majority of U.S. community pharmacies through the Pharmacy Health

Information Exchange™, a secure network operated by SureScripts®. "After our earlier attempts to automate these processes, my staff was skeptical and thought this would end up being just another project that we would try and then shortly abandon," says Dr. Chablani, with a laugh. "However, this time — using the OnCallData application to manage the new and

refill prescriptions electronically with pharmacies in our area — things have worked out much better than we had expected."

"InstantDx gave us a consultation over the phone and we tried it," says Dr. Chablani. "It was so easy it required essentially no formal training. It took only minutes to learn."

Integrating electronic prescribing "was so easy it required essentially no formal training. It took only minutes to learn."

— Dr. Chablani

EXECUTIVE SUMMARY



Gul Chablani, M.D.

- In practice for 18 years (Rockville, Md.)
- Specialty: Internal medicine and pediatrics: 2 physicians, 5 full-time and 1 part-time clerical staff members
- Technology Provider & Solution: InstantDx, OnCallData
- Avg. Daily Rx Volume: 25-30 New Rx/doctor, 25-30 Refills/doctor
- Rx Time Savings: 3-4 hours/day to fulfill Rx refill requests reduced to 1 hour/day.
- Clarification requests from pharmacies reduced from 6-10/day to nearly zero.

RESULTS

Among the many benefits of e-prescribing, Dr. Chablani and his colleagues have been particularly pleased by the improved workflow efficiencies, and the reduced opportunity for prescription fraud, that have resulted. "In the past, to create one or more new prescriptions, I would write all the details of each one on my pad, and hand the sheets over to the patient," says Dr. Chablani. "Then I'd have to re-write all of the details about each prescription in the patient's chart in two places — in the notes section and in the cumulative medications section."

"Now, using my wireless laptop right in the examination room, I can access the patient's medical information and then, using my Favorite Medications list, I can easily create all of the prescriptions and send them off to the pharmacy with just a few clicks," says Dr. Chablani. "At the same time, the information gets automatically copied and pasted into all the right places in the patient's medical record."

When it comes to prescription refills, the historic process for managing requests was even more labor-intensive. Typically a staff member would take the phone or fax message, pull the chart, verify that the patient actually had the requested prescription on file, and send the file to the doctor for review and approval. Once approved, the refill would then be called or faxed to the pharmacy by another staff member, who would then alert the patient, and document the entire transaction in the patient's file.

"Today, any refill request that comes in by phone or fax is entered into the electronic system by one of my staff members, and I am then able to review it (alongside the patient's online medical record), approve it, and submit it to the pharmacy right from my laptop," says Dr. Chablani. "There are no more charts to pull."

"In the old days, there were always many problems when managing refill requests — we'd have trouble getting in touch with the pharmacy, or there would be confusion associated with the paper prescription," says Dipali Patel, the receptionist in Dr. Chablani's office. "Now, the whole process is very straightforward, faster and more accurate from our perspective, and easier for our patients, since there is no paper prescription for them to drop off at the pharmacy."

Targeting fraudulent behavior

Dr. Chablani has been "pleasantly surprised and very glad" by one particular feature of the OnCallData system — specifically, the ability to gain greater insight into a given patient's comprehensive medication history by accessing the extensive prescription drug databases of most of the major prescription benefits managers (PBMs) that provide prescription medication insurance coverage.

"Electronic access to these databases lets us find out about other medications the patient might be taking but neglected to tell us about — either because they could not remember, or because they did not want us to know," says Dr. Chablani. "This helps us to be aware of patients who might be misrepresenting themselves to us, for instance, to fraudulently obtain narcotics from several providers at the same time."

BEST PRACTICES

- **Install the proper computer infrastructure.** Dr. Chablani pointed to previous install of a wireless network as key to reducing time to integrate the system.
- **Take advantage of subsidized programs to offset costs.** Dr. Chablani's office took advantage of a subsidy program offered by a health insurer to integrate electronic prescribing. Check to see if similar programs are offered by your state, insurer, medical association or by a national initiative.

Dr. Chablani will soon have a more complete, timely and clinically holistic view of his patient's prescriptions history with access to medication history data stored in the databases of community pharmacies. The RxHistory service from community pharmacies the most detailed information available regarding a patient's prescription record. Dr. Chablani will be able to view the instructions that accompany their patient's prescriptions (known as "Sig" information) and able to view data related to his patient's allergies and medication dispense dates.

THE BOTTOM LINE

As for the demonstrable improvements in the time savings and workflow efficiencies Dr. Chablani notes that before electronic prescribing, the prescribers and staff routinely spent 3-4 hours each day managing prescription-refill requests; now, they can get the job done in just an hour.

This has had direct payback for the practice. Says Dr. Chablani: "The extra time that has been freed up for our staff has allowed us to grow our practice by adding a second physician without having to hire any additional staff."