

To: All WRS Users

From: WRS Development Team

Date: 01/07/17

Re: Updates to the WRS Health System

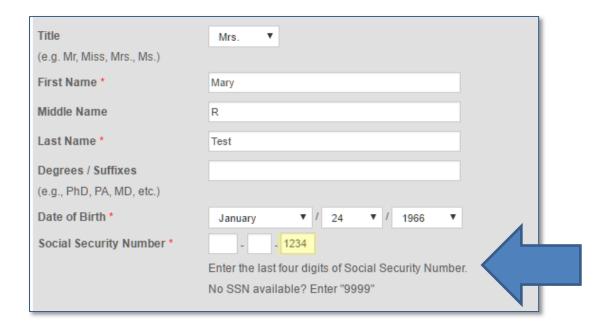
WRS Health is proud to announce the release of several new features created from the feedback and requests of our user community. Below is an explanation of new and updated items, along with directions for use.

New in this Release:

4-Digit SSN	Medication Update	Surgical Booking Form
Patien	t Medication Benefit Check	(PMBC)

Social Security Number (SSN) - 4 Digits Required

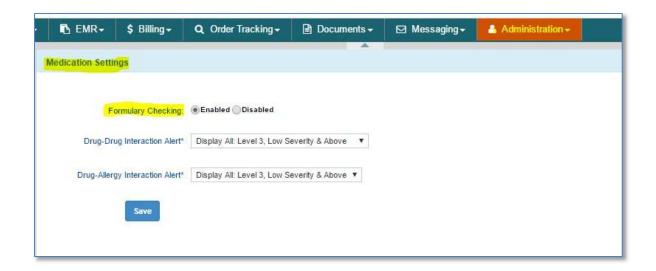
The requirement for entering 9 digits for SSN has been modified to now require only the last four digits. When registering a new patient, you can enter the entire SSN (9-digits) or simply the last four digits. If you do not have the actual SSN, you can enter 9999 as a placeholder.



Patient Medication Benefit Check (PMBC)

WRS Health has partnered with SureScripts to enhance functionality within the Patient Medication Benefit Check (PMBC) Module. Note that successful use of this module is dependent on following the correct eligibility workflow prior to the patient encounter. This must be done to ensure the retrieval of complete PBM data.

Before proceeding with the use of this functionality, note that the Formulary Checking module must be enabled under Administration>Medication Setup>Medication Settings>Formulary Checking for your practice. This is a one-time step and complete patient demographics should be entered prior to the scheduled appointment. This will ensure the best chance of verification. Required data includes First Name, Last Name Date of Birth, Social Security Number, Address, Phone and complete Insurance information.



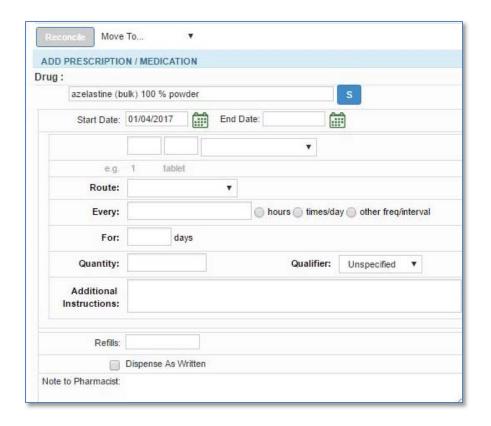
Once the patient is scheduled for an appointment, the system will attempt to retrieve the PBM (Pharmacy Benefit Manager) coverage. If the coverage has been verified, it will auto-populate the **Patient Management >Insurance Tab**. Note that PBM coverage must be selected as **Default**. This can be done manually if it is not automatically checked. The **Eligibility Transaction Date** must be no greater than 30 days from the date of the prescription creation.



This workflow must be followed as instructed. It is important to note that this process cannot be done "on the fly" with the use of the Real-Time Eligibility Check feature. Also, please note that this module applies to **Formulary Checking** for PBM pharmacy coverage only and is not applicable on prescriptions sent to a retail pharmacy.

PMBC Workflow

For the patient that has verified, eligible PBM Coverage, when a prescription is created and added as a prescription, on the Medication Page (of any note type that has this page); a quick "formulary check" will be initiated.



If the medication triggers a formulary consideration (this will vary based on prescription coverage), a "\$" icon will show next to the CURRENT NOTE PRESCRIPTION indicating the prescription has a formulary alert.

