

**Spotlight on: Minnesota's Electronic Prescribing
Success through Policy Levers and Financial Incentives**

❖ **The Challenge**

Minnesota wanted to create a statewide environment that promotes adoption of health information technology across the care delivery system, and noted that independent community pharmacies in rural and underserved areas are not adopting e-prescribing at the same rate as their urban and chain pharmacy counterparts. Minnesota recently set its sight on closing this pharmacy adoption gap.

❖ **The Approach**

Minnesota carried forward a state-wide **legislative mandate** for e-prescribing coupled with **financial assistance** to help pharmacies in rural and underserved communities adopt and actively e-prescribe.

❖ **Minnesota's Key Takeaways**

- State policies can create conditions that encourage e-prescribing.
- It is important use high quality data to target outreach efforts, track progress, and create transparency for stakeholders across the state.
- Being cognizant of a pharmacy's unique needs helps with outreach and communication efforts.

Minnesota witnessed nearly a 19% increase in pharmacies actively e-prescribing on the Surescripts network between June 2010 and February 2012. We've chosen to highlight them in this implementation brief not only to tout this significant improvement, but also because the state and public-private entity—the Minnesota e-Health Initiative—have implemented a complement of promising e-prescribing approaches, some extending before the State Health Information Exchange (HIE) Cooperative Agreement Program.

Creating an Environment that Promotes E-prescribing

Following their 2007 passage of the 2015 Interoperable Electronic Health Record Mandate, Minnesota's state legislature passed the e-Prescribing Mandate in 2008, which states that effective January 1, 2011, "all providers, group purchasers, prescribers, and dispensers must establish and maintain an electronic prescription drug program that complies with the applicable standards in this section for transmitting, directly or through an intermediary, prescriptions and prescription-related information using electronic media." This legislation—declaring the state's support for the adoption of electronic prescribing—helped shape an environment conducive to further improvements.

Using Data and Outreach to Identify E-prescribing Gaps

Minnesota e-Health Initiative (Minnesota e-Health), supported by the Minnesota Department of Health's Office of Health Information Technology, uniformly collects data on pharmacies enabled for e-prescribing and e-prescription rates to track progress, determine gaps in e-prescribing capability, identify priority pharmacies, and share updates with communities to develop strategies and guide decisions and policies. Minnesota e-Health used their own data as well as Surescripts data to determine priority pharmacies for their 2011 grant program (described below) and performed geospatial analysis to identify leverage points and conduct outreach. Minnesota continues to use data to determine eligibility for their ongoing grant programs, track progress, and communicate with statewide stakeholders. The e-Health Initiative encourages progress and transparency by posting monthly

updates on progress and goals for all interested stakeholders. Depending on the gaps and priority areas identified through future data, Minnesota may also consider broadening eligibility for future grant programs.

Trying Their Hand at Grants for Pharmacies

In late 2011, Minnesota e-Health launched the Minnesota e-Health Connectivity Grant Program for Health Information Exchange, a grant program focused on health care providers, hospitals, and pharmacies in rural and underserved areas in the state to build health information exchange capacity, including e-prescribing.

The grant program officially began in October 2011, with applications due on January 31, 2012.

- **Eligibility requirements.** To be considered eligible for a grant, pharmacies have to serve ambulatory patients in cities with populations of less than 10,000. Along with an application, pharmacies are required to submit supporting documentation for projected expenditures, and must do so monthly for reimbursement requests upon purchase.
- **Funding allowances.** Pharmacies are eligible for reimbursement amounts up to \$10K per pharmacy. There is also a matching requirement of one dollar from the pharmacy for every \$10 in grant funds awarded. Funds can be used for purchasing hardware or software (up to \$5K) required for pharmacy system upgrades or to cover transaction costs for up to one year.
- **Communications and Outreach.** Minnesota e-Health initially sent invitation letters to 45 target pharmacies and conducted follow-up by email and phone. Their outreach strategy included working with partners, such as hospital associations, medical management entities, and pharmacist associations to advertise on their websites. Additionally, Minnesota e-Health used their Practical Guide to e-Prescribing issued in June 2009 as supplementary educational material.

