



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Electronic Health Record

(EHR)

ePrescribing (eRx) Addendum to User Manual

Version 1.1 Patch 31
September 2021

Office of Information Technology
Division of Information Technology

Table of Contents

1.0	Introduction.....	1
2.0	ePrescribing and Surescripts.....	2
2.1	Surescripts Request/Response Overview	2
3.0	Managing Change Requests.....	3
3.1	Surescripts Request Queue Component	3
3.1.1	Change Tab Overview	3
3.1.2	Denied eRx Report Tab	6
3.2	Unmapped Items	6
3.2.1	Map Patient	6
3.2.2	Deny Change Request	9
3.3	Pending Review.....	11
3.3.1	Change Patient.....	11
3.3.2	Change Prescriber.....	13
3.4	Unsigned	16
4.0	Processing Change Requests	17
4.1	Surescripts Mailbox Component.....	17
4.1.1	Change Request Types.....	17
4.2	Change Requests Processing	19
4.2.1	Request Details	21
4.2.2	Process Request	24
4.2.3	Change Request Response.....	24
4.2.4	Change Request Action.....	29
4.2.5	Stop Processing	30
4.2.6	Approve	30
4.2.7	Approve with Change	31
4.2.8	Deny	33
4.3	Sign the Order	33
4.4	Discontinue Unsigned Surescripts Response.....	36
4.5	Validation Requests Processing	38
4.5.1	Request Details	40
4.5.2	Process Request	40
4.5.3	Change Request Response.....	40
4.5.4	Prior Authorization Number Request	41
4.5.5	Prescriber Authorization Request.....	43
4.5.6	Confirmation	48
4.6	Duplicates.....	52
4.7	Notification.....	53
4.8	Change Requests on Discontinued Items.....	55
4.9	Surrogates	55
4.10	Potential Processing Situations	57

5.0	Other Pharmacy Changes.....	60
5.1	ADO Feature 76280 – Modify Renew/Copy to New/Change Dialogs	60
5.1.1	Renew	60
5.1.2	Change.....	61
5.1.3	Copy to New.....	61
Appendix A	Rules of Behavior	64
A.1	All RPMS Users	64
A.1.1	Access.....	64
A.1.2	Information Accessibility	65
A.1.3	Accountability	65
A.1.4	Confidentiality.....	66
A.1.5	Integrity.....	66
A.1.6	System Logon.....	67
A.1.7	Passwords.....	67
A.1.8	Backups.....	68
A.1.9	Reporting.....	68
A.1.10	Session Timeouts.....	68
A.1.11	Hardware.....	68
A.1.12	Awareness.....	69
A.1.13	Remote Access	69
A.2	RPMS Developers	70
A.3	Privileged Users.....	70
	Glossary.....	73
	Acronym List	76
	Contact Information	77

1.0 Introduction

The 2015 Edition certification 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 additional 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, while metric dosing for oral liquids and the leading and trailing zeros conformance were included in EHR patch 28 released in July 2020. Renew transactions, along with the Surescripts Request Queue (SS Queue) and Surescripts Mailbox (SS Mailbox) components, were added in EHR patch 29 released September 2020. EHR patch 31 introduces Change transactions, and the SS Mailbox and SS Queue components now work with Change Requests. Medication History capability will be included in this EHR patch for purposes of certification but will not be accessible to the user at this time.

2.0 ePrescribing and Surescripts

IHS uses the Surescripts (SS) network to send prescriptions to pharmacies electronically, and to receive requests from pharmacies electronically. The requests are then processed in RPMS EHR, and the responses are transmitted through the SS network back to the pharmacy.

2.1 Surescripts Request/Response Overview

Surescripts requests are inbound messages from the pharmacy to the prescriber 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's name, birthdate, and sex match the patient in the request.
- The prescriber matches.
- The orderable item matches.

If sufficient information matches an order in the system, the request is sent to the SS Mailbox and a notification is sent to the prescriber. These requests will also be visible in the SS Queue for monitoring purposes.

If the matching process is unable to match enough information, the request will be sent only to the SS Queue for the purposes of mapping, denying, and monitoring. Some requests will be 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 a duplicate request after the prescriber has processed it.

When a prescriber processes most requests, 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 SS Mailbox.

For those responses that do not create an order, the response is transmitted once the prescriber has reviewed the information that will be sent back to the pharmacy and clicked the **Confirm** button.

3.0 Managing Change Requests

Like Renewal requests, Change Requests must be managed in the SS Queue. Queue management 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 either mapped for the prescriber to process or denied if unable to be mapped. Because Surescripts guidelines state that prescribers should respond to requests within 72 hours of receipt, it is important that queue managers are regularly monitoring for requests that must be mapped, as well as monitoring for unprocessed items that will soon reach the 72-hour mark.

3.1 Surescripts Request Queue Component

The Surescripts Request Queue (also called “Surescripts Queue” or “SS Queue”) was added in EHR Patch 29. This component will be discussed in this manual only as it relates to Change Requests. For more detailed information on the SS Queue component, see the EHR v1.1 Patch 29 ePrescribing (eRx) Addendum to User Manual located here:

https://www.ihs.gov/rpms/package/docs/EHR/ehr_0110.29o_ePrescribing.pdf.

The SS Queue is designed for a non-prescriber such as a pharmacist, nurse, pharmacy tech, or clerk to manage Surescripts requests. As such, the SS Queue’s contents are not specific to the logged in user but show requests for all prescribers. These “Queue Managers” review the queue for requests that have not yet been responded to, and for requests that have not automatically gone to the prescriber for processing.

An incoming message may not automatically go to a prescriber if it did not match to a patient or prescriber in the RPMS file, or if the order number contained in the request is invalid. While sites should already be using this component for Renewal requests, the Queue managers will now also need to monitor the Change Requests.

3.1.1 Change Tab Overview

The Change tab contains the Change Requests received from the external pharmacies. The Change tab can show all requests or can be filtered to show only unmapped, or pending review, or unsigned items. The default state is showing all requests. The text on the Change tab will adjust depending on the filter selected and the number of items meeting the criteria of the filter. Some examples are shown below:

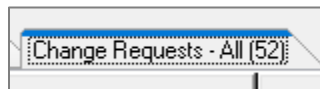


Figure 3-1: Change Requests tab appearance for All filter

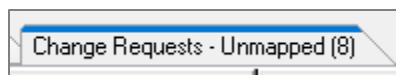


Figure 3-2: Change Requests tab appearance for Unmapped filter

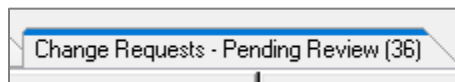


Figure 3-3: Change Requests tab appearance for Pending Review filter

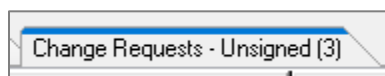


Figure 3-4: Change Requests tab appearance for Unsigned filter

The grid contains the items meeting the currently selected filter, with columns Request Date/Time, Patient Name Date of Birth Gender Phone, Change Request Details, Prescriber, Pharmacy Information, RPMS Request Details, and Patient Health Summary. The grid may be sorted by any column by clicking on the column header. Clicking once will sort low to high, while clicking a second time will sort high to low. Additional clicks will toggle between the two sort directions.

Surescripts Requests						
Select a Change Request to map.						
Renewals Pending Prescriber Response (1)	Renewal Requests Unmapped (7)	Denied eRx Report(34)	Change Requests - Pending Review (36)			
Request Date/Time	Patient Name Date of Birth Gender Phone	Change Request Details	Prescriber	Pharmacy Information	RPMS Request Details	Patient Health Summary
09/14/2020 12:03	DEMO,SSNINETE EN (05/05/1988) Female (729)448-3375	GABAPENTIN 400 MG CAPSULE TAKE ONE (1) CAPSULE BY MOUTH TWICE A DAY D:30 QTY:60 RF:8 DAW:NO Indication:		Shollenberger Pharmacy 2002 S. McDowell Blvd Ext Petaluma ,CA 94954 P:(707)984-5571 F:(707)988-4744	Failed to map Order Number Failed to map Med Failed to map Patient Pending review	Health Summary Link
03/05/2021 12:02	DEMO,PATIENT THREE-FIVE (09/25/2009) Female (555)555-9024	TAMSULOSIN HCL 0.4MG CAP TAKE ONE (1) CAPSULE BY MOUTH TWICE A DAY D:30 QTY:60 RF:0 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO.PROVIDE...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	Pending review	Health Summary Link
03/05/2021 11:54	DEMO,PATIENT THREE-FIVE (09/25/2009) Female (555)555-9024	TAMSULOSIN HCL 0.4MG CAP TAKE ONE (1) CAPSULE BY MOUTH TWICE A DAY D:30 QTY:60 RF:0 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO.PROVIDE...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	Pending review	Health Summary Link
03/05/2021 12:41	DEMO,PATIENT THREE-FIVE (09/25/2009) Female (555)555-9024	TAMSULOSIN HCL 0.4MG CAP TAKE ONE (1) CAPSULE BY MOUTH TWICE A DAY D:30 QTY:60 RF:0 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO.PROVIDE...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	Pending review	Health Summary Link
	DEMO,PATIENT	PAROXETINE HCL 20MG TAB		Bannockburn Pharmacy	Pending review	Health Summary Link

Request Filter

Unmapped

Pending Review

Unsigned

All

Figure 3-5: The Change Requests tab with Pending Review filter active

Duplicate requests, if they exist, will be shown by an indication of the number of duplicates within the RPMS Request Details column as shown below:

Request Date/Time	Patient Name Date of Birth Gender Phone	Change Request Details	Prescriber	Pharmacy Information	RPMS Request Details	Patient Health Summary
02/17/2021 12:53	DEMO.PATIENT NINE (02/10/2015) Male (555)555-9457	VALSARTAN 80MG TAB TAKE ONE (1) TABLET BY MOUTH DAILY FOR HIGH BLOOD PRESSURE D:90 QTY:90 RF:2 DAW:NO Indication: Essential hypertension	DEMO.PROVIDER	Bannockburn Pharmacy 6798 Pyle Rd Bethesda .MD 20817 P:(301)644-2418 F:(301)644-2566	Duplicate Request (1) Pending review	Health Summary Link

Figure 3-6: Change Request with Duplicate Request indication in RPMS Request Details column

3.1.1.1 Filters

The grid contents may be filtered using the radio buttons in the Request Filter pane. The default view is **All**.

- **Unmapped:** Shows the items that were unable to be automatically mapped to an order in RPMS.
- **Pending Review:** Shows the items waiting to be processed by the prescriber. These may have been viewed by the prescriber but have not yet gotten to the point of creating an order.
- **Unsigned:** Shows the items that have had an order created but the order has not been signed or transmitted.
- **All:** Shows all the requests that have been received and have not yet been processed, regardless of status.

3.1.1.2 Actions

The user may select an action by right-clicking on the line item and selecting from the menu. The actions available for each item will depend on the status of the item. Actions that may not be selected for a given item are in a subdued font style. Map Patient, Change Patient, Change Prescriber, and Deny Change Request are discussed in more detail in the following sections.

- **Details:** Available for all statuses. Double click on the line item or select this option to display the request details and the mapped elements used to match to an order in RPMS EHR.
- **Order Details:** Available for all statuses but only if the order could be mapped. Select this option to display the order details for the matching order in RPMS EHR. This is helpful for confirming the original patient, prescriber, and medication in certain unmapped situations.
- **Map Patient:** Available for Unmapped items if the patient was not automatically mapped and mapping is allowed, as indicated by “Failed to map Patient” and “[MAP OR DENY]” in the RPMS Request Details column. Select this option to map the request to a patient so the prescriber may process it.

- **Change Patient:** Available on Pending Review status only. Select this option to reassign the request to a different patient even when the request was automatically mapped to a patient on receipt, or if a user selected the incorrect patient when mapping. This option should be a rarely used.
- **Change Prescriber:** Available on Pending Review status only. Select this option to reassign the request to a different prescriber even when the request was automatically mapped to a prescriber on receipt. This option should be a rarely used.
- **Deny Change Request:** Available on Unmapped status only. Select this option to respond with “deny” to a request. This is used for requests that cannot be mapped due to missing or invalid information, where the RPMS Request Details column contains “[DENY ONLY]”, or on unmapped requests where the patient cannot be sufficiently determined to map when mapping is available.
- **Refresh:** Available for all statuses. Selecting Refresh will reload the data in the component and reset the filter to All. Any new requests that have arrived since the component was last opened or refreshed will be added to the display.

3.1.2 Denied eRx Report Tab

This tab should already be in use at eRx sites where Renewal requests are turned on. This tab displays the requests, both renewal and change, that have been denied by the prescriber or queue manager. There is a column for Request Type if a user is specifically looking for a Change or a Renewal.

3.2 Unmapped Items

An Unmapped item is a request that failed to map a patient or prescriber or had an invalid order number, or any combination of these. For an unmapped patient, the queue manager may manually map the patient so that the prescriber may act on the request or deny the request if the patient cannot be reliably mapped. If the prescriber failed to map or the order number was invalid, the queue manager may only deny the request.

3.2.1 Map Patient

Selecting **Map Patient** enables the user to map the data so that the prescriber may take action on the request. If the user already had a patient selected, the patient context in the EHR will clear when this option is selected.

The **Patient Selection** dialog will display prompting the user to select the correct patient.

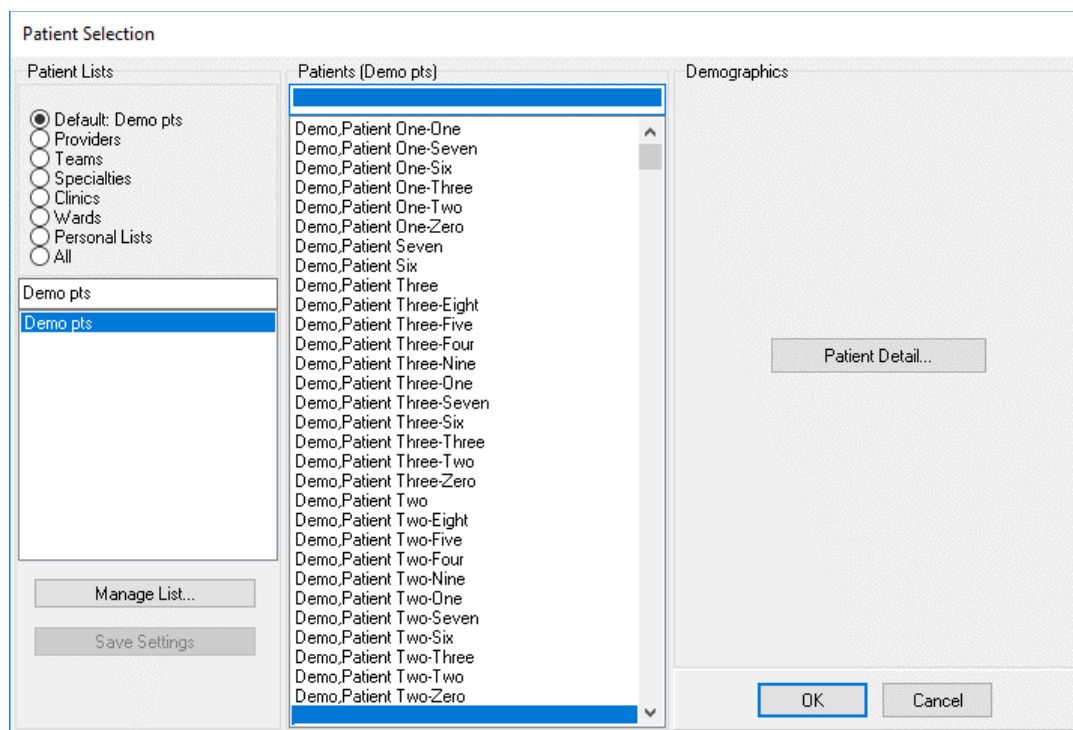


Figure 3-7: Patient Selection dialog

It may be helpful to open the order details prior to attempting to map the request. Order details will be available if the request contains a Provider Order Number (PON) that can be matched to an entry in the RPMS system. While RPMS may be able to determine the likely original order, it will not be infallible, and the queue manager should review the listed order details in full to verify that this is the correct order. 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 most cases the queue manager may be reasonably sure of the correct patient, but if not, the request should be denied, and if possible, the prescriber notified of the denied request.

Here are two examples with the patient information mostly matching, but the medication details either matching or not matching. In the first example (Figure 3-8 and Figure 3-9), the order details match up well with the information provided in the request, though there are differences in the patient's name and date of birth. In this case, the queue manager might be reasonably sure this is the correct order, and map to the patient in the order details.

Renewal Requests Unmapped (0)		Denied eRx Report(56)		Change Requests - Unmapped (10)		
Request Date/Time	Patient Name Date of Birth Gender Phone	Change Request Details	Prescriber	Pharmacy Infor...	RPMS Re...	Patient Health Summary
05/20/202...	DEMO,PATIENT (05/27/1979) Female (555)555-5220	TYLENOL 325MG TAB TAKE TWO (2) TABLETS BY MOUTH THREE TIMES A DAY IF NEEDED FOR PAIN D:10 QTY:50 RF:0 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO,PRO...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda, MD 20817 P:(301)644-2418 F:(301)644-2566	Failed to map Patient [MAP OR DENY]	Health Summary Link
<p> Order Detail -499265</p> <p>ACETAMINOPHEN TAB 325MG TAKE TWO (2) TABLETS BY MOUTH THREE TIMES A DAY AS NEEDED FOR PAIN Quantity: 50 Tablet Days: 10 Refills: 0 *Chronic Med: NO Dispense as Written: NO Indication: Chart evaluation by healthcare professio... Pharmacy: Bannockburn Pharmacy</p>						

Figure 3-8: Medication order information from order details match to Change Request

Renewal Requests Unmapped (0)		Denied eRx Report(56)		Change Requests - Unmapped (10)		
Request Date/Time	Patient Name Date of Birth Gender Phone	Change Request Details	Prescriber	Pharmacy Infor...	RPMS Re...	Patient Health Summary
05/20/202...	DEMO,PATIENT (05/27/1979) Female (555)555-5220	TYLENOL 325MG TAB TAKE TWO (2) TABLETS BY MOUTH THREE TIMES A DAY IF NEEDED FOR PAIN D:10 QTY:50 RF:0 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO,PRO...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda, MD 20817 P:(301)644-2418 F:(301)644-2566	Failed to map Patient [MAP OR DENY]	Health Summary Link
<p> Order Detail -499265</p> <p>Patient: DEMO, PATIENT THREE-NINE HRN: 112752 DOB: MAY 28, 1979 (42) Sex: FEMALE Ht/Wt: */*</p>						

Figure 3-9: Patient information from order details is close but not exact match to Change Request

In the second example (Figure 3-10 and Figure 3-11), the order details do not match up well with the information provided in the request for the medication or the patient. This can happen if the PON sent in the request is not correct but does match another order in the RPMS system. In this case, the queue manager can check the medication profile of the patient in the request to see if the order is present, and if so, map the patient. If the queue manager is unable to confidently determine the correct patient, the request should be denied and the prescriber notified, if possible.

Request Date/Time	Patient Name Date of Birth Gender Phone	Change Request Details	Prescriber	Pharmacy Infor...	RPMS Re...	Patient Health Summary
05/20/202...	DEMO,PATIENT (05/28/1979) Female (555)555-5220	FARXIGA 5 MG ORAL TABLET TAKE ONE (1) TABLET BY MOUTH DAILY FOR DIABETES D:30 QTY:30 RF:3 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO,PRO...	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	Failed to map Patient [MAP OR DENY]	Health Summary Link

Order Detail -499256

MILK OF MAGNESIA
SHAKE WELL AND TAKE FIFTEEN (15) MLS BY MOUTH AT BEDTIME Swish and spit fifteen milliliters orally for one minute every twelve hours and repeat as necessary for thirty days or until all of the solution has been used. Patient requested peppermint flavoring, if possible. Please provide appropriate.
Quantity: 473 Milliliter Days: 30 Refills: 1 *Chronic Med: NO Dispense as Written: NO Indication: Chart evaluation by healthcare professio... Pharmacy: Shollenberger Pharmacy

Figure 3-10: Medication order information from order details do not match to Change Request

Request Date/Time	Patient Name Date of Birth Gender Phone	Change Request Details	Prescriber
05/20/202...	DEMO,PATIENT (05/28/1979) Female (555)555-5220	FARXIGA 5 MG ORAL TABLET TAKE ONE (1) TABLET BY MOUTH DAILY FOR DIABETES D:30 QTY:30 RF:3 DAW:NO Indication: Chart evaluation by healthcare professional	DEMO,PRO...

Order Detail -499256

Patient: DEMO,PATIENT THREE-TWO HRN: 11
DOB: SEP 14,1963 (57)
Sex: MALE Ht/Wt: 18

Figure 3-11: Patient information from order details does not match to Change Request

3.2.2 Deny Change 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 or that there is insufficient information in the request to determine the patient.

To deny a request from the SS Queue, right-click on the line item and select **Deny Change Request**.

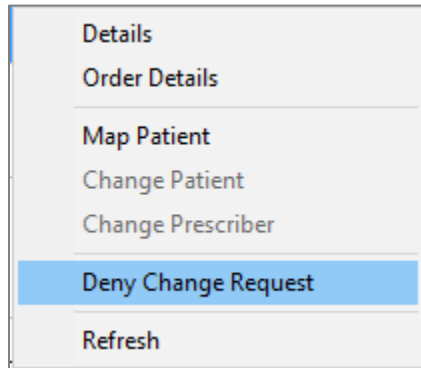


Figure 3-12: Right-click menu for unmapped request

The **Confirm** dialog displays.

