

Doctors' use of e-prescriptions soars

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Fifteen-month-old Mendel Grossbaum squirmed in his mother's arms as Dr. Darren Saks examined his ears and throat, then concluded the checkup with a prescription for vitamins - without ever touching paper.

Saks is among the 20 percent of New Jersey physicians who use electronic prescribing systems to send prescriptions straight to a patient's pharmacy. It is a timesaver for doctors and patients, and research shows it reduces [medication errors](#).

From a small laptop in an examining room in Paramus, Saks sent the prescription for the toddler to the Grossbaums' pharmacy. It saved Zeesy Grossbaum, the mother of Mendel and five other children, a wait at the [drugstore](#) on a beautiful summer day.

"It's such a pleasure," Grossbaum said. "When I go to other doctors who don't have this it's like, why aren't you doing this?"

Nationally, the number of electronic prescriptions has grown dramatically to 326 million in 2009, up from 190 million in 2007 - a surge that is expected to continue as federal [health care reform](#) creates more incentives for physicians to convert to electronic medical records and prescribing.

In New Jersey, 10 percent of prescriptions were filed electronically in 2009, up from 3 percent in 2007, according to Surescripts, whose online network handles the bulk of the electronic prescriptions. By 2014 it's estimated that half of doctors will write prescriptions electronically.

"Electronic prescribing is now well on its way to becoming mainstream practice," said Harry Totonis, president and CEO of Surescripts.

As the practice grows, New Jersey lawmakers have proposed legislation to ensure standards in e-prescribing and to require prior authorization for drugs to cut down on approval delays from [insurance companies](#).

The Medical Society of New Jersey is also urging more physicians to prescribe electronically.

"We want to see electronic prescribing fostered in the state and (the legislation) looks like a way to help that," said Dr. Mary Campagnolo, president-elect of the Medical Society of New Jersey.

The biggest drawbacks to e-prescriptions are the cost - practices have to spend about \$20,000 to \$30,000 per physician, and that doesn't include training or upkeep - and the complexity of converting to an [electronic medical records](#) system.

Physicians report several benefits to e-prescribing. They can check for harmful drug interactions when writing a prescription. Those come up as a red flag in the patient's medical history.

The Institute of Medicine estimates that 7,000 deaths occur each year nationally due to medication errors, and many of these are caused by illegible handwriting and human error.

Doctors can confirm prescription benefits with the system. They also know they won't hear from the pharmacy questioning illegible writing.

Dr. Anthony J. Barravecchio, a Wayne, N.J., physician who specializes in family and geriatric care, estimates the system saves him 30 minutes or more a day. Just last week, he treated a couple in their 80s, each of

whom needed refills on several medications they take daily.

"I hit a button and it's done," he said.

Barravecchio said he also enjoys the color-coded tiered system that lets a physician know the cheapest of the effective medications selected - red means a non-preferred tier, which can be pricey, he said.

"If I see two scripts with the same benefits and one is red and one is green, I'll go with the green," he said. Barravecchio also fills mail-order prescriptions for patients with the e-prescribing system.

The prescriptions are transmitted through a secure Internet network to the pharmacy of the patient's choice through computers or a hand-held device. In many cases, physicians are also using electronic health records, which contain complete medical histories, lab reports and other documents vital to a patient's history.

On Saks' screen, it noted that Mendel Grossbaum had been treated for anemia and that he needed another vaccination. A click of a tab revealed the toddler's weight and height on a corresponding growth chart, which Saks shared with Zeesy Grossbaum.

If there's anything Saks has an objection to, it's holding a computer while he talks to parents. "It feels a little impersonal," he said.

But the tradeoff is the time advantage and having so much vital information at his fingertips. Multiply those advantages throughout the Tenafly Pediatrics practice - with 20 pediatricians in six offices writing a combined 2,000 prescriptions a week - and the savings in efficiency are even more remarkable, Saks said.

Additionally, Saks said the e-prescribing has helped alert him to errors

he might have made in detecting allergies to certain medications.

"The system has caught me a few times," he said.

A study published last year in the *Journal of General Internal Medicine* revealed a nearly 85 percent decrease in medication errors when physicians switched from paper to e-prescribing. Researchers at Weill Cornell Medical College in New York found that physicians who switched to e-prescribing reduced prescription errors from 42.5 percent at the start of the study to 6.6 percent after a year.

Researchers looked at the number and severity of prescribing errors in more than 7,500 prescriptions, such as ordering medication but omitting the quantity, prescribing a drug to a patient with a known allergy, paperwork issues and injuries obtained from the medication.

In many states, e-prescribing is far more common - in Massachusetts, one out of every three prescribers files medication orders electronically.

New Jersey ranks 32nd out of all states based on 2009 data, according to Surescripts.

The cost can be prohibitive for some practices. It can be more than \$30,000 per physician in some specialties.

Many physicians also question if they will realize a return on their investment, Campagnolo said.

"Family physicians will embrace this more heavily than others because of the volume of prescriptions they write every day," she said.

The systems aren't perfect - there are still some delays in processing orders, and patient plans that require a mail-order system for

prescriptions sometimes require a fax as well as an e-prescription, Campagnolo said.

And the bill proposed by New Jersey lawmakers would address a problem e-prescribing so far hasn't been able to improve - prior authorizations of certain medications, which can't be filled until insurers approve their use. A national survey found that 10 percent of physicians report waiting more than a week for approval for some drugs for patients, Campagnolo said.

The government has offered incentives for practices that treat Medicare patients and those with a substantial Medicaid population.

The Centers for Medicare and Medicaid Services began in 2009 paying doctors a bonus for e-prescribing.

Starting next year, the CMS will penalize doctors who haven't adopted electronic systems for issuing prescriptions.

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