

**Spotlight on: North Dakota's Electronic Prescribing
Success through State Support and Stakeholder Outreach**

❖ **The Challenge**

North Dakota has had relatively high pharmacy readiness for e-prescribing for a number of years. Through a survey of pharmacy stakeholders, they found that many were not actively e-prescribing or were waiting to adopt due to low prescriber adoption and use.

❖ **The Approach**

Creating an **environment conducive to adopting health IT** and **eliminating financial barriers** for their prescriber population has helped North Dakota make measurable strides in increasing the number of pharmacies that are actively e-prescribing.

❖ **North Dakota's Key Takeaways**

- State support and funding for the adoption of health information technology is essential for creating active health information exchange.
- Electronic prescribing is a two-way street: pharmacies cannot receive electronic scripts if prescribers are unable to send them. Likewise, prescribers and patients cannot reap the full benefits of e-prescribing if pharmacies do not have the software in place to receive and process e-prescriptions.

From June 2010 – February 2012, the percentage of North Dakota pharmacies and prescribers actively e-prescribing on the Surescripts network rose ~42% and 246%, respectively. We have chosen to highlight them not only because of their significant improvements in e-prescribing adoption, but because they have implemented a complement of unique and promising e-prescribing practices.

Strong State Backing for Health Information Technology

North Dakota has a long history of commitment to the adoption and use of health information technology to improve patient outcomes. In 2006, state officials convened a Health Information Technology Summit to examine the health IT landscape and established the HIT Steering Committee to develop North Dakota's health information exchange (HIE) plan. In 2009, the HIT Steering Committee worked to gather support for the passage of Senate Bill 2332, which provided \$5 million for a low-interest revolving loan program through the Bank of North Dakota. These funds were designed to help providers and other health care stakeholders purchase, install and support the use of interoperable electronic health information technology systems. In addition, the state allocated \$8 million to provide matching funds for health IT and HIE-related federal grants. North Dakota's State HIT Office and HIT Advisory Committee (both also codified under Senate Bill 2332) have collaboratively worked together to plan, implement, and administer the revolving health IT loan program.

Using Data and Outreach to Identify E-prescribing Gaps

Early in their e-prescribing efforts, North Dakota used Surescripts data to determine that 77 of their 130 enabled pharmacies were not currently e-prescribing. North Dakota conducted outreach to these pharmacies to identify the root causes of the lack of utilization. Though they found that some pharmacies had reservations about e-prescribing due to high transaction fees and prescriber errors, the lack of e-prescribing activity was mainly due to low prescriber adoption and use. This data analysis and outreach informed North Dakota's next steps to encourage the adoption of health IT—including e-prescribing capability—among providers in the state.

North Dakota has continued to use Surescripts data to determine gaps for outreach. In their most recent pharmacy gap analysis (June 2011), North Dakota used Surescripts data and reconciled the list with state Board of Pharmacy data. From the analysis, the state identified 36 pharmacies not currently enabled or active on the Surescripts network. The 36 pharmacies were broken into two tiers based on geography. Those located in areas with other actively e-prescribing pharmacies were de-prioritized since patients/providers in those areas have at least one e-prescribing pharmacy option. The State HIT Office prioritized the remaining 22 pharmacies for outreach.

North Dakota’s HIT Planning Loan Program – A Few Nuts and Bolts

North Dakota launched the Health Information Technology Planning Loan Program in 2009 to provide low-interest loans for health care entities to adopt health information technology systems. Recognizing low prescriber adoption and its effect on pharmacy adoption/utilization, one of the eligible projects that providers can use this funding for is purchase of electronic prescribing systems or EHRs with e-prescribing capabilities.

- **Eligible borrowers.** Eligible borrowers must be located in North Dakota and provide services to North Dakota residents. These may include, but are not limited to, hospitals, individual practitioners, dentists, podiatrists, optometrists, chiropractors, nurse practitioners, long term care facilities, local public health units, emergency medical service providers, ambulance services, pharmacies, and other patient coordination service providers. Applicants must complete a three-step loan application, a review by the State HIT Office as well as undergo an on-site readiness assessment. Final loan decisions are made by the Bank of North Dakota. Borrowers must pay back the loan in 10 years at a one percent interest rate.
- **Funding allowances.** A total of \$10 million has been allocated to the HIT Planning Loan Program (initial \$5 million in 2009 + \$5 million appropriated in 2011). Because the loan program is revolving, deobligated funds that were loaned in 2009 and any interest collected from previous loan recipients goes back into loan program coffer. Applications are funded on an ongoing basis and eligibility is as follows:

Entity type	Eligible funding amount
Standalone practices	Up to \$100,000
Hospitals and multi-professional entities	Up to \$400,000
Entities with three or more provider-owned facilities	Up to \$800,000

- **Communications and outreach.** North Dakota has leveraged strategic partnerships to communicate the availability of loans to both prescribers and pharmacies. North Dakota has utilized various partners’ contact lists to conduct outreach themselves as well as armed those partners with educational materials to blast on listservs, post on websites, include in newsletters, etc. The state’s regional extension center (REACH) has also been integral to marketing the loan program to their target providers.