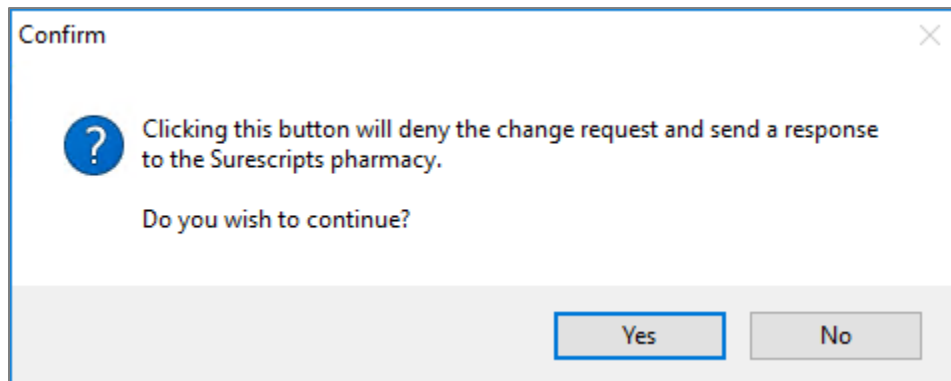


Figure 3-13: Confirm dialog for denying a request

Click **Yes** to continue. The **Reason for Denial** dialog displays. If the prescriber was not mapped, there may be a default reason already selected:

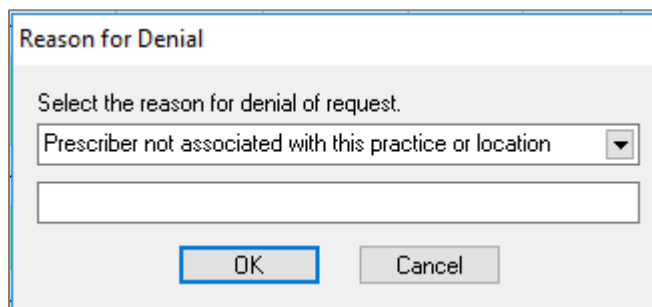


Figure 3-14: Reason for Denial dialog for Change Request with default reason

Select an appropriate reason or type in the desired message into the text box. 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
- Medication never prescribed for the patient
- Patient should contact Provider first
- Change not appropriate
- Patient needs appointment
- Prescriber not associated with this practice or location
- No attempt will be made to obtain Prior Authorization
- Request already responded to by other means (e.g., phone or fax)
- Medication denied at patient request

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

3.3 Pending Review

The Pending Review items are still waiting for prescriber action, and queue managers can see which requests are in danger of exceeding the 72-hour response guideline. Providers should be prompted to process requests as soon as possible to avoid delaying patient care. Once a request has the Pending Review status, they may not be denied from the queue, and must be processed by a prescriber.

3.3.1 Change Patient

An unmapped request will change status to Pending Review as soon as the mapping is complete. If there was a mistake when selecting the patient during mapping, the queue managers may use the Change Patient option to correct the mistake.

Right-click on an item and select **Change Patient**.

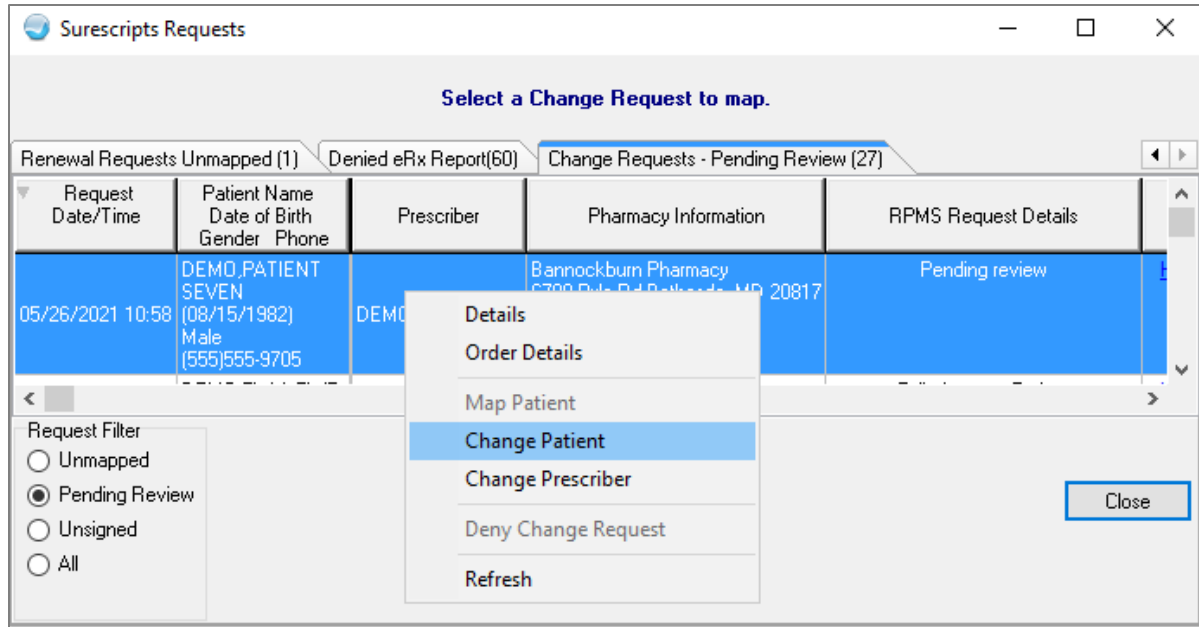


Figure 3-15: Change Requests Pending Review right click menu

The **Patient Selection** dialog opens and the EHR patient context clears (if applicable). Choose the correct patient, then click **OK**.

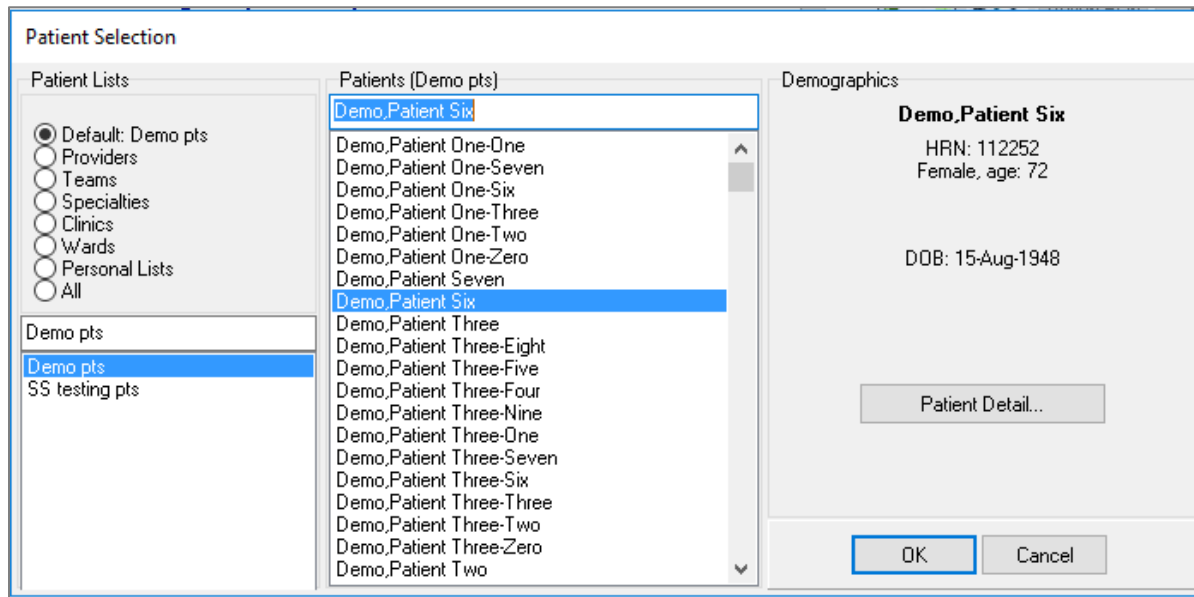


Figure 3-16: Patient Selection dialog

The EHR patient context updates to the selected patient and the patient demographics in the item listing update.

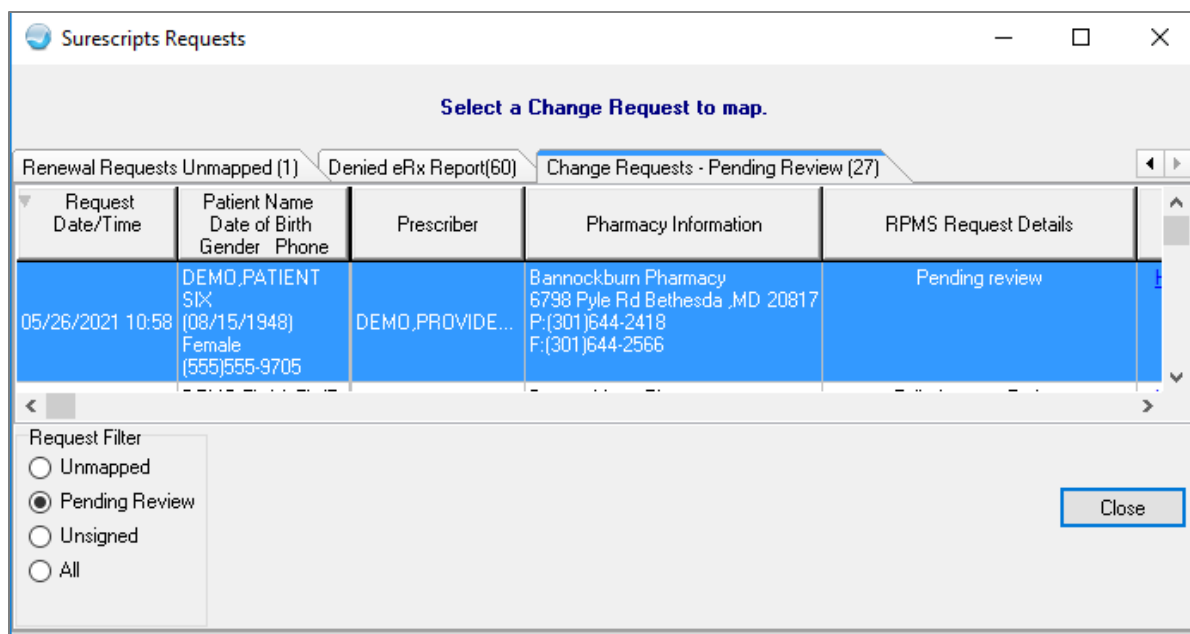


Figure 3-17: Change Requests Pending Review with updated patient information

3.3.2 Change Prescriber

When prescribers will be away from the facility and set a surrogate, the SS requests will show for that surrogate to process. If the prescriber is unable to set a surrogate prior to leaving, any user with appropriate RPMS access (e.g., IT or Clinical Informaticist) can set a surrogate for the prescriber. However, there may be situations where a surrogate is not appropriate, but a different prescriber should respond to a given Surescripts request.

Change Prescriber allows a queue manager to change the prescriber who will process the request. Right-click on an item and select **Change Prescriber**.

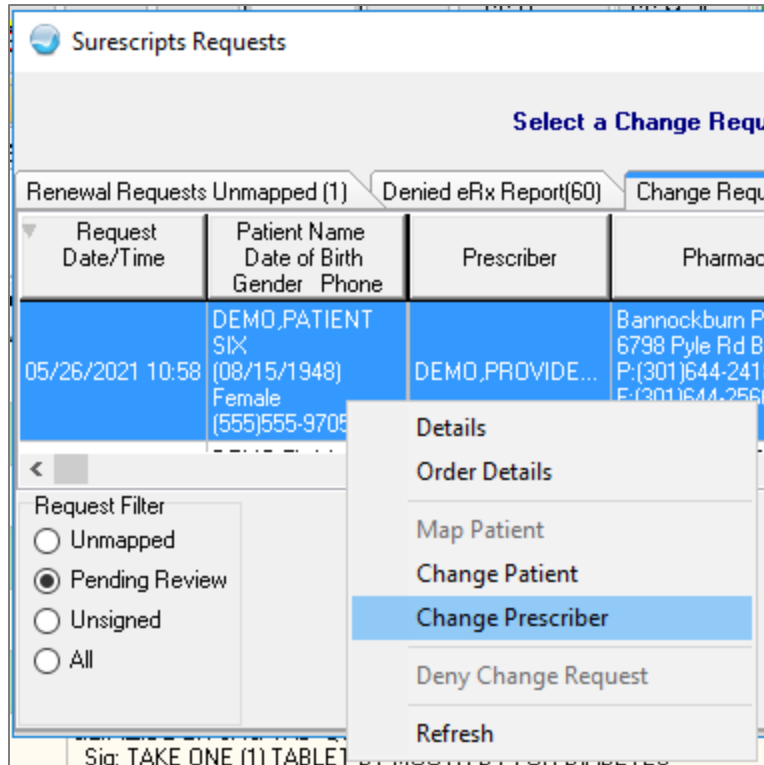


Figure 3-18: Change rRequest right click menu option Change Prescriber

The **Ordering Provider** dialog opens. A user will display in this list if they are a provider in the RPMS system, and also have a Surescripts Provider Identifier (SPI) and the appropriate service level.

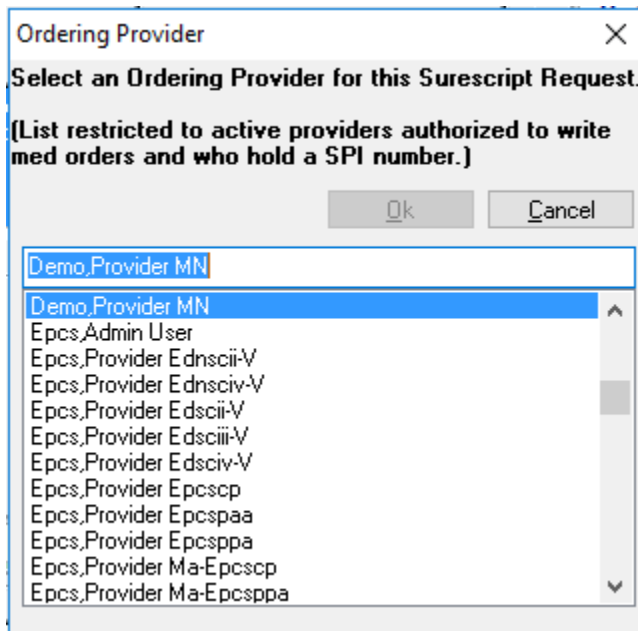


Figure 3-19: Ordering Provider dialog initial view

Select the desired prescriber and the **OK** button becomes active.

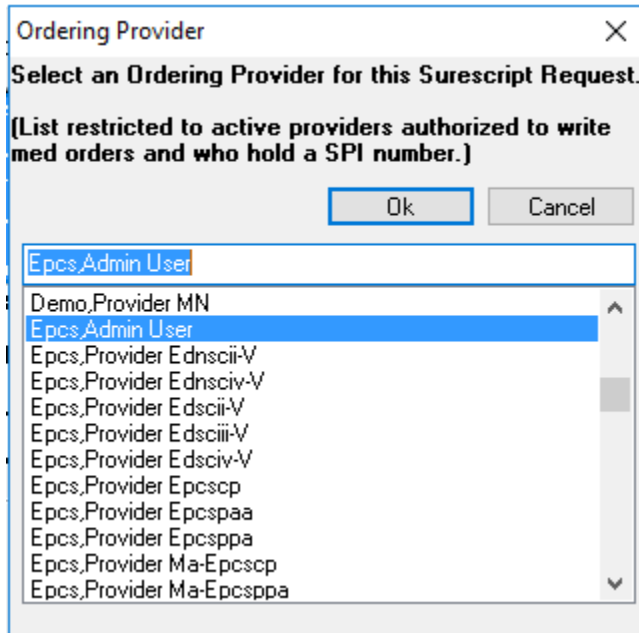


Figure 3-20: Ordering Provider dialog after selecting new prescriber

Click **OK** to confirm the new prescriber and display the updated information in the queue.

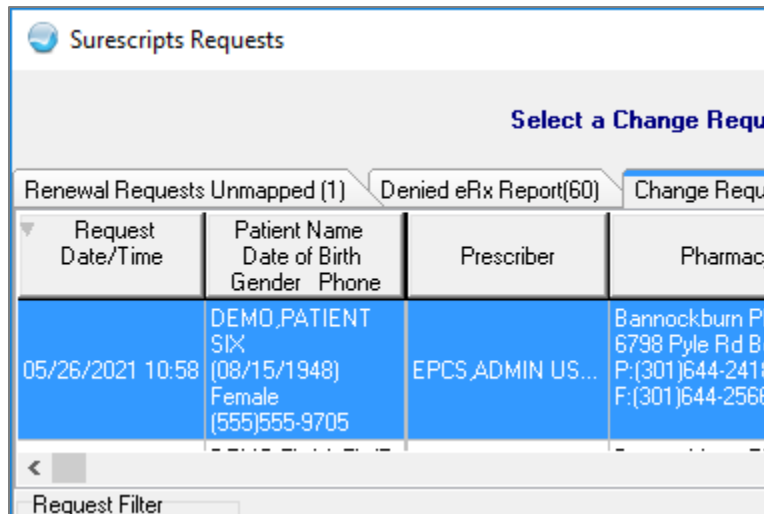


Figure 3-21: Updated prescriber information for a Change Request

3.4 Unsigned

Change Requests will have the status of Unsigned when the prescriber has started to process the request but has not signed and transmitted the order. These items should be monitored for compliance with the Surescripts 72-hour response guideline. Once the prescriber has created the order, the queue managers may no longer change patient or prescriber, or deny the request.

If the prescriber is not available to complete the order, there are two options:

- Another prescriber can sign the order by selecting the patient, finding the order, and choosing **Sign Selected** from the right-click menu. The prescriber who signs the order becomes the ordering prescriber, and any further follow up from the pharmacy will go to that prescriber.
- Another prescriber may discontinue the order by selecting the patient, finding the order, and selecting **Discontinue/Cancel** from the right-click menu. This will remove the pending order, but the associated request will revert to Pending Review and will reappear in the original prescriber's Surescripts Mailbox (or in the surrogate's SS Mailbox, if a surrogate has been set). However, the request now allows for Change Patient and Change Prescriber in the queue, if needed.

4.0 Processing Change Requests

Prescribers will process the Change Requests in the Surescripts Mailbox. Prescribers may already be using this component to process Renewal Requests.

Prescribers will access the SS Mailbox in one of two ways: by opening the SS Mailbox component directly or by clicking on the **Surescripts Pending Request** item in the **Notifications** component.

4.1 Surescripts Mailbox Component

The Surescripts Mailbox (also called SS Mailbox or Mailbox) was released with EHR Patch 29. This component will be discussed in this manual only as it relates to Change Requests. For more detailed information on the SS Mailbox component, see the EHR v1.1 Patch 29 ePrescribing (eRx) Addendum to User Manual located here: https://www.ihs.gov/rpms/packagedocs/EHR/ehr_0110.29o_ePrescribing.pdf.

4.1.1 Change Request Types

Change Requests fall into two broad categories:

1. Requests to change the order.
 - a. Though it does not create a new fillable message, this includes requests for a prior authorization number.
2. Requests for information about the prescriber.

There are seven different specific codes used by Surescripts for Change Requests:

- G – generic substitution
- T – therapeutic interchange
- D – drug use evaluation
- S – script clarification
- OS – pharmacy out of stock
- P – prior authorization number needed
- U – prescriber validation – subtypes A through M
 - A – confirm state license status
 - B – confirm DEA license status in prescribing state
 - C – confirm DEA registration by DEA class
 - D – confirm state Controlled Substance license status
 - E – confirm state Controlled Substance license by DEA class
 - F – confirm NADEAN (also known as DEAX or XDEA) license status

- G – obtain or validate NPI
- H – enroll or re-enroll with prescription benefit plan
- I – confirm prescriptive authority for prescribed med
- J – enroll or re-enroll in REMS
- K – confirm assignment as patient’s lock in prescriber
- L – obtain or validate supervising prescriber
- M – confirm certificate to prescribe number status

When these requests are sent to an RPMS system, they will be split into two sections of the SS Mailbox.

3. Change Requests – contains requests where a new fillable message may be created. These are change types G, T, D, S, and OS.
 - a. A response of **Approve** or **Approve with Change** creates a new fillable prescription.
 - b. A response of **Deny** will deny that specific Change Request; however, it does not stop the original order from being filled. To stop the filling of the original order, a cancel or discontinue order should be sent.
4. Validation Requests – contains requests for a prior authorization number or requests for information about the prescriber. These are change types P and U.
 - a. A response of **Approve** or **Validate** will not create a fillable prescription; instead, the pharmacy will fill from the original order.
 - b. A response of **Deny** does not necessarily stop the original order from being filled. However, the pharmacy may elect not to fill the order if sufficient information about the prescriber’s authority to prescribe the medication is not obtained.

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.

When a prescriber is processing an item from the Change Requests section of the SS Mailbox component, there will be two screens to navigate.

- **Change Request Response** – provides information about the request and may include alternative medications to select from.
- **Change Request Action** – similar to the order screen, this allows the prescriber to review and adjust the order information prior to signing and transmitting it to the Surescripts pharmacy.

When a prescriber is processing an item from the Validation requests section of the SS Mailbox, the first screen is similar, but the second screen will be different:

- **Change Request Response** – contains information about the request and may include patient insurance information or one or more requests for prescriber specific information.
- **Confirmation** – displays the information that will be transmitted to the Surescripts pharmacy. This is similar to the summary box in the order screen. The prescriber must scroll through the information before the Confirm button may be selected.