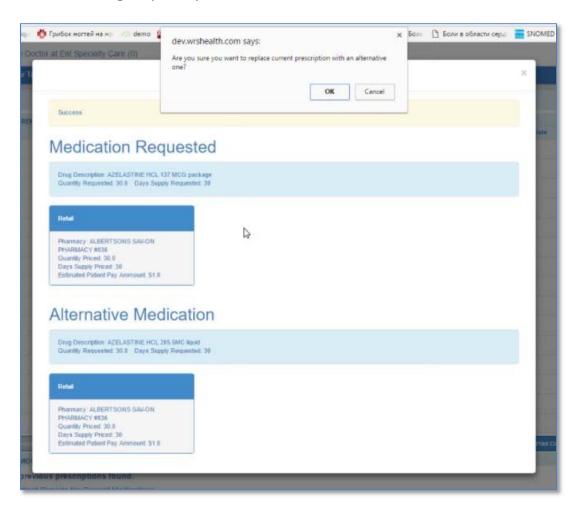


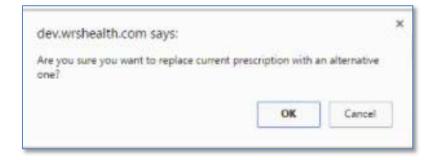
By selecting the "\$" icon, a popup will load onto the page showing the prescribed medication as well as the alternative(s). There may be more than one alternative medication for selection.



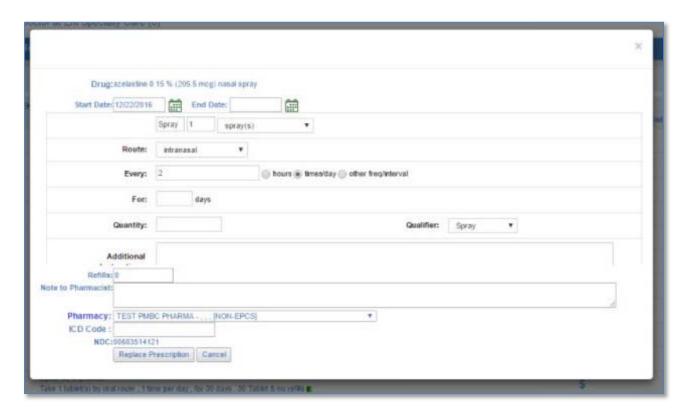


The prescriber can elect to continue with the medication as prescribed, or select one of the alternative choices. This new selection will trigger an alert inquiring if the provider does indeed want to change the current prescription, which can be clicked as OK to proceed or CANCEL to continue with the original prescription.

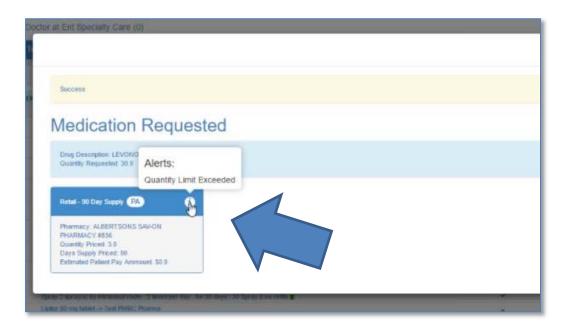




Once the provider selects the "OK" option, the new prescription will load into the template and he/she will need to complete the SIG and dispensing criteria. Then selecting the REPLACE PRESCRIPTION button will add this medication to prescribe.



Each instance of a medication that triggers a formulary alert will have reason/explanation for the triggered alert, which can be accessed by hovering over the "I" icon.



Not every alert will trigger an alternative medication, as the alert may pertain to other parameters related to that prescription, as created (eg: the dispensing quantity exceeds the allowed amount). The associated alerts are listed below:

Coverage Alerts:	
AgeLimits	
DaysSupplyExeeded	
DrugExclusion	
FullCostNotCovered	
GenderLimits	
ManditoryGeneric	
Medical Necessity	
NotOnFormulary	
PharmacyOutOfNetwo	rk
QuantityLimits	
Quantit <mark>ryLimitE</mark> xceede	d
QuantityNotValid	
ResourceLink	
StepTherapy	
TextMessage	

Over the next few weeks, WRS will also be adding the ability to view, per applicable prescription, those medications that were changed to the alternative medication based on the formulary validation. This will be useful to identify the reason why a medication was prescribed, if out of the usual medication listing for a provider. We will alert the practices globally when this has gone live.

Updates to the Surgery Booking Form

Various updates have been made to the **Surgery Booking Form**. It is our hope that these changes prove helpful to those who use the **Surgical Workflow Module**. As with any template within WRS, if a specific area is not specified or indicated for that patient, the fields will be blank.