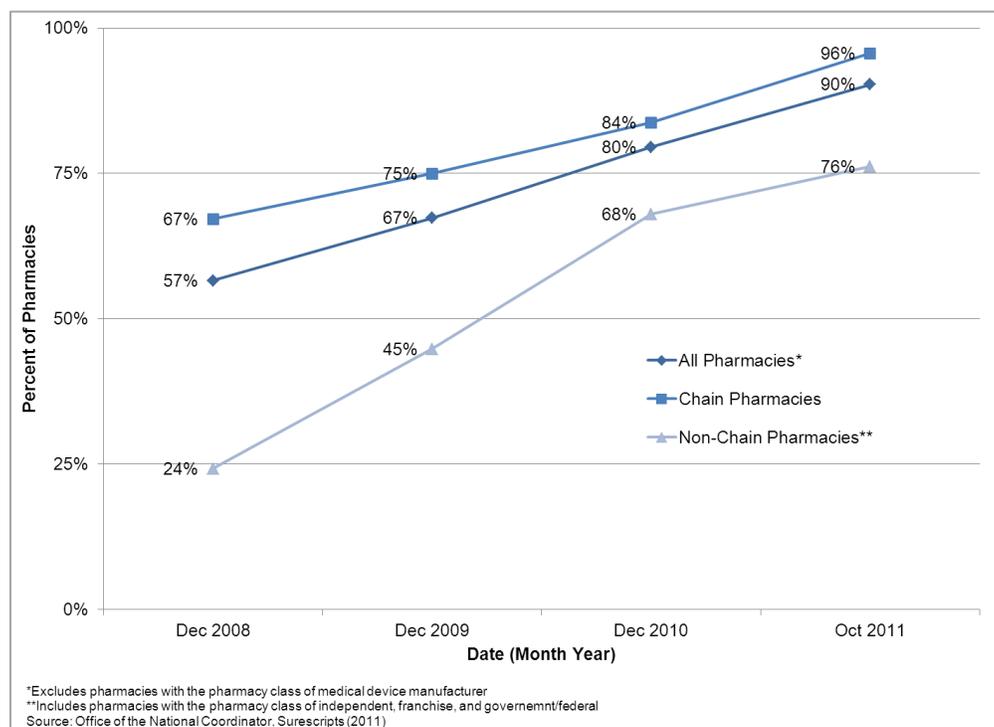
At the completion of awarding the first round of grants, Minnesota e-Health awarded six grants to rural pharmacies amounting to approximately \$50,000. The state anticipates awarding additional grants in both 2012 and 2013.

Getting to Results

Figure 1 below shows Minnesota's e-prescribing progress as of October 2011, for both chain and non-chain pharmacies.¹ The state has observed a significant increase in pharmacy e-prescribing adoption since 2008 according to Minnesota's locally gathered data (up 29 percentage points overall). Although the gap between chain pharmacies and independent community and rural-based pharmacies has been reduced since 2008, Minnesota hopes to further reduce it with the ongoing e-Health Initiative efforts.

¹ Non-chain pharmacies include independent, community and rural-based pharmacies.

Figure 1. Percent change in MN pharmacies e-prescribing (Dec. 2008 – Oct. 2011)



References and Links

To learn more, please contact Jennifer Fritz at Jennifer.fritz@state.mn.us.

And for more information please visit:

- [Minnesota e-Health website](#)
- [2015 Interoperable EHR Mandate](#)
- [2011 e-Prescribing Mandate](#)
- [2011 Minnesota e-Health Connectivity for Health Information Exchange Grant Program](#)
- [Minnesota e-Health Assessment Reports, Factsheets and Briefs](#)
- [A Practical Guide to e-Prescribing](#)