4.2 Change Requests Processing

To process a request in the Change Requests section, first open the section to see the patient list:

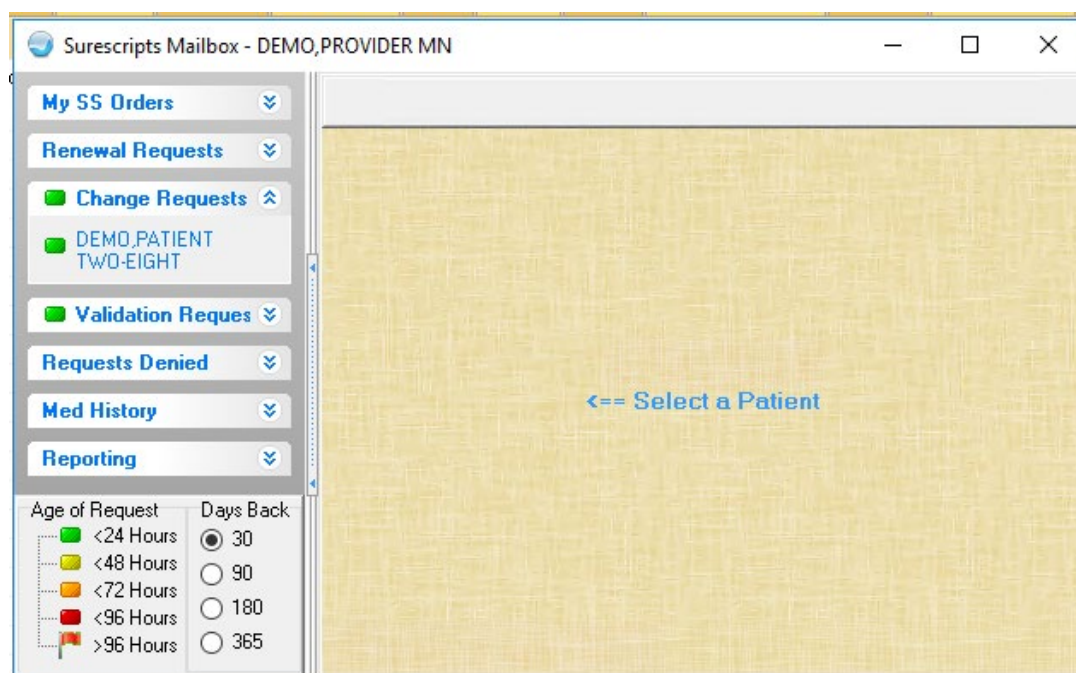


Figure 4-1: SS Mailbox with Change Requests group open

If the expected patient name or Change Request is not listed, the prescriber may right-click in a blank area of the left pane and select **Refresh**. This will refresh the contents of the component with any recently received data and will reset the component to the default view with closed sections. Alternately, close the component and reopen it.

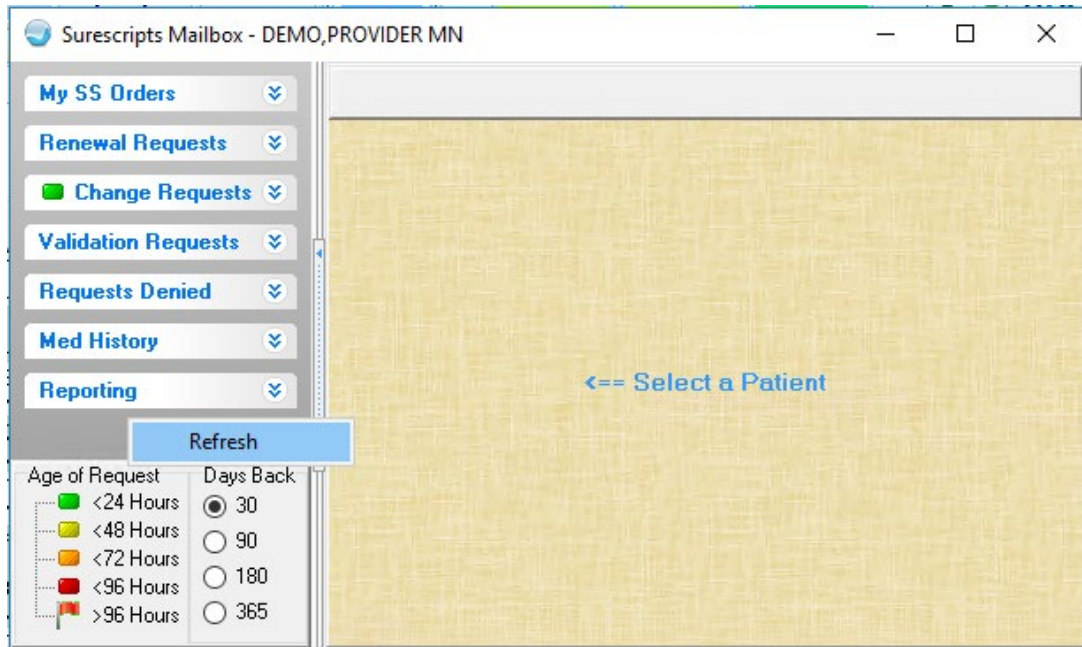


Figure 4-2: SS Mailbox Refresh option

When the desired patient is present, click on the patient’s name to see the requests associated with that patient.

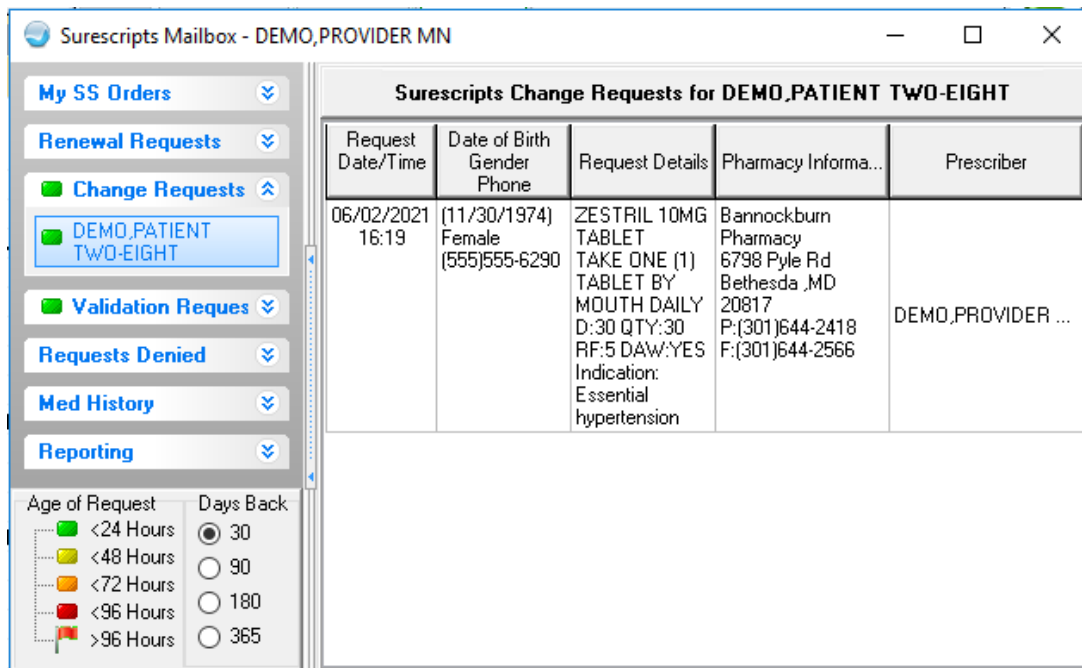


Figure 4-3: SS Mailbox Change Requests for specific patient

Hovering the cursor over the line item displays hover text hints for what can be done to interact with the item.

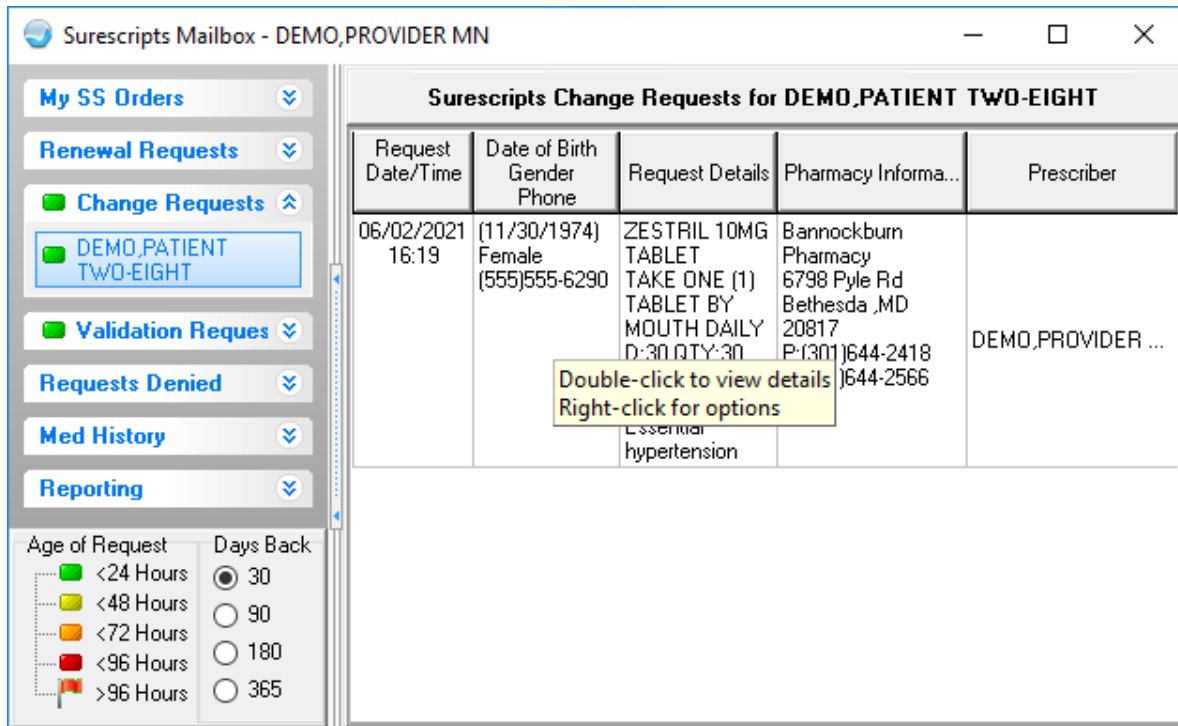


Figure 4-4: SS Mailbox Change Request hover help text

4.2.1 Request Details

Double click or right-click on a request and select **Details** to see the request details if desired.

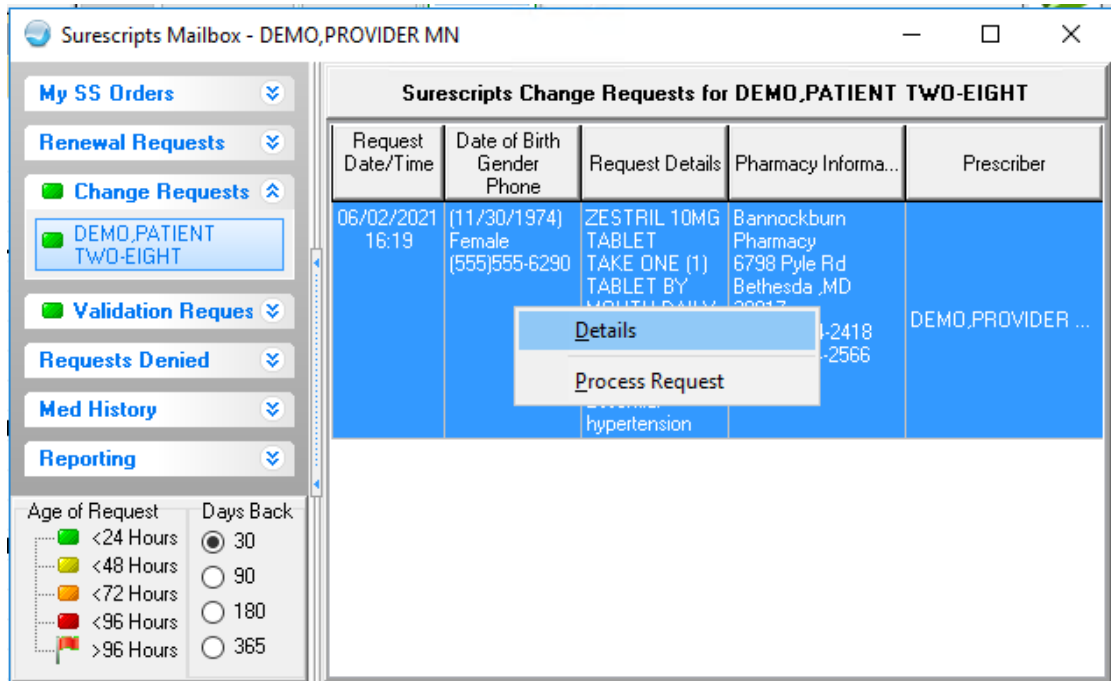


Figure 4-5: SS Mailbox Change Request right click menu options with Details highlighted

The request details show the information sent by the pharmacy, and the corresponding information as found in RPMS.

Information received for Message: 8068 200000141289

DISPLAYING Ordered med HL7 data:

PON: 672149
 Patient: DEMO,PATIENT TWO-EIGHT
 Pt Data: DOB: Nov 30, 1974 SEX: F HRCN: 112572
 Pt Address: PO BOX 154 ALB, NM 87119
 Pt Comm: Unknown: (555)555-6290
 Provider: DEMO,PROVIDER Ph: (505)248-1111
 Prov Address: F987654321 Longest Address Street ALBUQUERQUE, NM 87110

Medication: ZESTRIL 10MG TABLET
 SIG: TAKE ONE (1) TABLET BY MOUTH DAILY
 Supply: 30
 Quantity: 30
 Refills: 5
 Dx: I10 Essential (primary) hypertension
 Sub: Dispense as Written
 Pharmacy: Bannockburn Pharmacy Ph (301)644-2418
 Ph Address: 6798 Pyle Rd Bethesda, MD 20817

Notes to Pharm:

DISPENSED Drug HL7 Information

Dispensed Drug:
 SIG:
 Supply:
 Quantity:
 Fills:
 Sub: Allow Therapeutic Substitutions
 Written Date:
 Notes to Prov:

MAPPED DATA:

Patient: DEMO,PATIENT TWO-EIGHT
 Pt Data: DOB: NOV 30, 1974 SEX: FEMALE HRCN: 112572
 Address: PO BOX 154 ALB ,NEW MEXICO 87119
 Pt Phone: (555)555-6290
 Provider: DEMO,PROVIDER MN Ph:
 Prov Address: ,

Medication: ZESTRIL (BRAND) TAB
 SIG: TAKE ONE (1) TABLET BY MOUTH DAILY
 Supply: 30
 Quantity: 30
 Refills: 5
 Dx: Essential (primary) hypertension
 Sub: Dispense as written
 Pharmacy: Bannockburn Pharmacy Ph: (301)644-2418
 Ph Address: 6798 Pyle Rd Bethesda ,MD 20817

Font Size: 9

Figure 4-6: SS request details

4.2.2 Process Request

Right-click and select **Process Request** to begin processing the request.

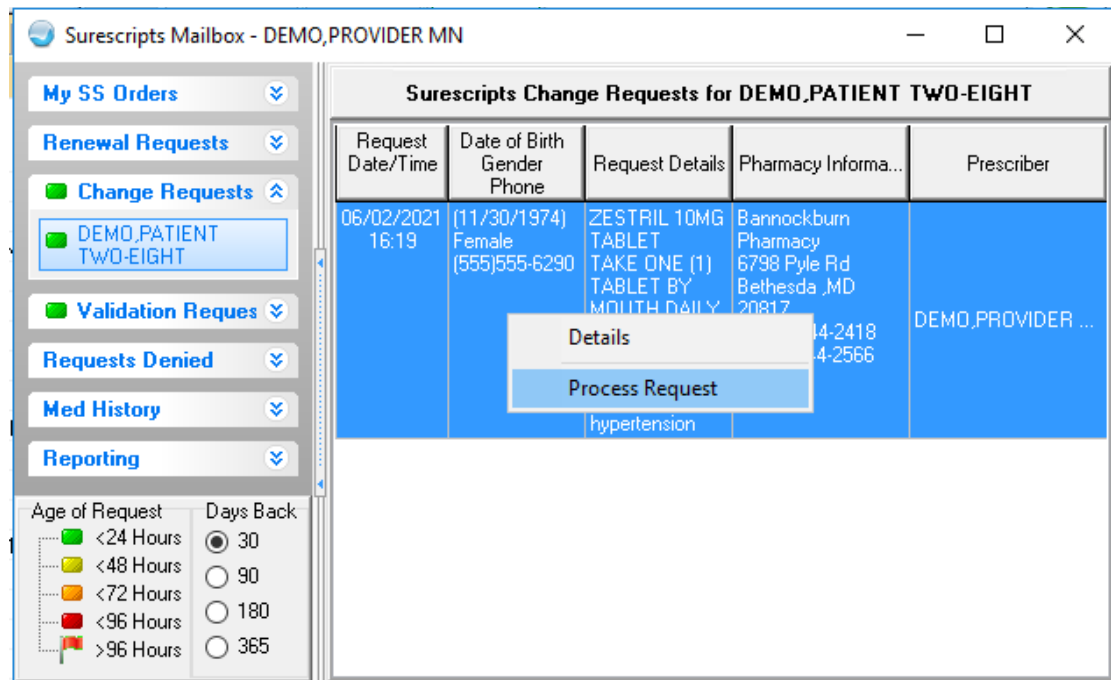


Figure 4-7: SS Mailbox Change Request right click menu options with Process Request highlighted

The **Change Request Response** dialog opens.

4.2.3 Change Request Response

The Change Request Response dialog title will contain the name of the patient, and there is a colored bar below the title with the type of Change Request listed. In the main pane there is information about the request. The information may look different depending on the type of request and what information was or was not included by the pharmacy. Information may or may not include Pharmacy name, reasons broken out by service and professional information, a grid with one or more medications as sent by the pharmacy, the original order information, and sometimes a statement about medication availability. In the following screen shot, reason codes were included, and one of the medications requested by the pharmacy is not currently available in the local drug file. The lower pane contains a drop-down box to select the desired medication, and there are buttons for **Request Details**, **Deny**, **OK**, and **Cancel**. The OK button may be inactive if there is no default medication in the drop-down box.

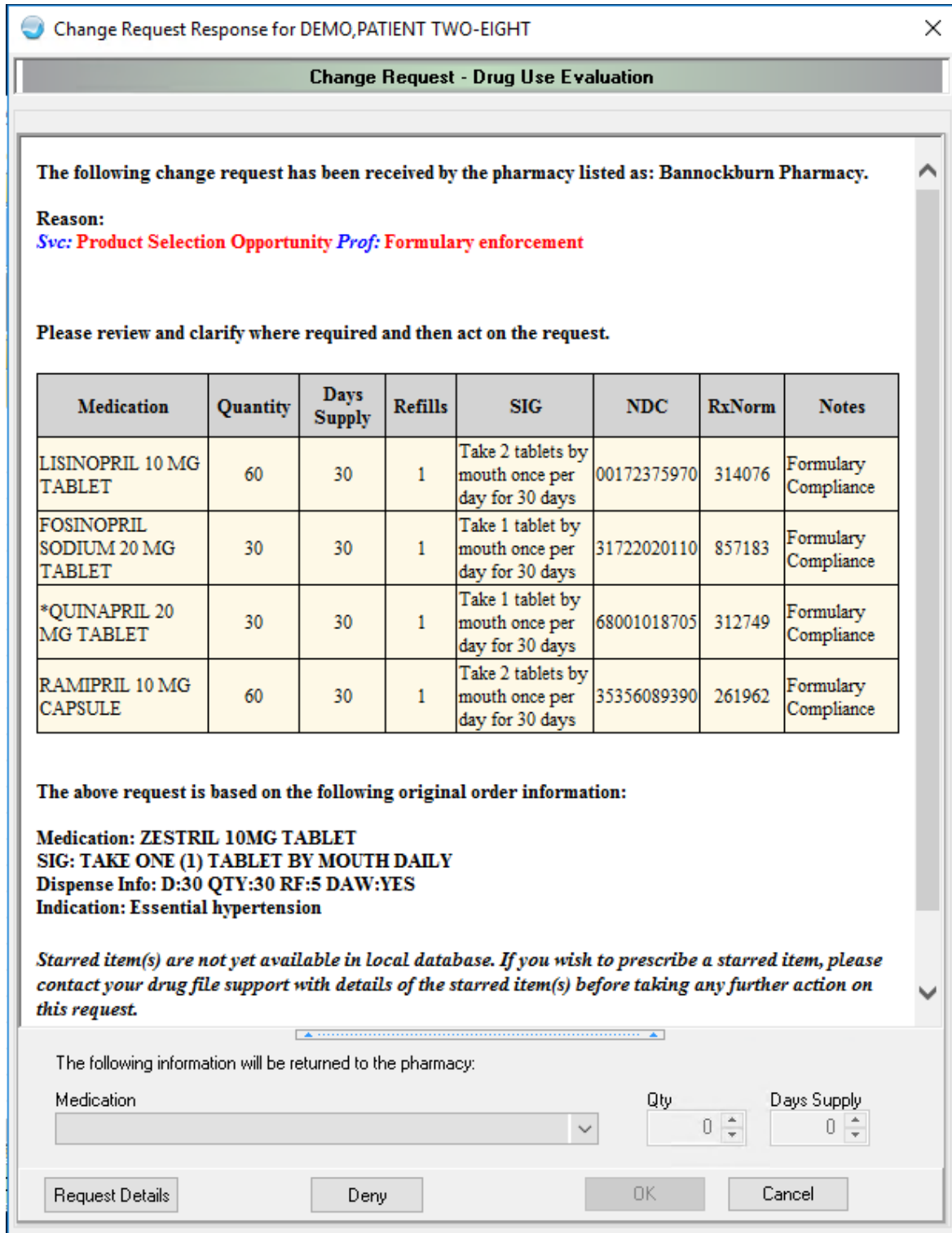


Figure 4-8: Change Request Response dialog for a Drug Use Evaluation type request

If the prescriber already knows that they will deny the request, they can select the **Deny** button to deny the request without moving to the second screen. Clicking **Deny** will open the **Confirm** dialog.