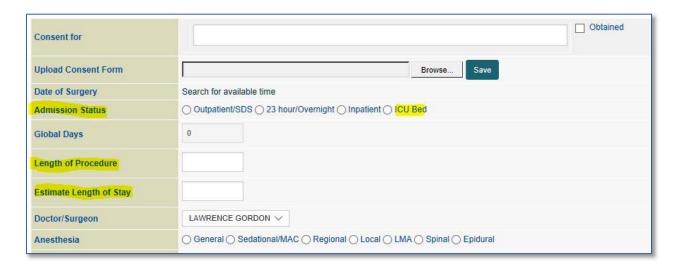
New Areas:

Exact Age (as taken from the patient's information)

HEIGHT and **WEIGHT** (as taken from the Vital Signs in the note for that patient, where the surgery is booked; if the note has no HT/WT, the fields will be blank)



Admission Status addition: ICU BED (as a radio selection)
Length of Procedure (as free text)
Estimated Length of Stay (as free text)



Biopsy Done (as radio selection Yes/No) **Slides Available** (as radio selection Yes/No) **Location of Slide** (as free text)

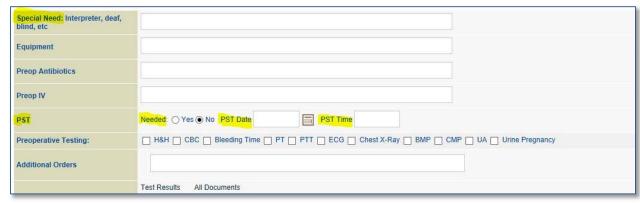


Special Needs (as free text)

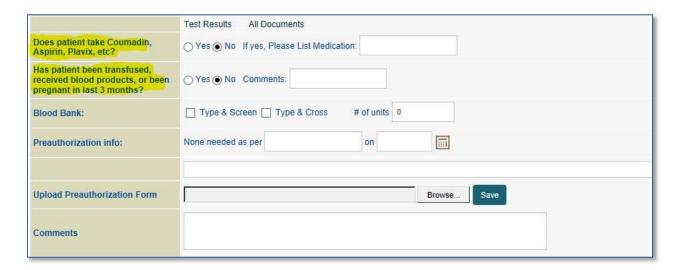
PST: **Needed** (as radio selection Yes/No)

PST Date (as calendar selection)

PST Time (as free text)



Does patient take Coumadin, etc? (as radio Yes/No, and free text box to address) **Has patient been transfused, etc?** (as radio Yes/No, and free text box to address)



Medication Update

Due to new regulations, and under the guidance of the DEA, SureScripts has implemented functionality to ensure all prescriptions that are sent electronically are created with full prescribing details. This means that the prescription must contain all the criteria within the blank medication template (shown below). This includes:

1) The full name of the medication and dose (and as selected from the dropdowns to load with the appropriate NDC code. A prescription must have this NDC code to be sent electronically.

- 2) The complete SIG of the medication (what should be shown on the label), that includes how to take the medication, how much medication to take, when to take the medication. Routinely, those fields will auto-populate when the medication has been selected and added. In the case where this information is not populated or not complete, the provider must ensure all fields are completed.
- 3) The exact dispensing quantity and comparable qualifier of the medication. Medications that come in tablets should be dispensed in tablets. For those medications that are dosed differently than they are dispensed, ensure you are adding the appropriate qualifier for that medication (i.e. eye and ear drops are dosed in drops, but dispensed in milliliters or bottles). The same goes for creams and ointments which are dosed differently than they are dispensed, usually in grams or tubes.
- 4) The number of refills, or the indication of "0", as this box cannot be left blank.
- 5) The pharmacy should be always added into the patient management module so that it is accessible for easy input into the Rx. However, the newly optimized **Pharmacy Search** feature, within the creation of the prescription, will allow the user to search and enter a new pharmacy as needed.
- 6) The difference between Additional Instructions and Notes to Pharmacist:

The **Additional Instructions** should be used for all those Rx related directions, that you want to be shown on the medication label ("take at bedtime", "take with meals", etc.) This free text area should also be used for the titration details or specific dosing requirements for the medication. New functionality has been added to this text box that allows content to be created as Default, when selecting the green "D" icon. This default content will populate into this "Additional Instructions" field whenever that medication is selected and added. This default is user specific, and can be cloned to other staff via the Template Clone Tool.

The **Notes to Pharmacist** should be used to communicate with the pharmacy, and this information is not being shown on the label. Coupon information, prior authorization data; or patient related information such as "patient needs follow-up before the next refill can be sent", as an example.

7) All the above criteria pertain to electronic refill requests sent to the provider's queue. If those refill requests received from the pharmacy do not contain all the required fields populated, the provider will not be able to electronically send that refill successfully and will need to create a new prescription.