Electronic Prescription Records System Workgroup

December 6, 2018

Meeting Summary

Key discussion items include:

- The workgroup continued discussions about key themes and conceptual ideas taking into consideration benefits, barriers/challenges, and potential solutions identified in the information gathering grids (Version 5). It was suggested that key themes be organized by categories (e.g., infrastructure, legislative, funding, etc.). Deliberations of key themes are intended to help frame informal draft recommendations, including supporting rationale for a statewide repository of non-controlled dangerous substances (non-CDS).

- Key themes identified in grid 1A (*expanding use of existing CRISP infrastructure to make available non-CDS data*) highlighted the need for a mandate and policies for non-CDS, a sustainable funding model, and a time limited implementation plan. Preference for having prescription data presented in a user friendly format was noted as well as the importance of differentiating the CDS platform CRISP uses for the Prescription Drug Monitoring Program. Discussions about technology to support non-CDS continues to explore a vendor neutral model.

- Discussion of grid 2A (*enhancing CRISP to support new and existing State mandates*) recognized the potential of existing and newly proposed State and federal mandates that may have an impact on non-CDS. Participants also noted the importance of ensuring good security posture by any vendor that collects and exposes non-CDS data. Funding options, including federal funding opportunities and potential savings from reduced hospital admissions and readmissions under Total Cost of Care were considered.

- Grid 3A (*investing new resources for reporting non-CDS data*) reiterated pharmacy preference to not develop separate processes for non-CDS (i.e., enable one batch reporting and the option to parse out CDS and non-CDS data to end-users). Reporting amnesty for certain dispensers with limited resources, including publicly funded settings like prisons was noted. Medical cannabis will remain a parking lot item due to its different operating system and unknown personal use of cannabis; it was recommended that absent any privacy issues, making patient registration with the Maryland Medical Cannabis Commission available to prescribers and dispensers should be considered.

- Key themes for grid 4A (*existing system requirements – access, use, and disclosure*) noted the importance of the pharmacist and physician partnership and a request that dispensers sharing data have access to certain patient information through CRISP. Access by payers for purposes of care coordination (not monitoring) was also recognized. Need for oversight and management for certain technical aspects of a non-CDS repository, including one or more vendors to collect and/or expose data was mentioned.

- *Upcoming Meeting: The workgroup will convene again at MHCC offices on Tuesday, January 8, 2019 from 1:00pm to 3:00pm EST. Please note the inclement weather policy posted on the workgroup [web page](#).*