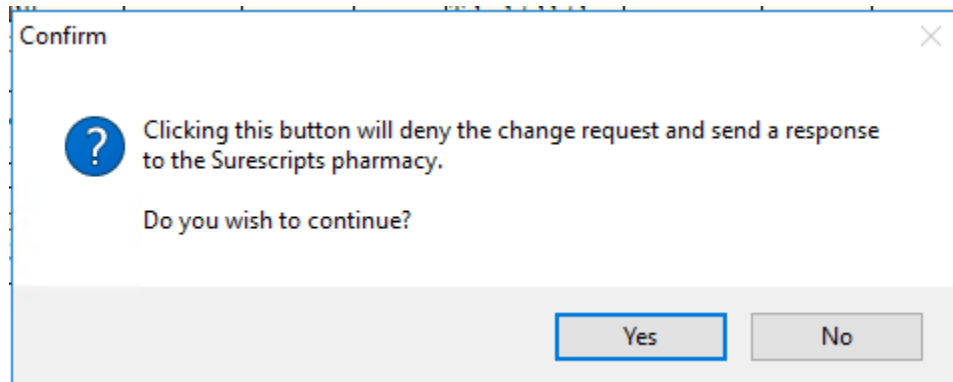


Figure 4-9: Confirm dialog when denying a request

Click **Yes** to continue, or **No** to return to the **Change Request Response** dialog.

Clicking **Yes** opens the **Reason for Denial** dialog. There is a drop-down box with reasons to select from, and a free text box to type in a reason or additional information.

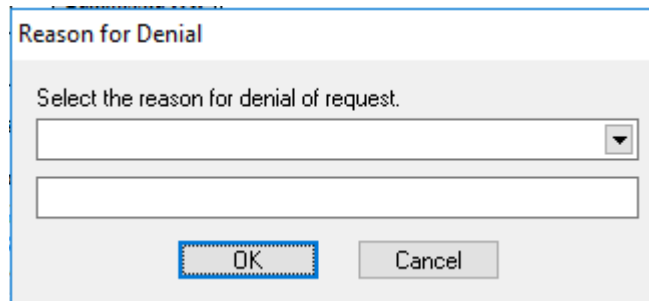


Figure 4-10: Reason for Denial dialog

Select or type in a Reason.

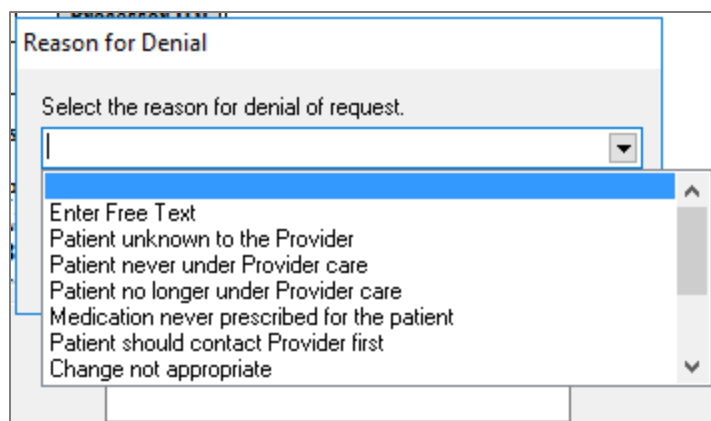


Figure 4-11: Partial list of Reason for Denial change reasons

Add additional information if desired, then click **OK** to send the denial response, or click **Cancel** to abort the denial and return to the **Change Request Response** dialog.

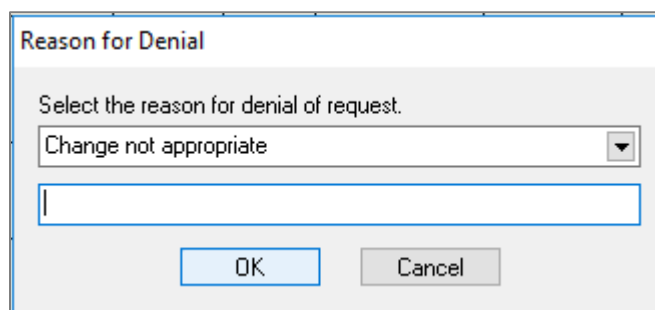


Figure 4-12: Reason for Denial dialog

To make a change to the original order as suggested by the pharmacy, you must select a medication. If only one medication is offered by the pharmacy and that medication is available in the local drug file, the drop-down box will default to that selection, unless the requested medication is a controlled substance. If the medication is not available in the local drug file, the request may only be denied until the medication is made available in the local drug file. If more than one medication is offered by the pharmacy, the drop-down box will be blank. Click on the box to select the desired medication from among the alternatives offered by the pharmacy. If a medication offered by the pharmacy is not available in RPMS, it will not be listed among the choices in this box.

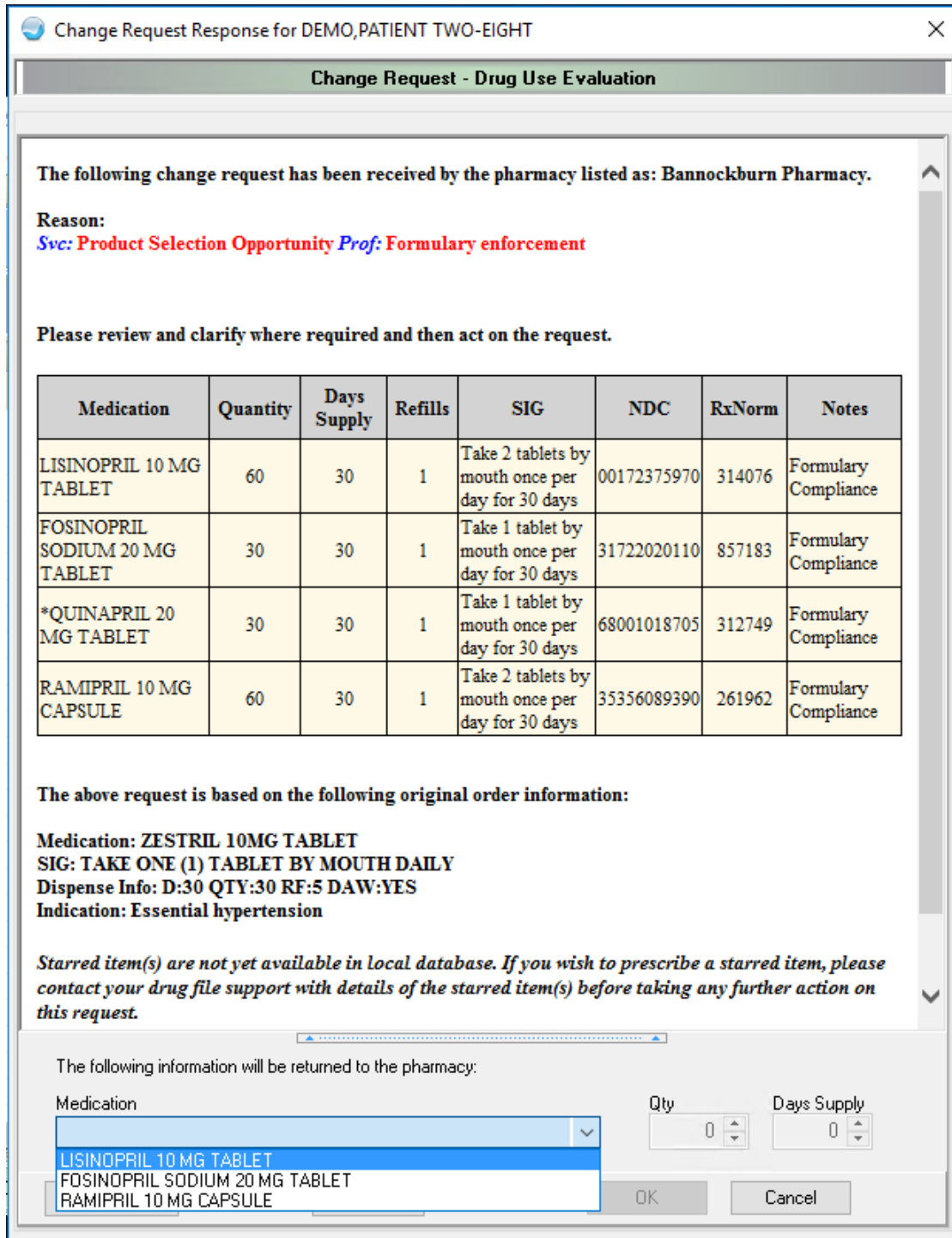


Figure 4-13: Change Request Response dialog for Drug Use Evaluation type Change Request with drop down activated

Once a medication is selected, click the **OK** button to move to the next screen. The **Change Request Action** dialog opens.

4.2.4 Change Request Action

The Change Request Action dialog has the request type and pharmacy name in the title bar. It resembles the standard order dialog with a few changes. These changes include listing the ordered med and the requested med, Action radio buttons, an authorized fills indication, Details button, and an action button with text that reflects the currently selected action radio button. The majority of the dialog opens in an inactive state. The **Dosage** and **Route** will display **SEE SIG** and the Schedule will display **AS WRITTEN**, but the full directions will show in the ordered med, requested med, and summary area. The Details button brings up the same request details as shown in Section 4.2.1.

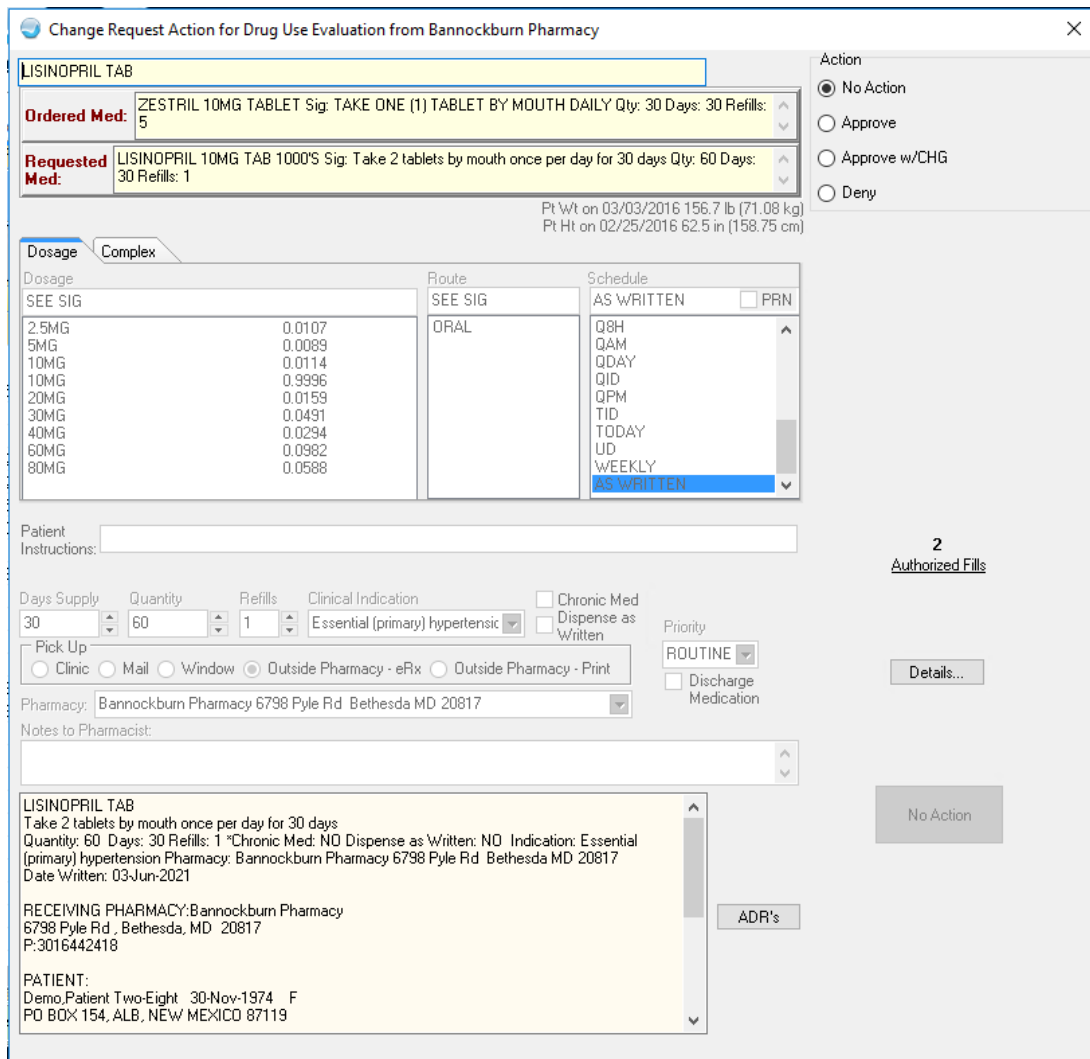


Figure 4-14: Change Request Action dialog for Drug Use Evaluation type Change Request

4.2.5 Stop Processing

If the prescriber does not wish to complete the response at this time, there are two actions that can be taken. Clicking the **X** at the top will save the request in the current state and when the request is reopened it will start at the **Change Request Action** dialog (see Section 4.2.4). Clicking the **No Action** radio button, then scrolling through the summary and clicking the **No Action** button will revert the request to the original state and when the request is reopened it will start at the **Change Request Response** dialog (see Section 4.2.2).

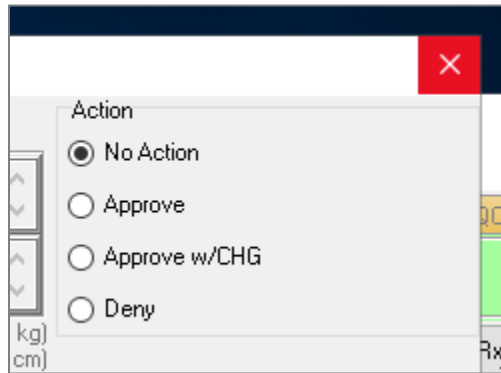


Figure 4-15: A portion of the Change Request Action dialog with the Action pane and 'X' button

4.2.6 Approve

The Approve action will keep the information exactly as sent by the pharmacy with no changes made by the prescriber. Only the Chronic Med designation can be changed when **Approve** is selected.

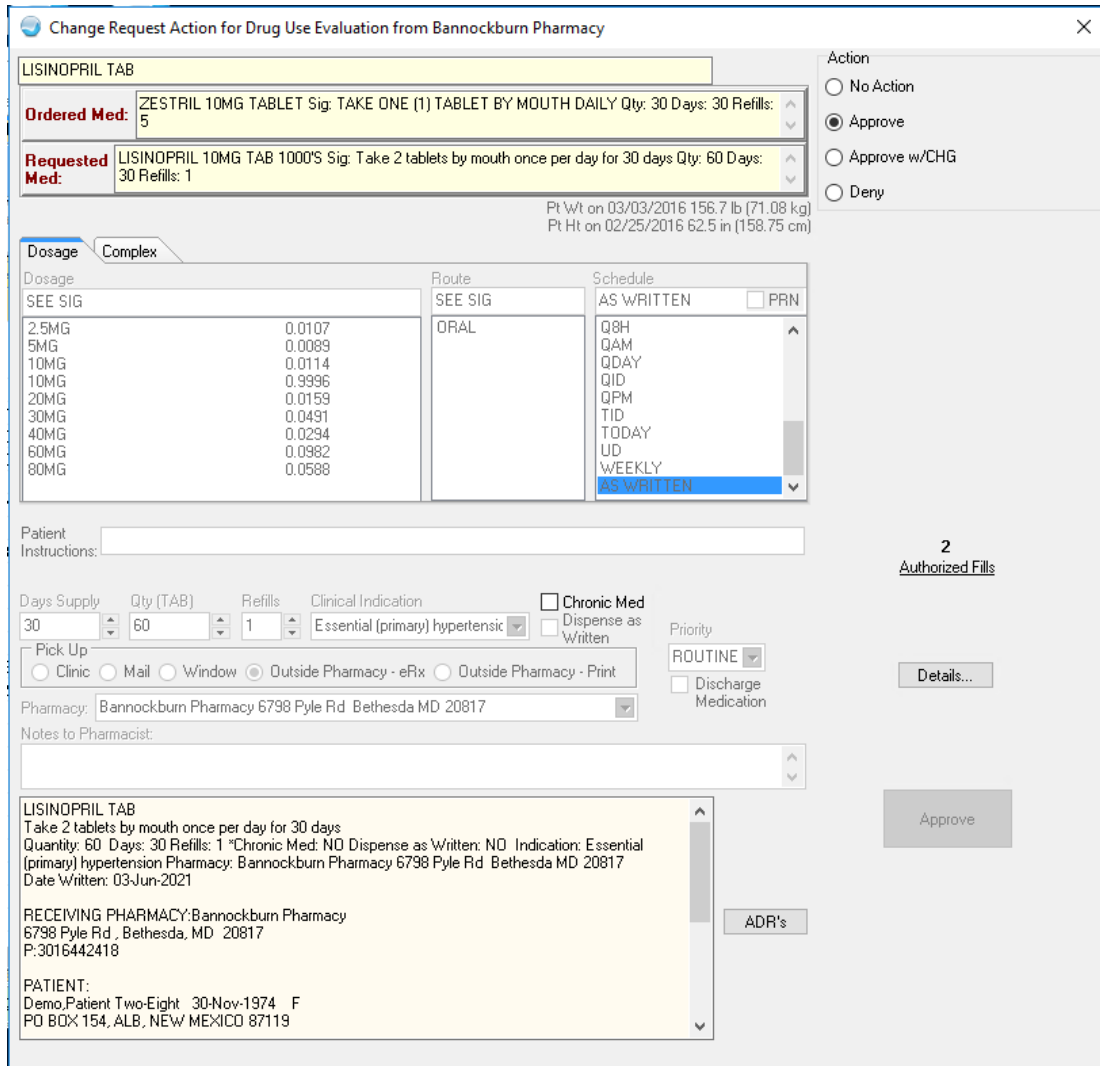


Figure 4-16: Change Request Action dialog Approve

4.2.7 Approve with Change

Approve with Change (listed as Approve w/CHG in the radio button options) allows the prescriber to change all of the information except for the pickup method and pharmacy selection, including a change of medication if desired. When **Approve w/CHG** is selected, the **Dosage, Route, Schedule, and Patient Instructions** fields reset. This is done because there are limitations to how RPMS can process the directions sent by the pharmacy. Leaving the directions as they are returned by the pharmacy can cause medication errors on subsequent actions like renew or change unless the sig is rebuilt. Prescribers can review the directions from the pharmacy in the Requested Med box to recreate the sig or can select different directions if desired.

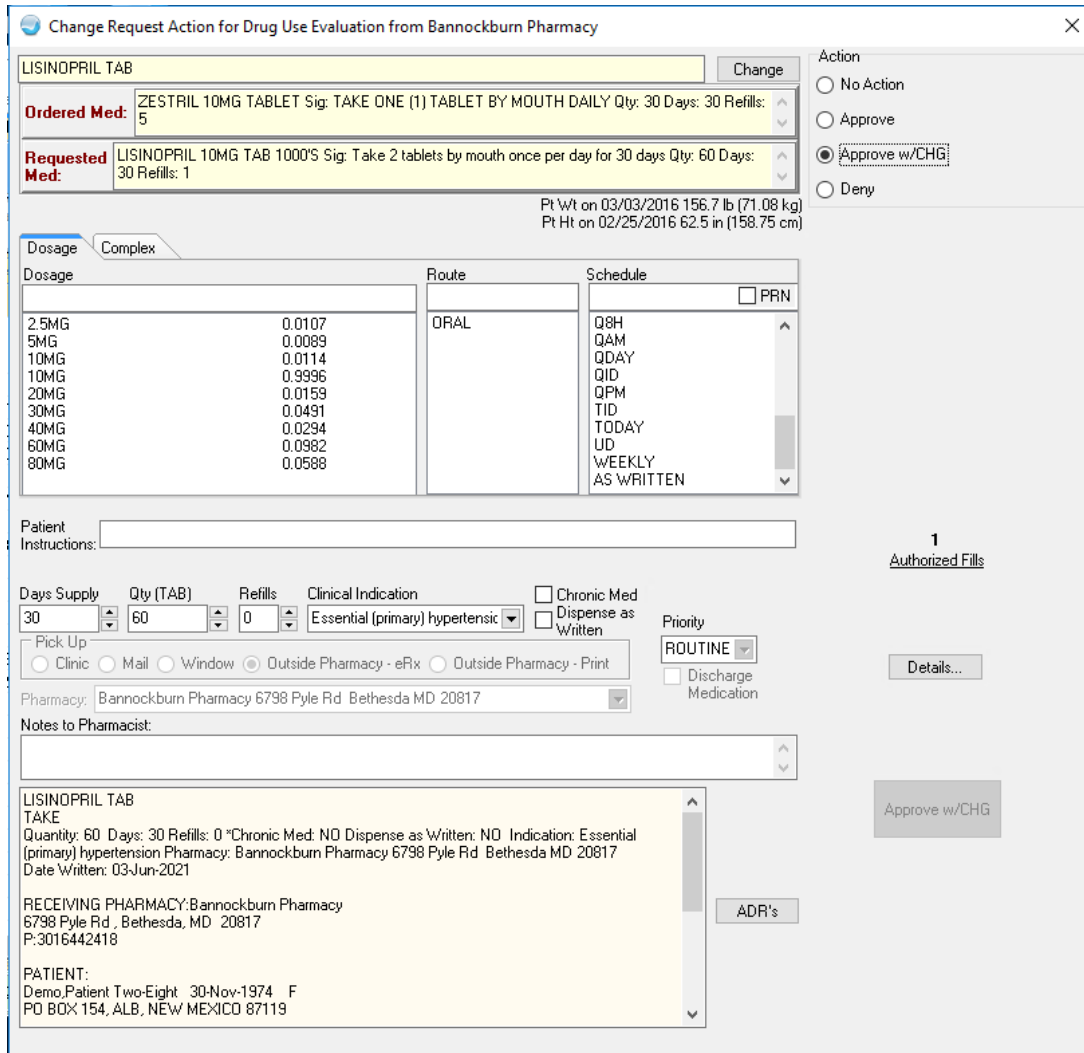


Figure 4-17: Change Request Action dialog Approve with Change

Prescribers can switch between the radio buttons without loss of integrity of the request. If **Approve w/CHG** is selected with the associated clearing of the directions, the prescriber can then select **No Action** or **Approve**, and the original information will be restored.

It is possible that Approve is not available to select. In this case, hover over the radio button to see the reason. This is usually because the request had to be mapped to the patient. One additional rare circumstance may occur where the Approve action is available, but the order cannot be saved. This usually occurs when the **Days Supply** field is blank or reads zero. If this occurs, a warning for an invalid Days Supply will display; the prescriber can select **Approve w/CHG** and adjust the directions and Days Supply.

Once the order is correct, the summary box must be reviewed. The action button will not be active until the summary scroll is at the end (or the dialog is sufficiently enlarged to not have scroll bars). The action button text will reflect the action radio button selected. Clicking the action button will create the order and bring up the **Review/Sign Changes** dialog.

4.2.8 Deny

If the prescriber prefers to deny the request, this can be done from the **Change Request Action** dialog. Select **Deny** in the **Action** pane. The **Deny** reasons and **Additional Denial Text** fields display.

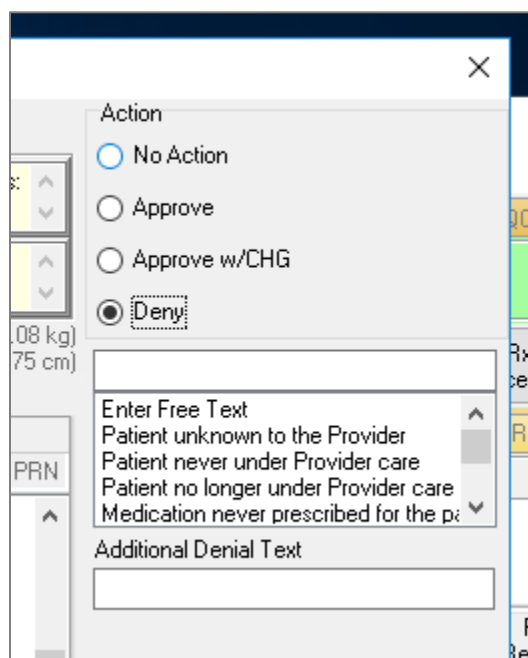


Figure 4-18: A portion of the Change Request Action dialog with Deny and Deny reasons

Select an existing reason or enter a free text reason. Scroll through the summary box to activate the Deny button and click **Deny**. The message will be sent immediately without requiring a signature.

4.3 Sign the Order

For change responses of Approve or Approve with Change, once the action button is active and clicked, the **Review/Sign Changes** dialog opens.

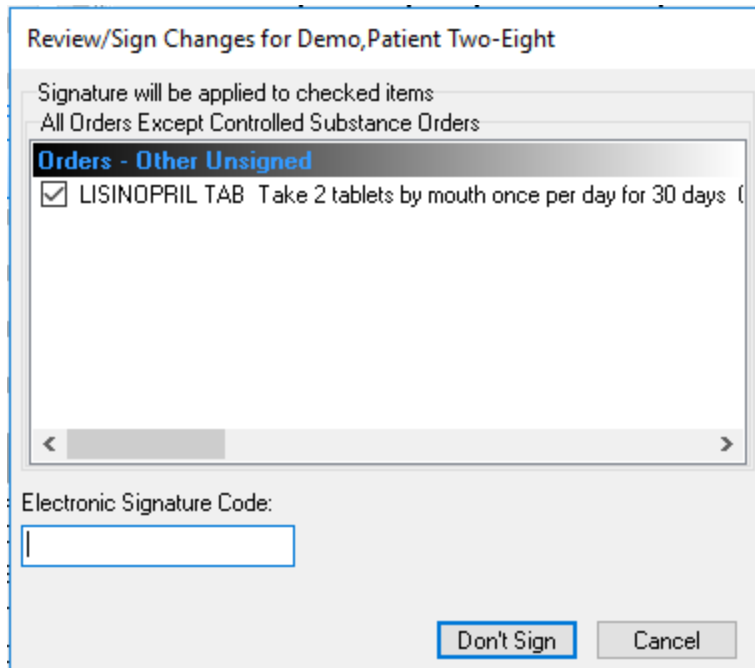


Figure 4-19: Review/Sign Changes dialog in default view

Click **Don't Sign** or **Cancel** to leave the order unsigned. This may be useful if there are more entries to process and prefer to sign all orders at once. Otherwise, enter the **Electronic Signature Code**.

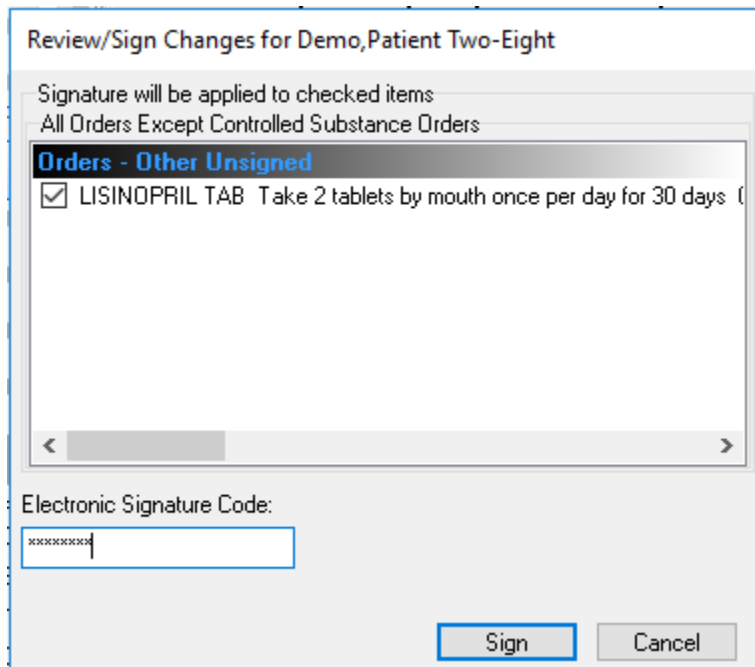


Figure 4-20: Review/Sign Changes dialog after signature entered

The **Don't Sign** button changes to **Sign**. Click **Sign** to complete the ordering process and transmit the order or **Cancel** to leave the order unsigned.

Note that orders for Controlled Substances (CS) will conform to the Electronic Prescribing of Controlled Substances (EPCS) rules and require a token or Personal Identity Verification (PIV) card to sign.

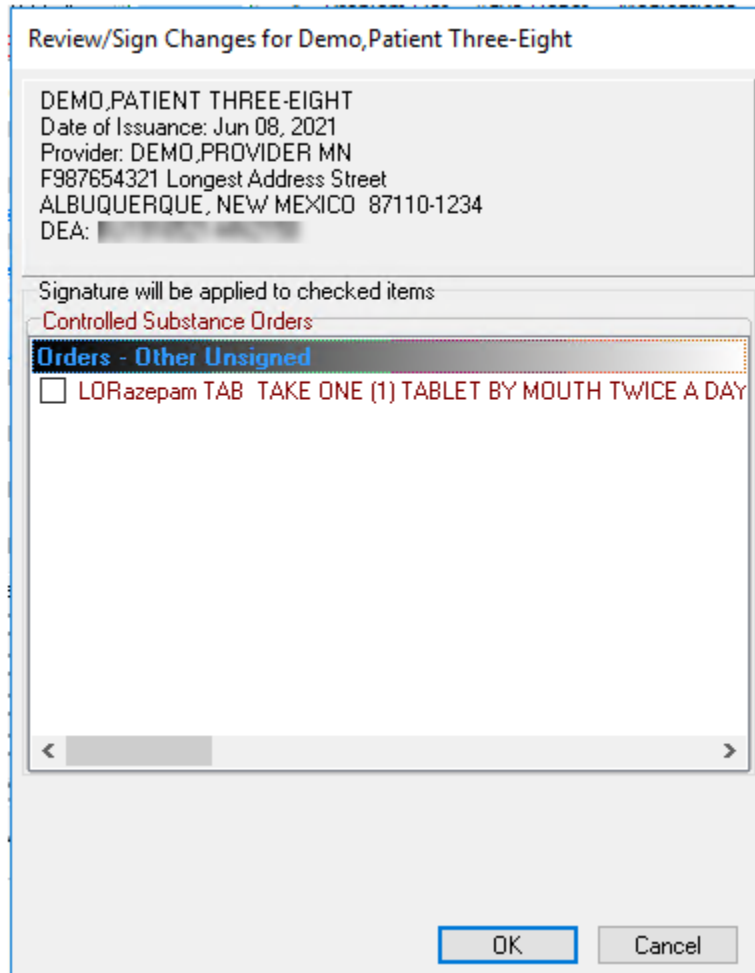


Figure 4-21: Review/Sign Changes dialog for CS medication

Once signed, the change response is transmitted to the pharmacy. The SureScripts Mailbox remains open, with the Change Requests section remaining open. If no other items exist in the section, no patient names will be seen.

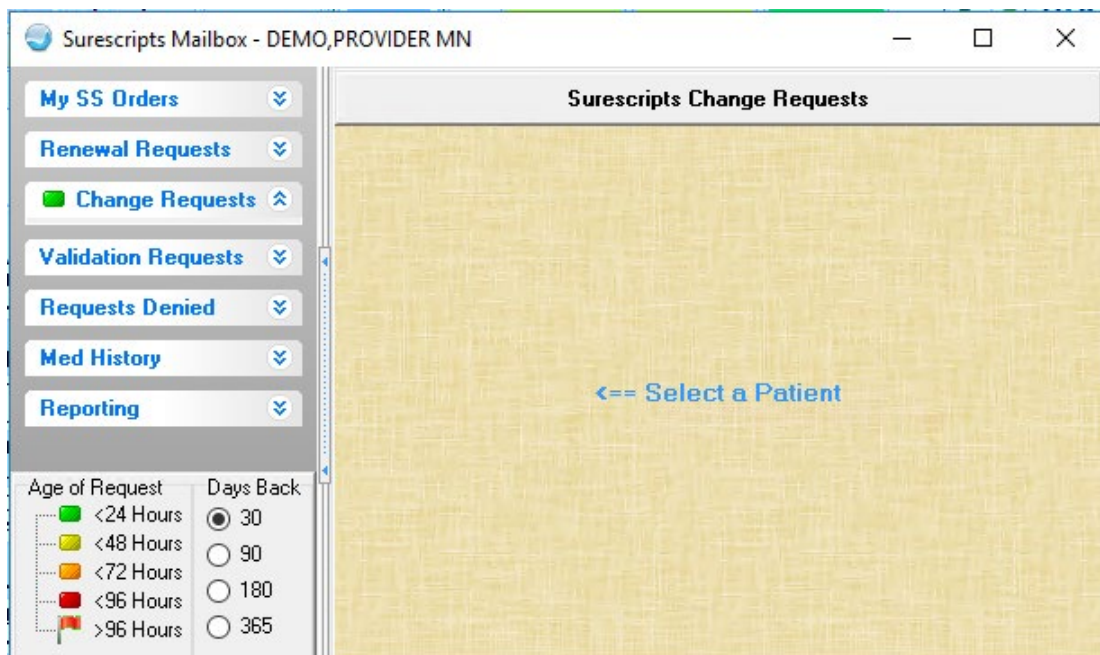


Figure 4-22: Surescripts Mailbox component view immediately after processing all the Change Requests

4.4 Discontinue Unsigned Surescripts Response

If a prescriber leaves a change response as an unsigned order, it may be signed at any time using the usual methods that apply to any unsigned order. However, if a Surescripts response order is discontinued prior to signature, the original request will return to the unprocessed state, return to the SS Mailbox, and need to be re-processed.

An unsigned order that is a Surescripts response can be identified by the Surescripts Request (SSReq) Internal Entry Number (IEN) number in the line item on the Orders component as shown below.

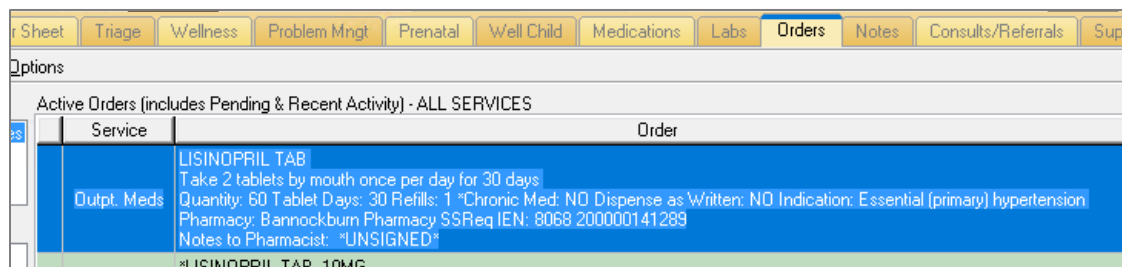


Figure 4-23: A portion of the EHR with an unsigned order from a Change Request

To discontinue this order, right-click on the line item and select **Discontinue/Cancel**.

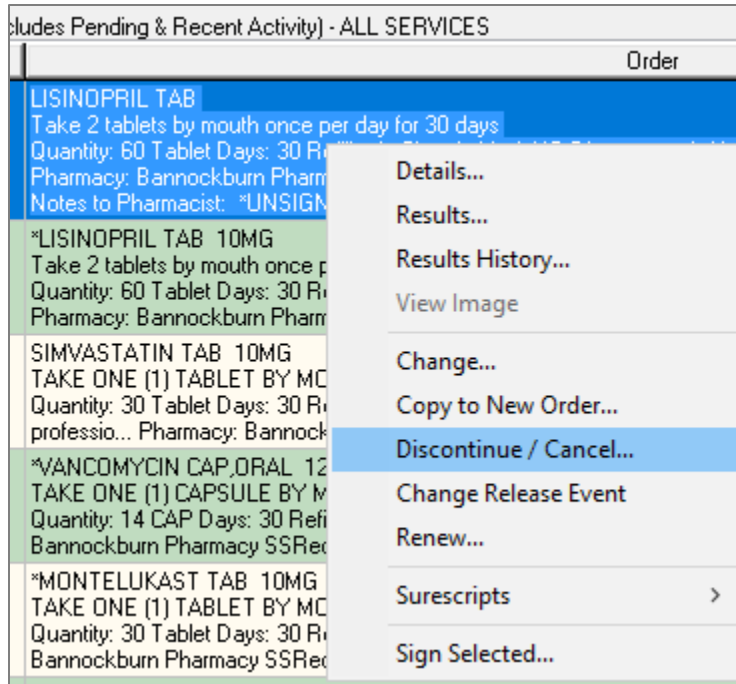


Figure 4-24: The right click menu for an order with Discontinue/Cancel highlighted

The **Discontinue/Cancel Order** dialog opens. A summary of the order including the SSReq IEN number is displayed.

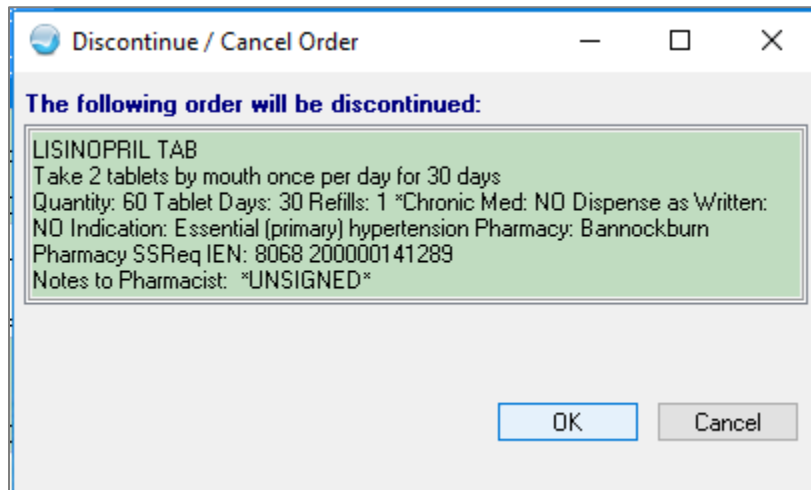


Figure 4-25: The Discontinue/Cancel Order dialog

Click **OK**. The **Confirm** dialog opens.

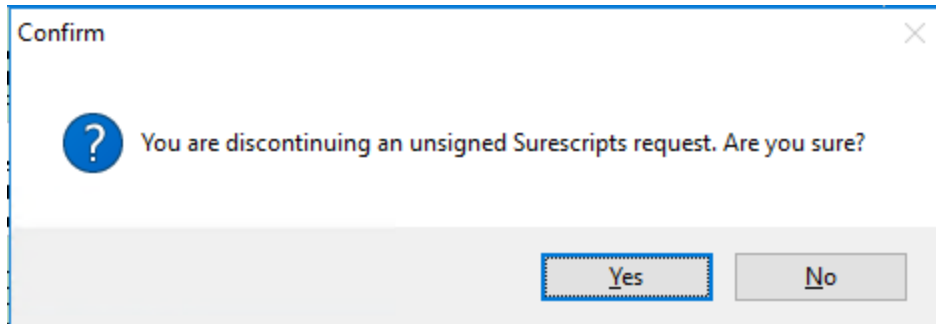


Figure 4-26: The Confirm dialog for discontinuing an unsigned SS response

Click **Yes** to discontinue the order, or **No** to keep it. If the order is discontinued, it will return to the SS Mailbox component. The age of the request will be counted from when it was originally received, not from the time it was returned to the mailbox. Again, Surescripts guidelines state that these requests should be fully processed within 72 hours of receipt.

Surescripts Change Requests for DEMO,PATIENT TWO-EIGHT			
Request Date/Time	Date of Birth Gender Phone	Pharmacy Information	Prescriber
06/02/2021 16:19	(11/30/1974) Female (555)555-6290	Bannockburn Pharmacy 6798 Pyle Rd Bethesda ,MD 20817 P:(301)644-2418 F:(301)644-2566	DEMO,PROVIDER MN

Figure 4-27: Portion of SS Mailbox with request returned for processing

4.5 Validation Requests Processing

To process a request in the Validation Requests section, first open the section to see the patient list. If the patient desired is not listed, right-click on a blank area in the left pane and select **Refresh** or close the dialog and reopen it.

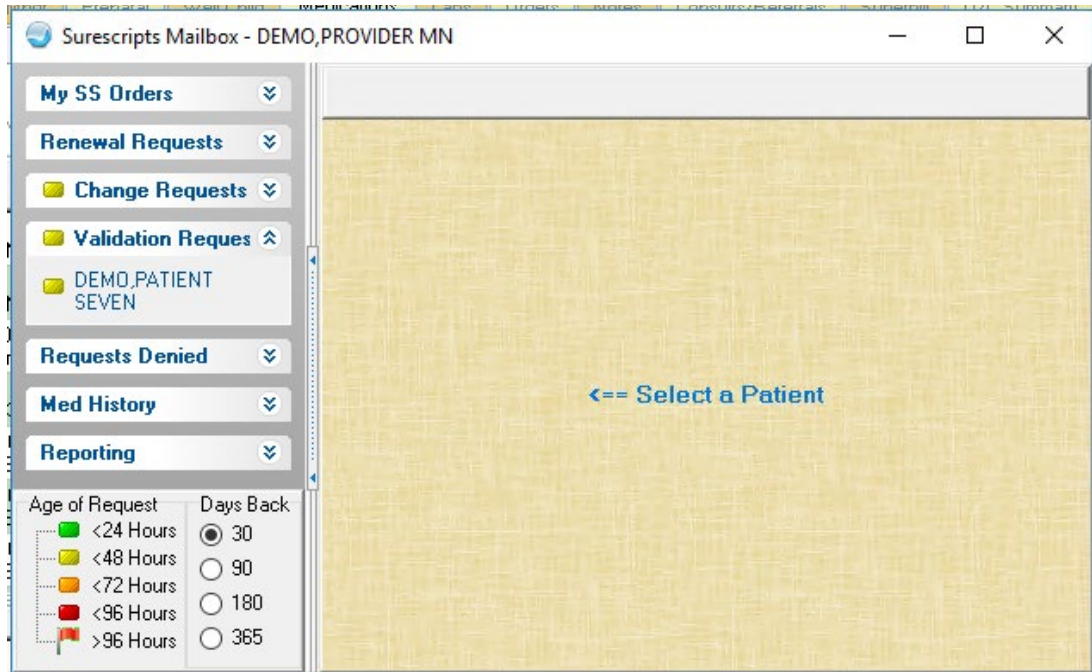


Figure 4-28: SS Mailbox with Validation Request group open

Select the patient’s name to see the requests associated with that patient:

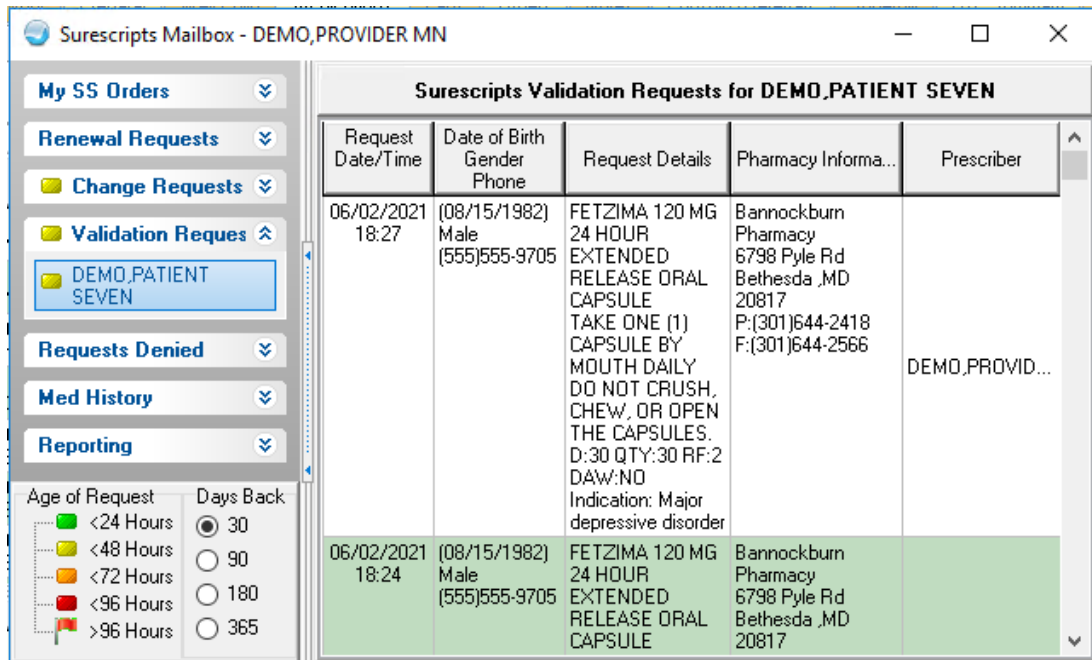


Figure 4-29: SS Mailbox Validation Requests for specific patient

4.5.1 Request Details

Double click or right-click on a request and select **Details** to see the request details if desired. The details are the same as described in Section 4.2.1.

4.5.2 Process Request

Right-click and select **Process Request** to begin processing the request.

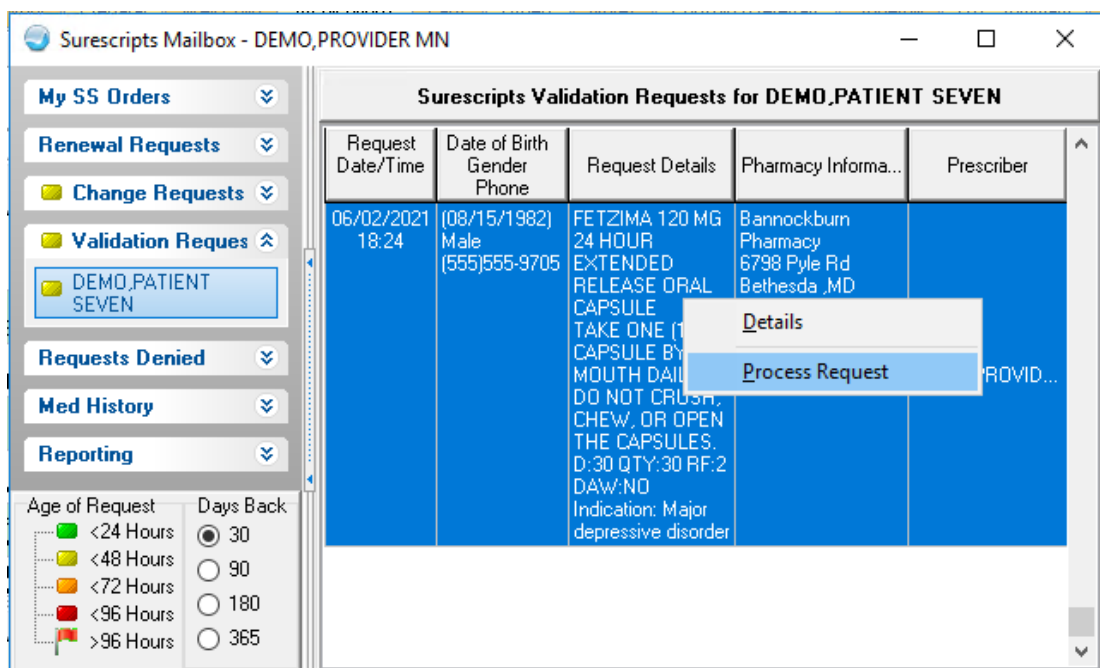


Figure 4-30: SS Mailbox Validation Request right click menu options with Process Request highlighted

The **Change Request Response** dialog opens.

4.5.3 Change Request Response

The Change Request Response dialog for Validation Requests will look different depending on if the request is for a Prior Authorization (PA) number or a Prescriber Authorization.

A request for a PA number is only looking for the result of a process done outside the electronic prescribing process. The prescriber would request the PA number using their existing process, then add the number to the response and send it to the pharmacy.

A prescriber authorization is looking for information about the prescriber, including license numbers, DEA numbers, NPI numbers, and similar information.

4.5.4 Prior Authorization Number Request

The Change Request Response dialog for a PA number request has a title with the name of the patient, and there is a colored bar with the type of Change Request listed. In the main pane there is information about the request. The information may look different depending on the type of request and what information was or was not included by the pharmacy. Information may or may not include Pharmacy name, the patient’s insurance information, and the original order information. The middle pane contains a field for the PA number and the lower pane contains a field for an optional note. There are buttons for **Request Details**, **Deny**, **Approve**, and **Cancel**.

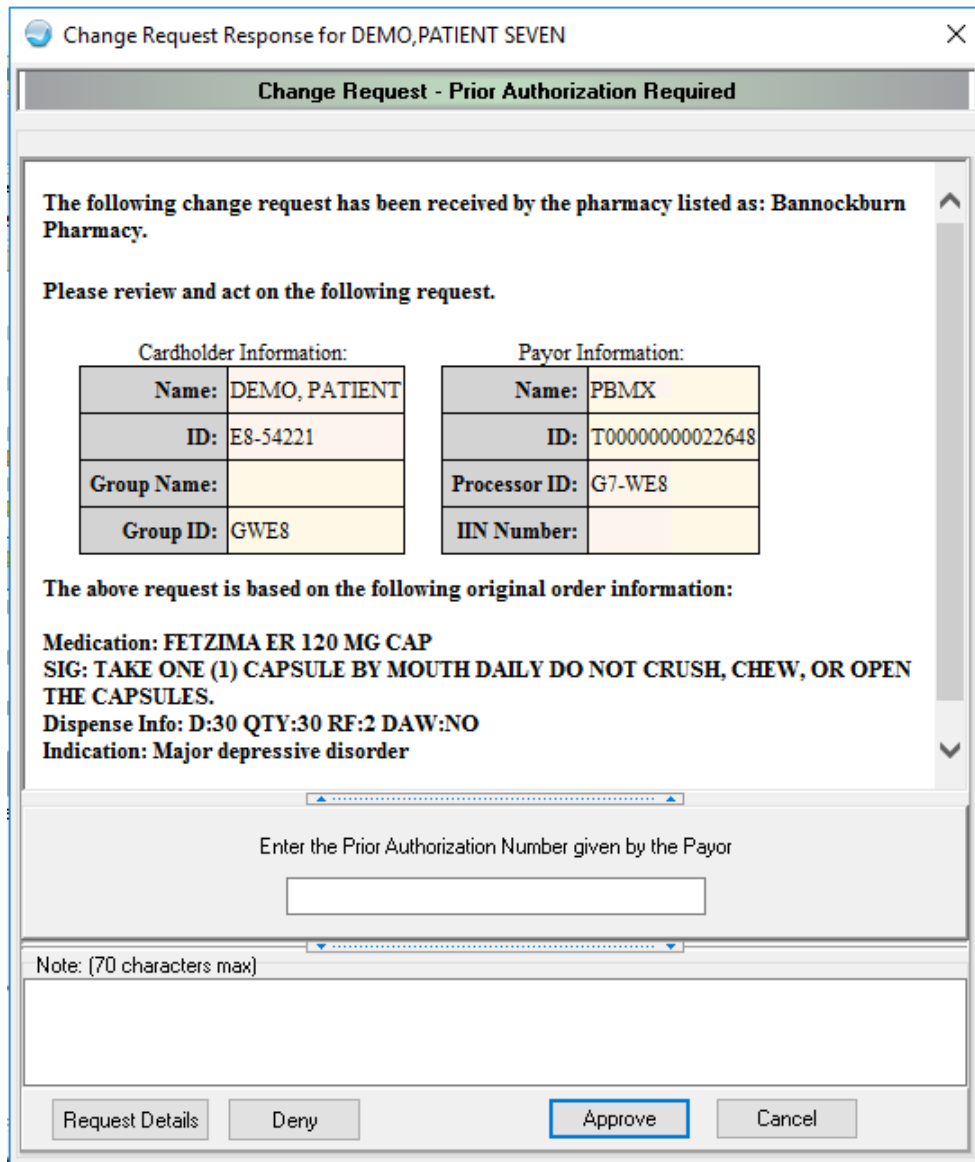


Figure 4-31: A Change Request Response dialog for a Prior Authorization Required type Change Request

The Prior Authorization number is not required, though it is encouraged if you have gone through a process to obtain one. If a PA number will not be requested or obtained, the prescriber may deny the request by clicking on the **Deny** button. The **Confirm** dialog will display.

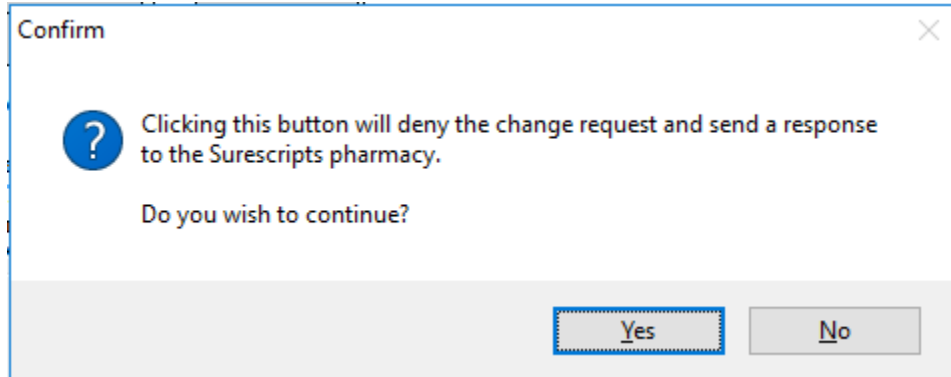


Figure 4-32: Confirm dialog when denying a PA number request

Click **Yes** to continue or **No** to go back to the **Change Request Response** screen. Clicking **Yes** brings up the **Reason for Denial** dialog.

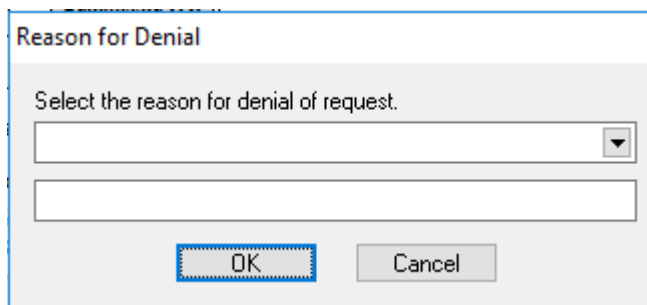


Figure 4-33: Reason for Denial dialog

Select or type in a Reason.

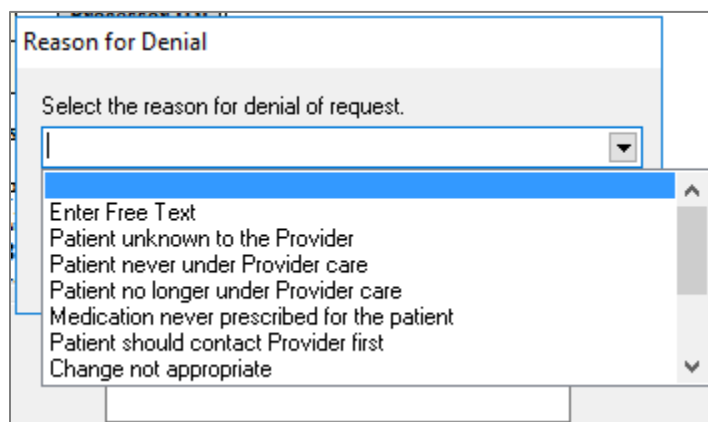


Figure 4-34: Partial list of Reason for Denial change reasons

Click **OK** to transmit the response to Surescripts.

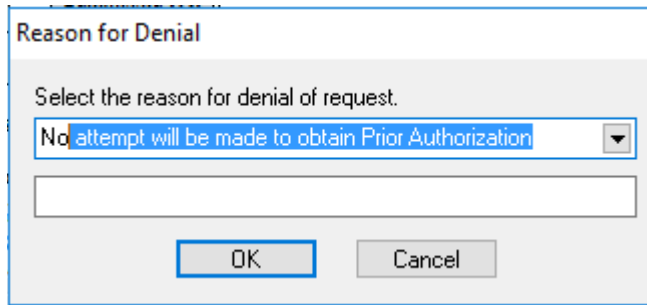
A dialog box titled "Reason for Denial" with a light gray background. At the top, it says "Select the reason for denial of request." Below this is a dropdown menu with the selected option "No attempt will be made to obtain Prior Authorization". Underneath the dropdown is a text input field. At the bottom of the dialog are two buttons: "OK" and "Cancel".

Figure 4-35: Reason for Denial with reason selected

4.5.5 Prescriber Authorization Request

The Change Request Response dialog for a Prescriber Authorization request has a title with the name of the patient, and there is a colored bar with the type of Change Request listed. In the main pane there is information about the request. The information may look different depending on the type of request and what information was or was not included by the pharmacy. Information may or may not include Pharmacy name, a grid with the types of information requested and the currently stored information in RPMS (if applicable), and the original order information. The middle pane contains the request list items and the response area, and the lower pane contains a field for an optional note. There are buttons for **Request Details**, **Do Not Validate**, **Validate**, and **Cancel**.

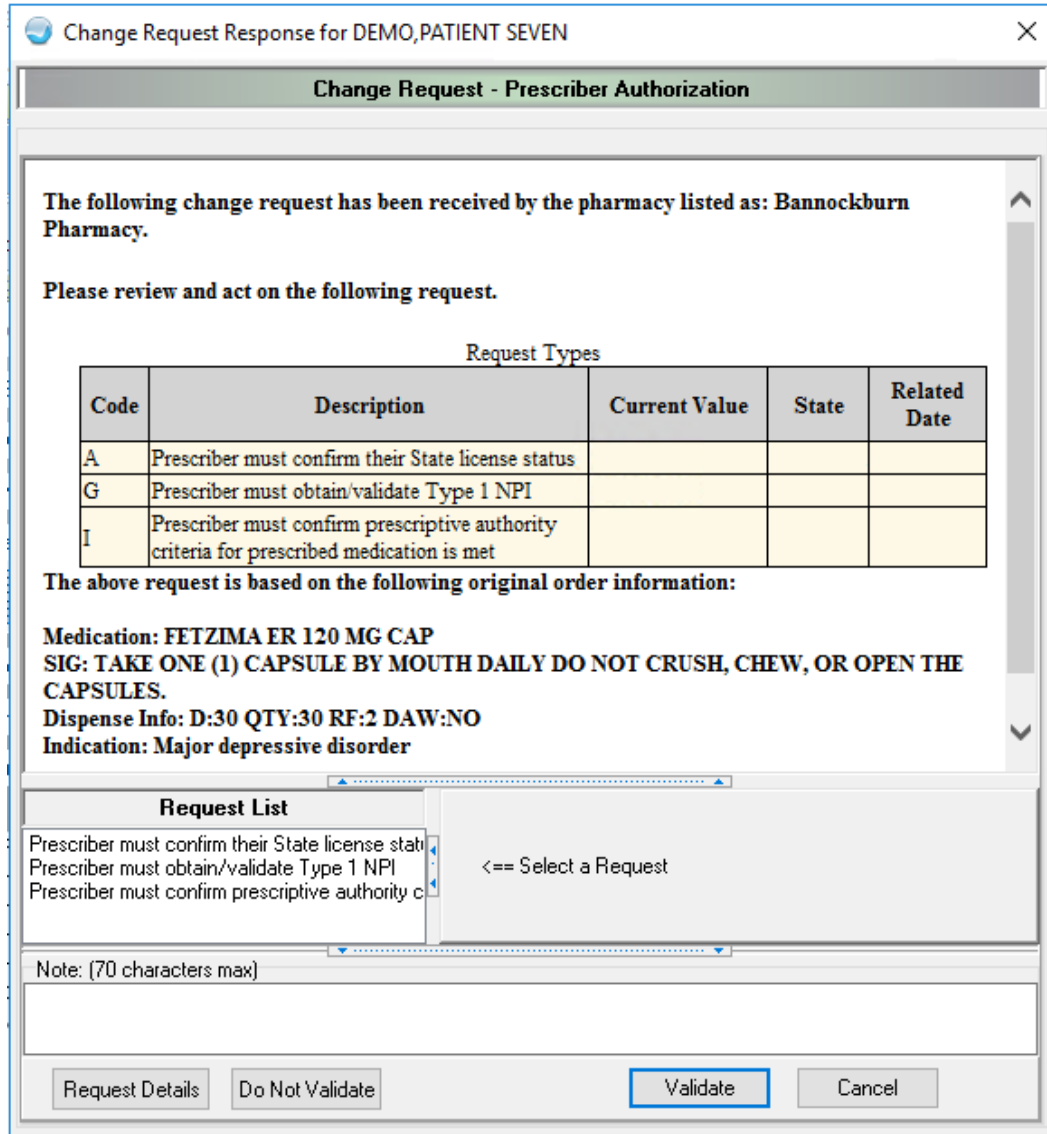


Figure 4-36: A Change Request Response dialog for a Prescriber Authorization type Change Request

Each item must be reviewed, though entering data is optional. If each item in the **Request List** is not clicked prior to clicking **Validate**, the **Unable to Save Change Request Information** warning displays. This warning lists the items not yet reviewed.

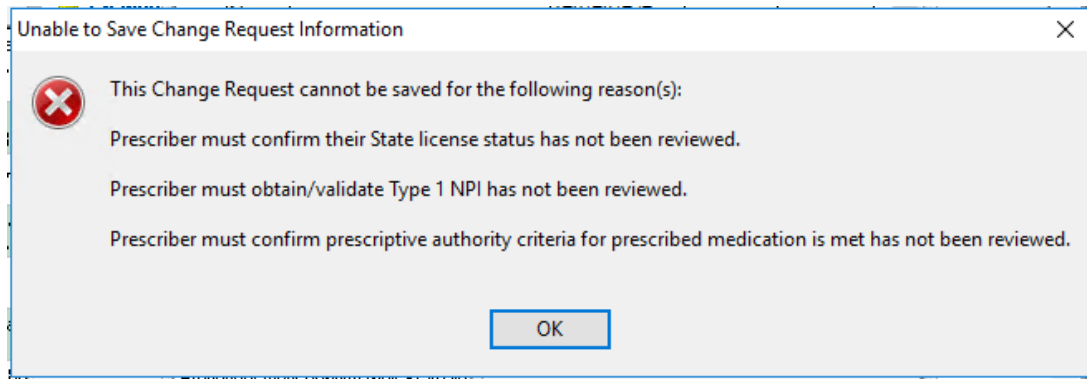


Figure 4-37: Unable to Save Change Request Information warning

Click **OK** to dismiss the warning and then click each item in the **Request List** in turn. Each item will have specific fields to enter the information requested. While the information is not required, it is possible the pharmacy will not fill the prescription if the information is not provided.

In the example request here, the first item on the list is the state license number. Clicking on this item reveals fields for State and State License number, as well as radio buttons for active or inactive with prescriptive authority statuses.

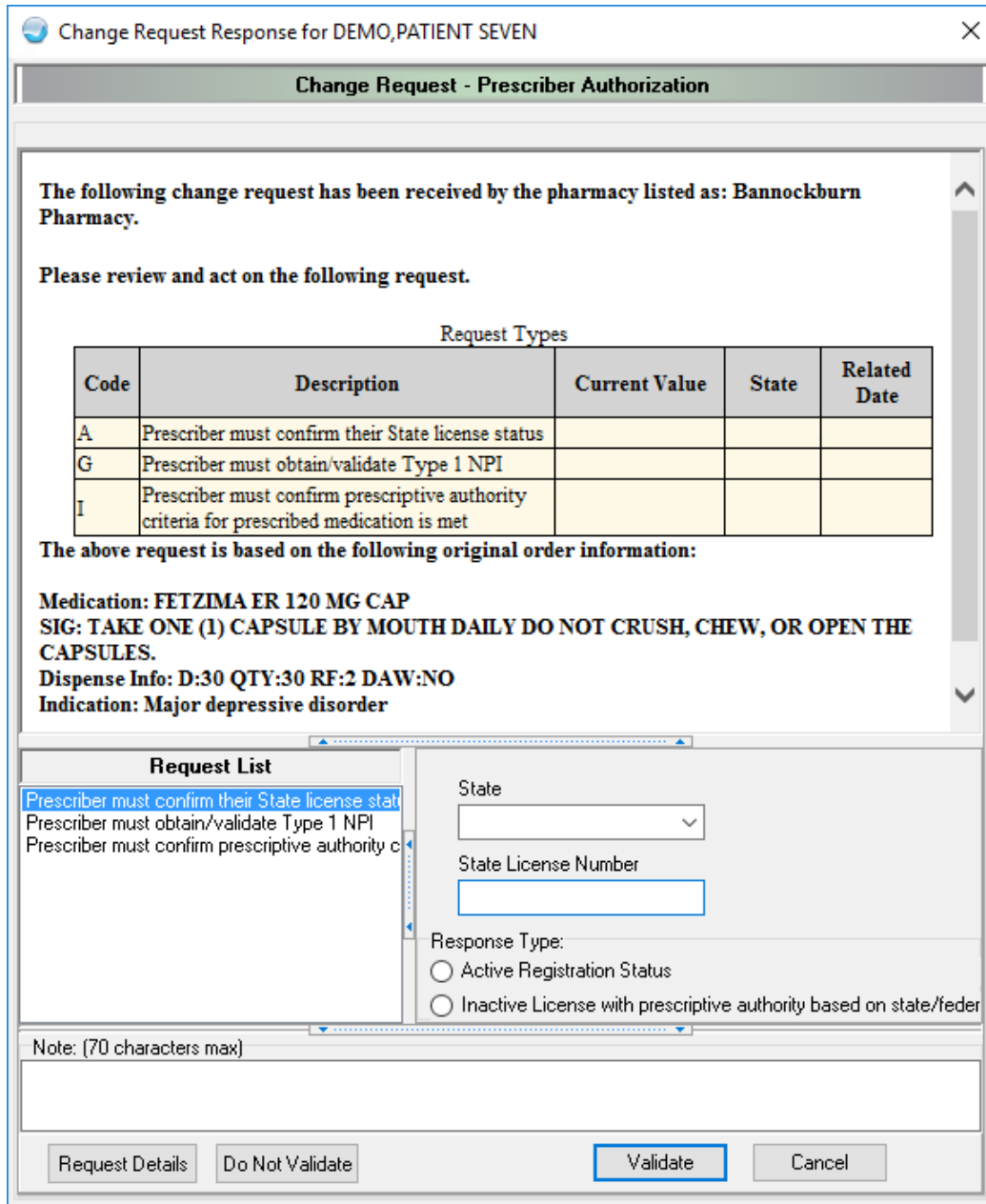


Figure 4-38: Change Request Response dialog for a Prescriber Authorization type Change Request with State license item selected

Fill in the information, if possible, then click on the next item in the list.

Note: It is very important to remember that entering information here will not update the local database. If the needed information is missing or inaccurate in the RPMS database, contact the appropriate persons at your local facility to get the data updated.

The screenshot shows a dialog box titled "Request List". On the left, a list of three items is displayed: "Prescriber must confirm their State license stat", "Prescriber must obtain/validate Type 1 NPI", and "Prescriber must confirm prescriptive authority c". The first item is selected and highlighted in blue. To the right of the list, the "State" dropdown menu is set to "INDIANA", and the "State License Number" text box contains "1234567". Below these fields, the "Response Type:" section has two radio buttons: "Active Registration Status" (which is selected) and "Inactive License with prescriptive authority based on state/feder". At the bottom of the dialog, there is a "Note: (70 characters max)" text area and four buttons: "Request Details", "Do Not Validate", "Validate", and "Cancel".

Figure 4-39: A portion of the Change Request Response dialog showing the state license information filled in

The second item in the example is requesting an NPI number. Enter the information, if possible, then click the next item in the list.

This screenshot shows the same "Request List" dialog box. The second item, "Prescriber must obtain/validate Type 1 NPI", is now selected and highlighted in blue. The "Active NPI" text box to the right of the list contains the number "1467487454". The other elements of the dialog, including the "State" dropdown, "Response Type" radio buttons, and bottom buttons, remain the same as in the previous screenshot.

Figure 4-40: A portion of the Change Request Response dialog showing the NPI information filled in

The final item in this example is requesting “prescriptive authority” for the item prescribed. This may seem confusing, but it is essentially asking the prescriber’s degree or specialty. The categories here correspond to the PERSON CLASS field in the RPMS database. The non-physician items are listed first, followed by the physician specialties. Scroll through the list and select the most appropriate item. Not every specialty and subspecialty is listed here, but the main specialties found in IHS are present.

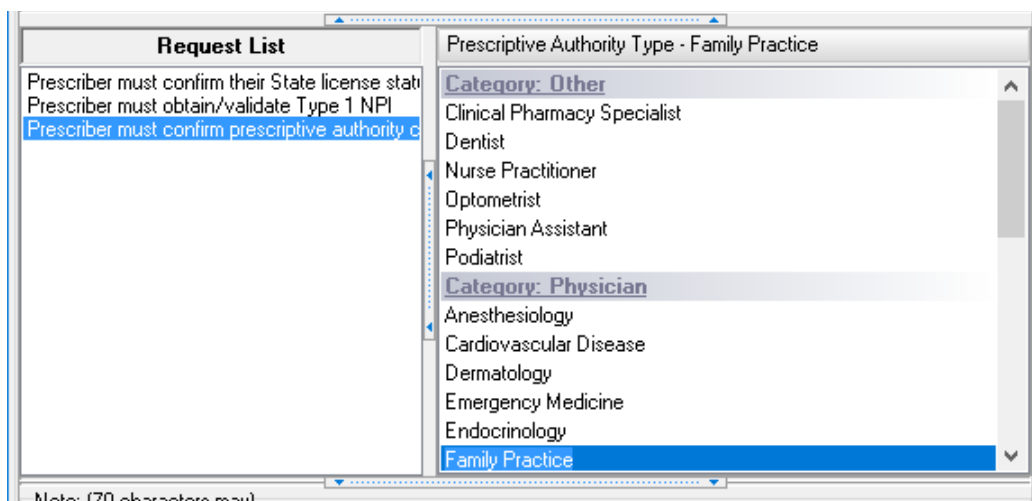


Figure 4-41: A portion of the Change Request Response dialog showing the Prescriptive Authority Type information filled in

A note may be added in the **Note** field if desired, but this is not required.

4.5.6 Confirmation

Once each item in the list has been clicked on and reviewed and the information has been added where possible or desired, click **Validate** to move to the **Confirmation** dialog.

Surescripts requires the prescriber to see and review all the information that will be sent to the pharmacy. For orders, this is accomplished with the summary pane, and the requirement that the prescriber scroll to the bottom or expand the dialog to show the entire summary prior to being able to accept the order. With these Change responses that do not create an order, the Confirmation dialog takes the place of the summary pane. The prescriber must scroll through the entire summary or expand the window to show the entire summary before the Confirm button becomes active. This Confirmation dialog is similar for both Prior Authorization and Prescriber Authorization responses.

The Confirmation dialog includes the following information: pharmacy name, patient information, prescriber information, original medication order information, and responses from the prescriber.

Prior Authorization Confirmation ✕

The following information will be sent in the RxChange request response to Bannockburn Pharmacy .

Click Confirm to complete the response.

Patient	DEMO,PATIENT SEVEN	Gender	Male
Date of birth	Aug 15, 1982	Age	38
Contact info	PO BOX 168 ALB, NM 87119	Phone	(555) 555- 9705
Prescriber	DEMO,PROVIDER		
Contact info	F987654321 Longest Address Street ALBUQUERQUE, NM 87110	Phone	(505) 248- 1111

FETZIMA 120 MG 24 HOUR EXTENDED RELEASE ORAL CAPSULE

Medication	FETZIMA 120 MG 24 HOUR EXTENDED RELEASE ORAL CAPSULE
Quantity	30
SIG	TAKE ONE (1) CAPSULE BY MOUTH DAILY DO NOT CRUSH, CHEW, OR OPEN THE CAPSULES.
Refills	2
Days Supply	30
Substitution	Yes
Note To Pharmacy	

You have supplied the following validation responses:

Prior Authorization ID:3613684354368

Figure 4-42: The Prior Authorization Confirmation dialog

Prescriber Authorization Confirmation
✕

The following information will be sent in the RxChange request response to Bannockburn Pharmacy .

Click Confirm to complete the response.

Patient	DEMO,PATIENT SEVEN	Gender	Male
Date of birth	Aug 15, 1982	Age	38
Contact info	PO BOX 168 ALB, NM 87119	Phone	(555) 555- 9705
Prescriber	DEMO,PROVIDER		
Contact info	F987654321 Longest Address Street ALBUQUERQUE, NM 87110	Phone	(505) 248- 1111

FETZIMA 120 MG 24 HOUR EXTENDED RELEASE ORAL CAPSULE

Medication	FETZIMA 120 MG 24 HOUR EXTENDED RELEASE ORAL CAPSULE
Quantity	30
SIG	TAKE ONE (1) CAPSULE BY MOUTH DAILY DO NOT CRUSH, CHEW, OR OPEN THE CAPSULES.
Refills	2
Days Supply	30
Substitution	Yes
Note To Pharmacy	

You have supplied the following validation responses:

Request Types

Description	Value	State	Related Date	Response Code
Prescriber must confirm their State license status	1234567	INDIANA		GM

Confirm Cancel

Figure 4-43: The Prescriber Authorization Confirmation dialog, scroll at top

Prescriber	DEMO, PROVIDER		
Contact info	F987654321 Longest Address Street ALBUQUERQUE, NM 87110	Phone	(505) 248-1111

FETZIMA 120 MG 24 HOUR EXTENDED RELEASE ORAL CAPSULE

Medication	FETZIMA 120 MG 24 HOUR EXTENDED RELEASE ORAL CAPSULE
Quantity	30
SIG	TAKE ONE (1) CAPSULE BY MOUTH DAILY DO NOT CRUSH, CHEW, OR OPEN THE CAPSULES.
Refills	2
Days Supply	30
Substitution	Yes
Note To Pharmacy	

You have supplied the following validation responses:

Request Types

Description	Value	State	Related Date	Response Code
Prescriber must confirm their State license status	1234567	INDIANA		GM
Prescriber must obtain/validate Type 1 NPI	1467487454			
Prescriber must confirm prescriptive authority criteria for prescribed medication is met	207Q00000X			

Figure 4-44: The Prescriber Authorization Confirmation dialog, scroll at bottom

When the **Confirm** button is active, click it to transmit the response. No signature is required as this response is not considered a fillable prescription.

Click **Cancel** to not transmit and to return to the **Change Request Response** dialog. The **Unable to Save Change Request Information** warning will display. Click **OK** to return to the **Change Request Response** dialog.

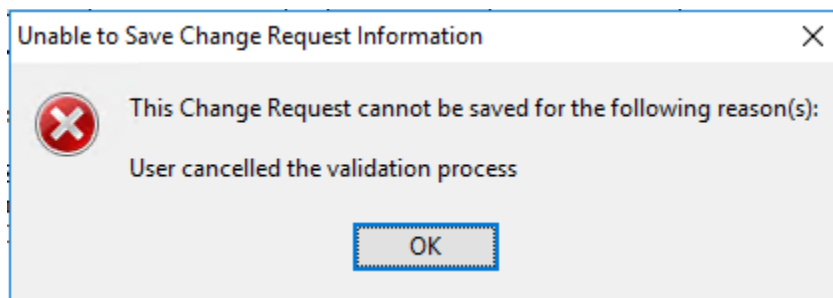


Figure 4-45: Unable to Save Change Request Information dialog

4.6 Duplicates

In some instances, duplicate Change Requests may be received. In these cases, only the most recent request will be presented to the prescriber. If there are duplicate requests, the **Related Requests** button will show on the **Change Request Action** dialog. Click on the button to see the details of the duplicate request or requests. A request is considered duplicate if it is for the same patient, prescriber, medication, and Change Request type. For U type requests, the subtype code or codes must also match to be considered duplicate.

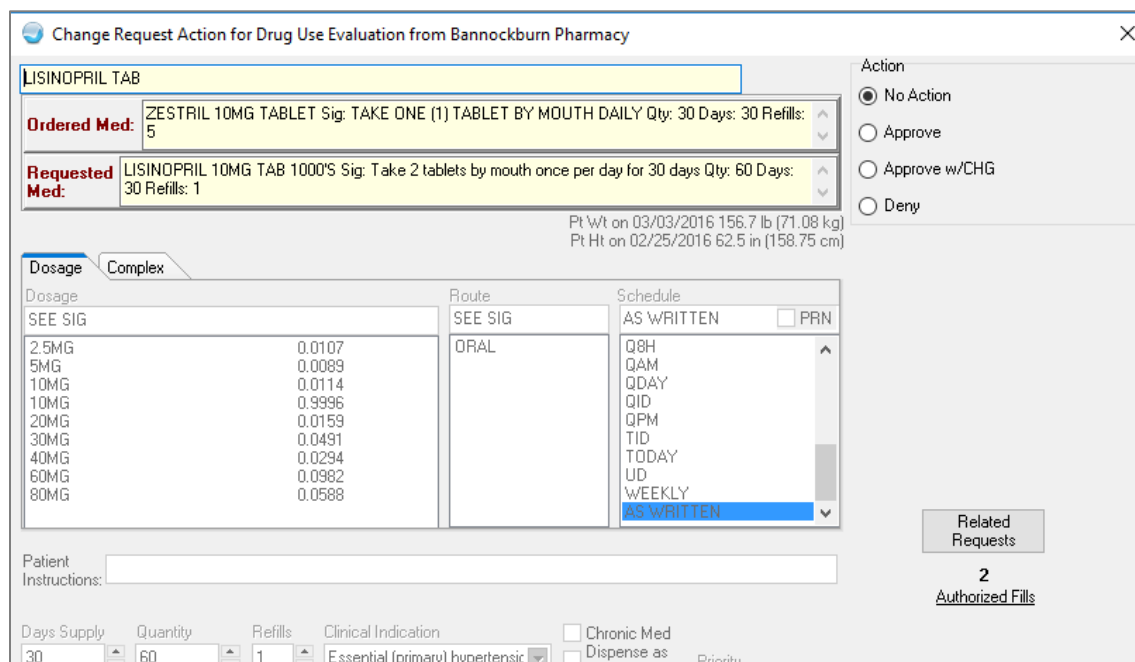


Figure 4-46: Portion of the Change Request Action dialog showing the Related Requests button

The related requests details will be similar to the request details seen in Section 4.2.1 above.

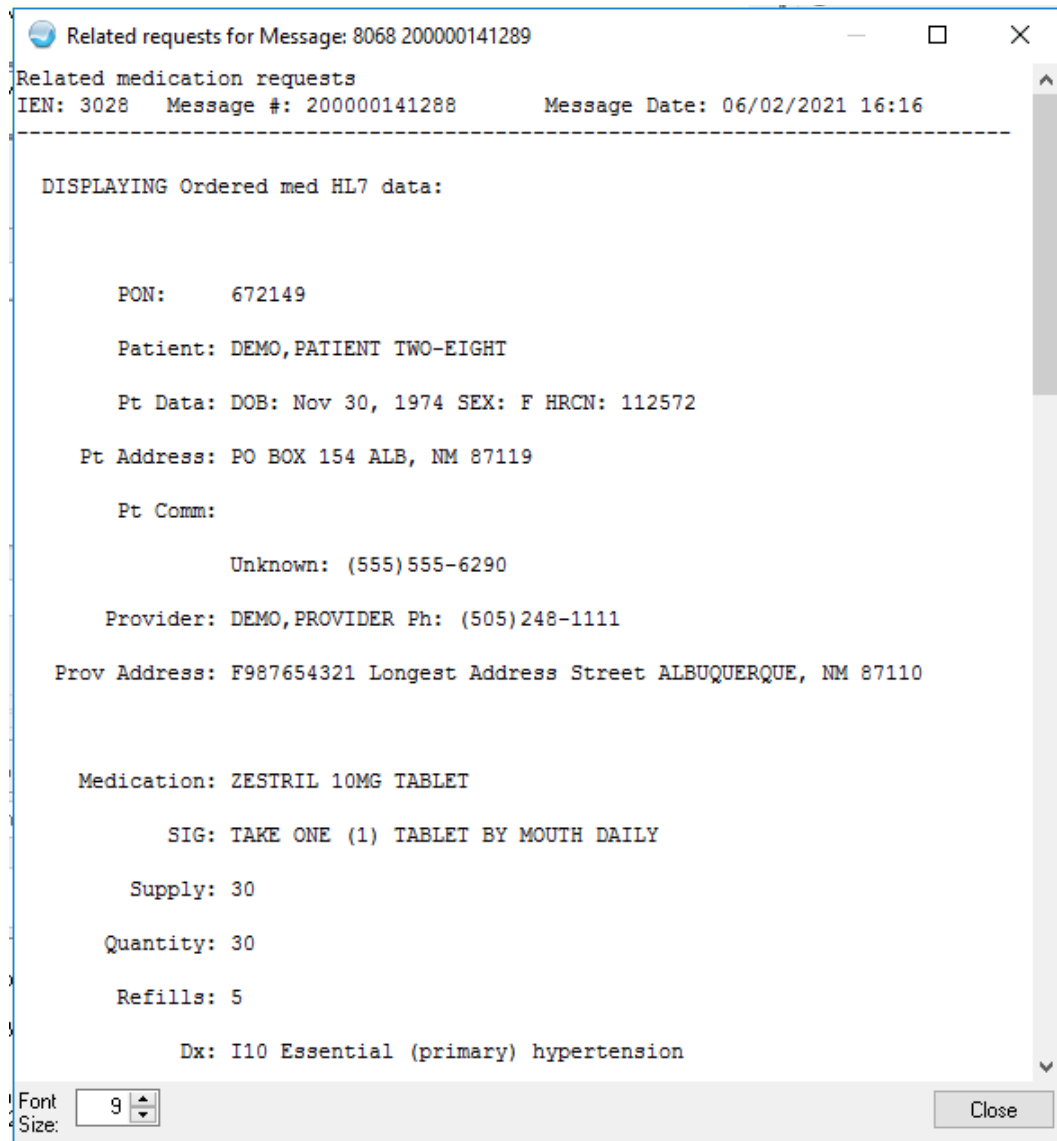


Figure 4-47: Related requests dialog

When the request is processed and a response is sent, the duplicates will be closed, so they will not clog up the SS Queue or the SS Mailbox.

4.7 Notification

In addition to the existing notifications related to Surescripts processing and requests, there is a new notification for Change Requests, the **ERROR: eRx change req did not transmit** notification.

This notification is sent when the response to the Change Request does not successfully transmit. There may be a variety of reasons for the failure, including communication failure between the local site and the central server, missing data in the local drug file, invalid data in the local drug file, or other issues with the message contents. The specific issue will be listed in the message when the prescriber processes the notification, as shown below:

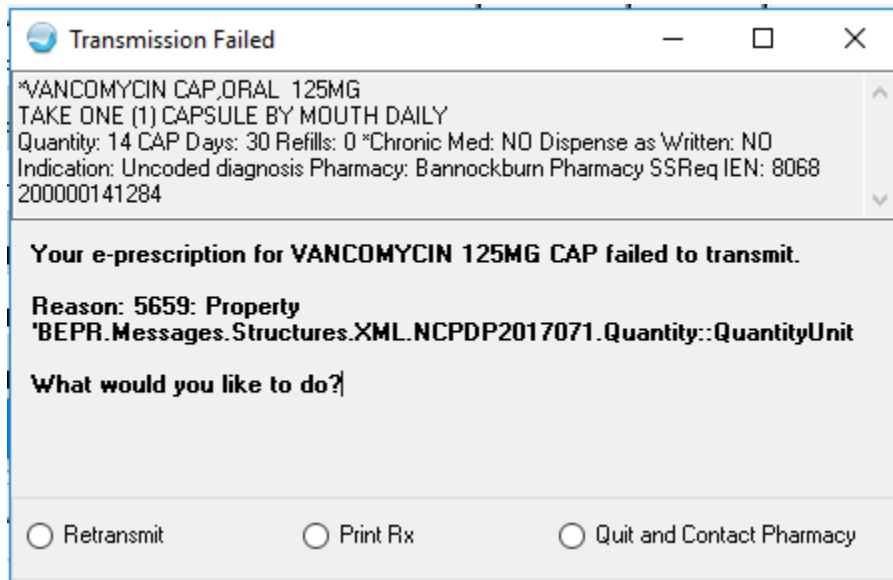


Figure 4-48: Transmission Failed notification processing for missing Dispense Unit NCPDP in local drug file

The prescriber may attempt to retransmit the order if the problem has been corrected, may print the order for physical signature, or may contact the pharmacy by other means.

If the user retransmits the message, the status bar will show the order has been retransmitted.

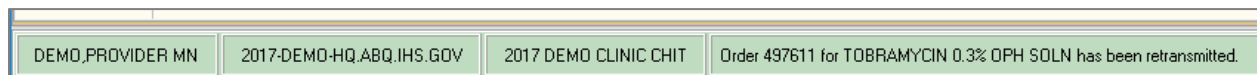


Figure 4-49: Status bar with retransmit message

4.8 Change Requests on Discontinued Items

It is possible for the pharmacy to send a Change Request on an order that has already been discontinued. This may occur when more than one Change Request is sent by the pharmacy for a single prescription and the prescriber has already processed one of them. It may also occur when an order is created and then discontinued within a short period of time, such as when a patient is seen by more than one prescriber and one orders a medication and the next discontinues the order, or a prescriber finds additional information necessitating a change of medication after the prescription was transmitted to the pharmacy. Because acting on a Change Request for a discontinued medication may or may not be valid, the prescriber is simply warned that the original order referred to in the Change Request has been discontinued. The prescriber must review the information available and determine how the Change Request should be answered, and if the pharmacy needs to be contacted with or for additional information.

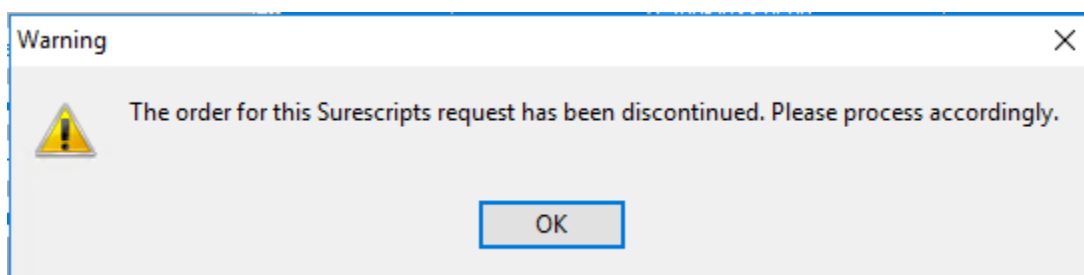


Figure 4-50: Warning dialog for discontinued medication

Click **OK** to dismiss the warning and continue processing the request.

4.9 Surrogates

As has been stated throughout this document, Surescripts guidelines indicate that requests should be responded to within 72 hours. This may not be possible if the original prescriber is not available. To help the site adhere to the guideline, when a surrogate is set for a prescriber, 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 screen will have a new icon in the upper right area to indicate the logged in user is a surrogate for someone else.

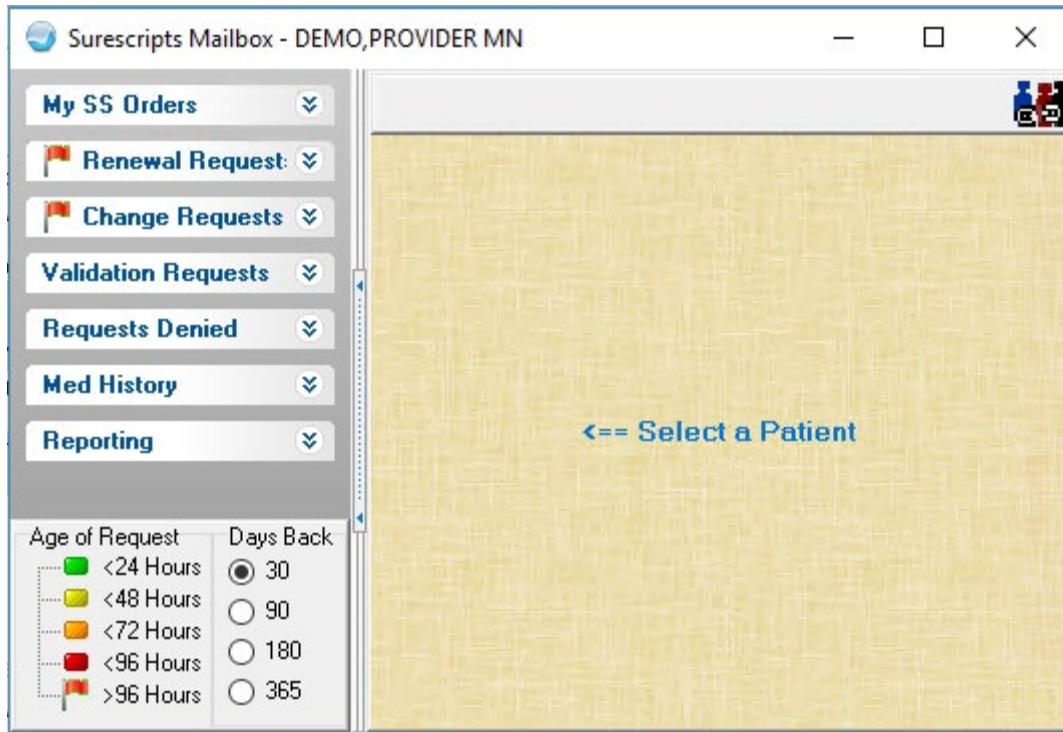


Figure 4-51: SS Mailbox with surrogate indication

Clicking on the icon will open an **Information** window with the name or names and dates for which the surrogate setting is active. If no end date is listed, the surrogate setting will remain until manually removed.

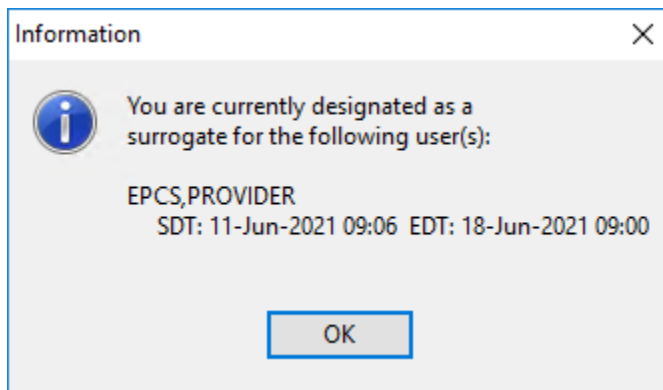


Figure 4-52: Information dialog with surrogate information

Additionally, the patient names that are associated with the other prescriber will be in italic font.

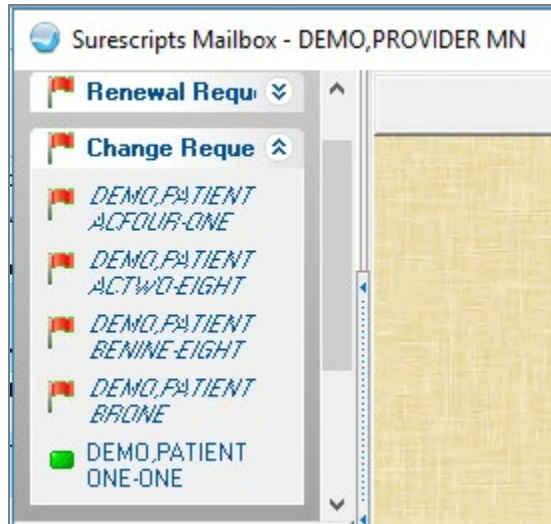


Figure 4-53: Portion of the SS Mailbox with patient names in italic style font

Processing these surrogate requests is the same as processing the non-surrogate requests.

4.10 Potential Processing Situations

Several situations may impact the prescriber's ability to process Change Requests. These include:

- Prescriber SPI removed or revoked.
- Prescriber SS service level removed or revoked.
- Prescriber EPCS credentials revoked/not enabled/not current.
- Prescriber DEA expired.

These are more likely to occur when a user is selected as a surrogate who does not have the same privileges as the original prescriber but can occur if the original prescriber's set up changes between the new prescription being transmitted and the Change Requests being processed.

When the first two occur, the system will warn the prescriber about the issue as soon as they select Process Request. The **Unable to continue** warning will be specific to the situation.

When a prescriber does not have an SPI, the warning states **User lacks SPI**.

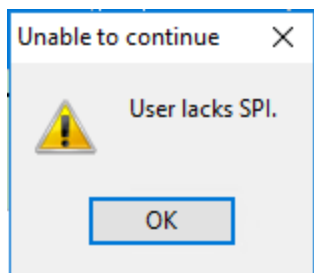


Figure 4-54: Unable to Continue dialog for SPI

When a prescriber is not authorized for the type of request, the warning states **User does not have the necessary service level for request.**

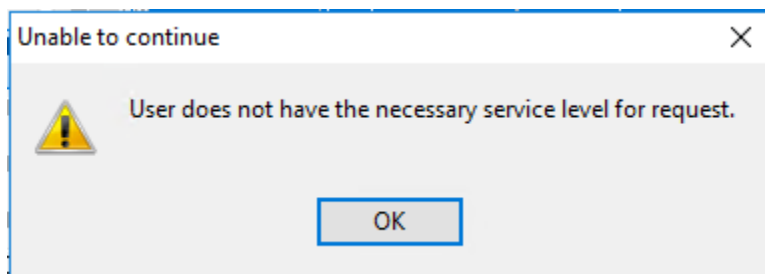


Figure 4-55: Unable to Continue dialog for service level

When a prescriber is not currently credentialed for EPCS, or when a prescriber has an expired DEA number, or otherwise is unable to sign EPCS orders, the warning is slightly different, appearing in the **Change Request Response** dialog. Any CS medications will be marked with a dollar sign (\$) and the text "\$ indicates a Controlled Substance (CS) med when the prescriber is not currently EPCS enabled. CS meds are not available for selection for non-EPCS prescribers. Until EPCS enabled, the prescriber may only choose a non-CS med (if available) or deny the request and create a new print order for the CS medication." Any CS medications will not appear in the Medication drop-down in the lower pane. If all the medications requested by the pharmacy are CS medications, no medications will be available to select, and the prescriber must deny the request. Denying the Change Request does not prevent the pharmacy from filling the original prescription, so prescribers should contact the pharmacy by other means if the original prescription should be changed and the prescriber is not EPCS enabled.

Change Request Response for DEMO,PATIENT ONE-ONE
✕

Change Request - Drug Use Evaluation

The following change request has been received by the pharmacy listed as: **Shollenberger Pharmacy.**

Please review and clarify where required and then act on the request.

Medication	Quantity	Days Supply	Refills	SIG	NDC	RxNorm	Notes
LORAZEPAM IMG TAB	30	10	1	TAKE ONE (1) TABLET BY MOUTH THREE TIMES A DAY IF NEEDED FOR ANXIETY	00378245701	197901	Patient was taking this TID when on long airplane flights and states occasionally still needs that much

The above request is based on the following original order information:

Medication: LORAZEPAM IMG TAB
SIG: TAKE ONE (1) TABLET BY MOUTH TWICE A DAY IF NEEDED FOR ANXIETY
Dispense Info: D:10 QTY:20 RF:1 DAW:NO
Indication: Chart evaluation by healthcare professional

\$ indicates a Controlled Substance (CS) med when the prescriber is not currently EPCS enabled. CS meds are not available for selection for non-EPCS prescribers. Until EPCS enabled, the prescriber may only choose a non-CS med (if available) or deny the request and create a new print order for the CS medication.

The following information will be returned to the pharmacy:

Medication

Qty

Days Supply

Request Details
Deny
OK
Cancel

Figure 4-56: Change Request Response with CS medication and non-EPCS prescriber

5.0 Other Pharmacy Changes

5.1 ADO Feature 76280 – Modify Renew/Copy to New/Change Dialogs

Because of errors that were occurring when a prescriber attempted to renew, copy to new, or change a medication order that was the result of a Surescripts request, some changes were made to the Renew, Change, and Copy to New processes. These changes only affect medication orders that were from a Surescripts request. You can determine if an order was from a SS request by checking for an SSReq IEN number in the order details or in the Orders component for the specific order.

In the order details, the SSReq IEN number is toward the top of the details window, after the pharmacy name and before the activity section. If the pharmacy name is long, the SSReq IEN may be shifted and wrap to the next line.

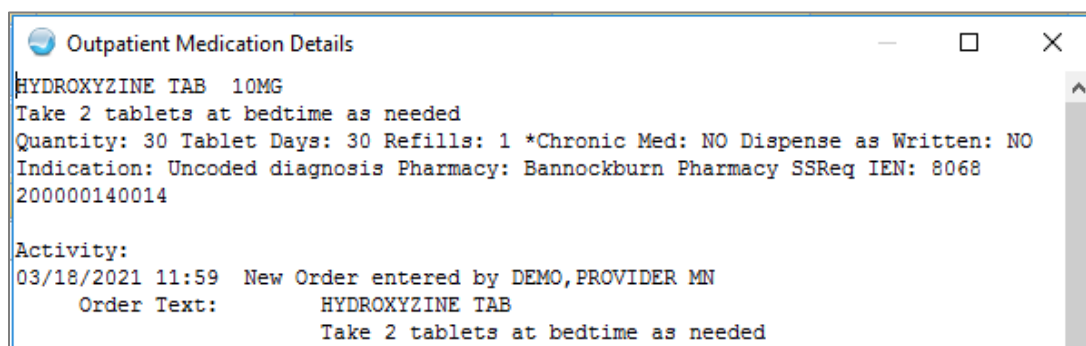


Figure 5-1: Outpatient Medication Details window with SSReq IEN present

In the Orders component, the SSReq IEN displays in the line item. It is the final piece of information for the item.

Active Orders (includes Pending & Recent Activity) - ALL SERVICES			
	Service	Order	Dura
	Outpt. Meds	*HYDROXYZINE TAB 10MG Take 2 tablets at bedtime as needed Quantity: 30 Tablet Days: 30 Refills: 1 *Chronic Med: NO Dispense as Written: NO Indication: Uncoded diagnosis Pharmacy: Bannockburn Pharmacy SSReq IEN: 8068 200000140014	Start: 03 Stop: 03
		*HYDROXYZINE TAB 25MG	Start: 03

Figure 5-2: Orders component entry with SSReq IEN present

5.1.1 Renew

When a prescriber attempts to renew an order that was created by a SS request, the **Unable to Renew** dialog will display.

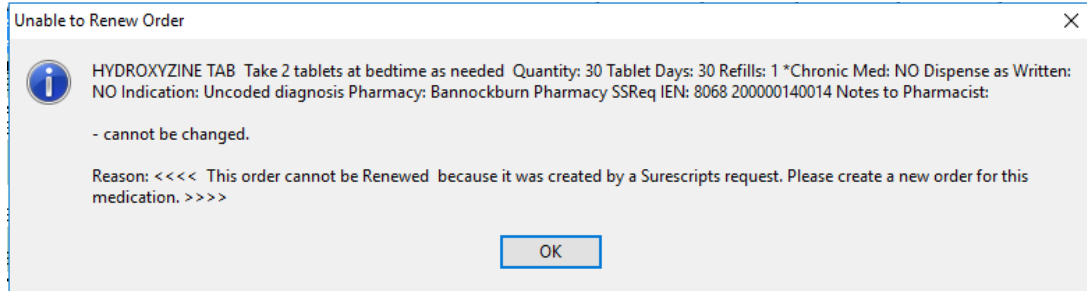


Figure 5-3: Unable to Renew Order dialog

5.1.2 Change

When a prescriber attempts to change an order that was created by a SS request, the **Unable to Change** dialog will display.

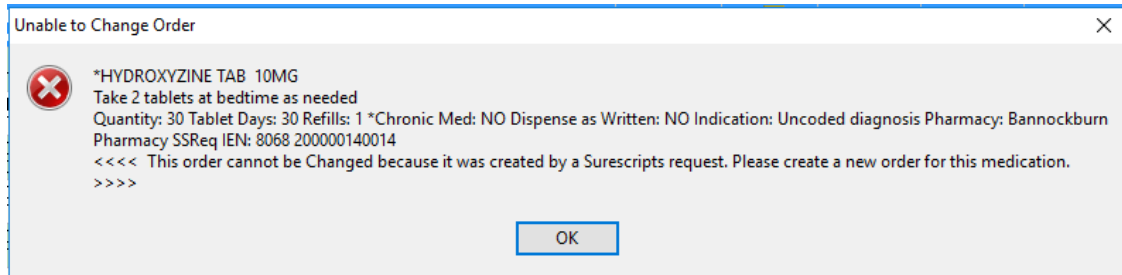


Figure 5-4: Unable to Change Order dialog

5.1.3 Copy to New

When a prescriber attempts to use Copy to New on an order that was created by an SS request, the **Copy Medication Order** dialog opens as normal.

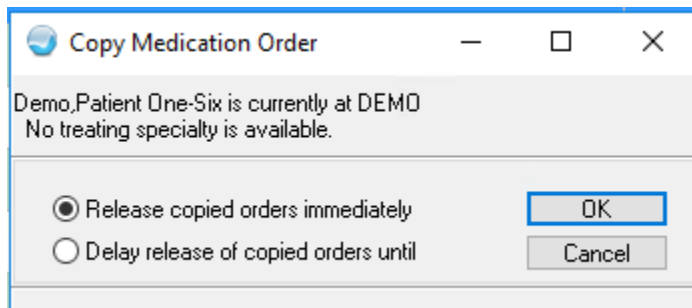


Figure 5-5: Copy Medication Order dialog

Clicking **OK** on this dialog opens the **New Order** dialog.

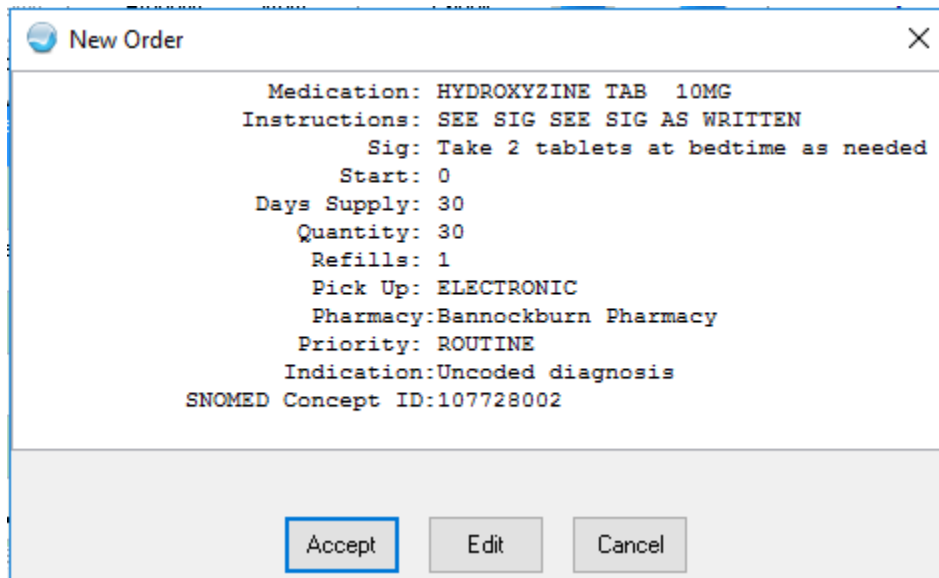


Figure 5-6: New Order dialog

Clicking either **Accept** or **Edit** on this dialog opens the **frmODMedsSSCopy** dialog. This dialog is similar to the normal order dialog but contains an Original Order text field. The Dosage, Route, and Schedule fields are blanked out and the Patient Instructions are reset to the default.

HYDROXYZINE TAB Change

Original order text: HYDROXYZINE TAB 10MG Take 2 tablets at bedtime as needed Quantity: 30 Tablet Days: 30 Refills: 1 *Chronic Med: NO Dispense as Written: NO Indication: Uncoded diagnosis Pharmacy: Bannockburn Pharmacy SSRReq IEN: 8068 200000140014

Pt Wt on 06/21/2018 175.4 lb (79.56 kg)
Pt Ht on 01/10/2019 67.3 in (170.94 cm)

Dosage Complex

Dosage	Route	Schedule
10MG	ORAL	QPM
20MG		TID
25MG		TODAY
50MG		UD
		WEEKLY
		AS WRITTEN

Patient Instructions:

Days Supply: 30 Quantity: 30 Refills: 1 Clinical Indication: Uncoded diagnosis Z02.9 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:

HYDROXYZINE TAB
TAKE
Quantity: 30 Days: 30 Refills: 1 *Chronic Med: NO Dispense as Written: NO Indication: Uncoded diagnosis Pharmacy: Bannockburn Pharmacy 6798 Pyle Rd Bethesda MD 20817
Date Written: 18-Mar-2021

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

PATIENT:
Demo, Patient One-Six 23-Mar-1975 M
1507 BURTON STEPP LOOP, ALB, NEW MEXICO 87119
H: 5555558006

ADR's
Accept Order
Cancel

Figure 5-7: The frmODMedsSSCopy dialog

Complete the Dosage, Route, and Schedule fields, adjust the other fields if needed, and review the clinical indication field. If the clinical indication reads **uncoded diagnosis**, reselect the clinical indication. Once the order is complete, scroll through the summary and then click **Accept Order**. Sign the order as usual to transmit to the Surescripts pharmacy.

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 website: <http://security.ihs.gov/>.

<p>Note: 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

Approve

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

Approve w/CHG

The abbreviated form of Approve with Change.

Approve with Change

In the context of a Surescripts Change Request, a response to the pharmacy with changes to the original request.

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.

Do Not Validate

In the context of a Surescripts Change Request, a response to the pharmacy declining to provide the prescriber information requested.

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.

Pending Review

In the context of a Surescripts Change Request, a request that is awaiting processing by the prescriber.

Provider Order Number

A number in a Surescripts request used by the receiving system to identify the original order to which the request relates.

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.

Service Level

In the context of Surescripts ePrescribing, the ability of a given prescriber, pharmacy, or system to perform a given transaction type.

Sig

Short for *Signetur*, Latin for "let it be written". The directions for use of a medication on the label of a prescription medication.

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 Provider Identifier

The number assigned to the prescriber by Surescripts to assist in routing transactions.

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.

Unmapped

In the context of a Surescripts Change Request, a request that was unable to be properly matched to an existing order in the RPMS EHR system.

Unsigned

In the context of a Surescripts Change Request, a request that was processed by the prescriber but not signed and transmitted.

Validate

In the context of a Surescripts Change Request, a response to the pharmacy with the prescriber information that was requested.

Acronym List

Acronym	Meaning
CISO	Chief Information Security Officer
CS	Controlled Substance
DEA	Drug Enforcement Administration
EHR	Electronic Health Record
EPCS	Electronic Prescribing of Controlled Substances
eRx	Electronic Prescribing
HHS	U.S. Department of Health and Human Services
HIPAA	Health Information Portability and Accountability Act
ID	Identification
IEN	Internal Entry Number
IHS	Indian Health Service
ISSO	Information System Security Officer
IT	Information Technology
ONC	Office of the National Coordinator
PA	Prior Authorization
PC	Personal Computer
PIV	Personal Identity Verification
PON	Provider Order Number
RoB	Rules of Behavior
RPMS	Resource and Patient Management System
SAC	Standards and Conventions
SPI	Surescripts Prescriber Identifier
SS	Surescripts
SSReq	Surescripts Request
VPN	Virtual Private Network

Contact Information

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

Phone: (888) 830-7280 (toll free)

Web: <https://www.ihs.gov/itsupport/>

Email: itsupport@ihs.gov