Since the program’s inception North Dakota has awarded a total of 16 loans to various health care entities, namely critical access hospitals and clinician groups, amounting to \$6 million. As this is a revolving loan program, there is no official program end date.

Getting to Results

According to Surescripts data from February 2012, the proportion of North Dakota pharmacies actively e-prescribing is 89%. Compared to just 47% in June 2010, this represents a ~42 percentage point increase over a three year time period (**Figure 1**). Similarly, the number of prescribers that are actively e-prescribing on the Surescripts network has increased significantly over the same time period. According to the Surescripts' dataset, the number of unique prescribers that are actively e-prescribing grew from 400 in June 2010 to 1,383 in February 2012 (**Figure 2**).

Figure 1. Increase in the Percentage of Pharmacies Actively E-prescribing in North Dakota, June 2010 - February 2012

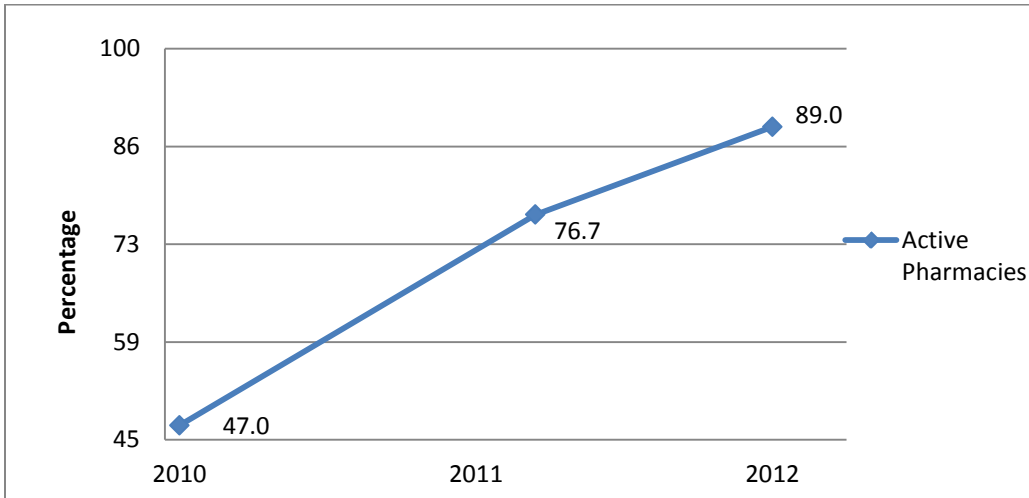
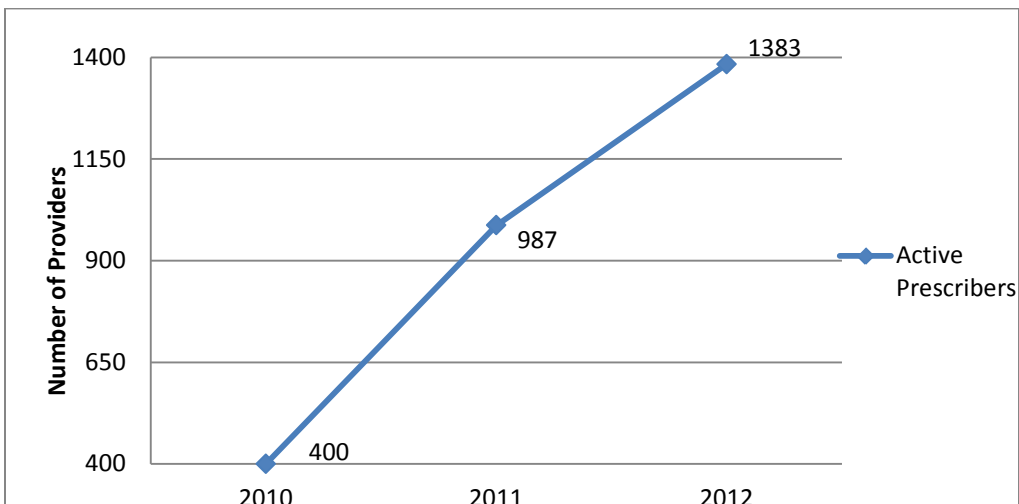


Figure 2. Number of Prescribers Actively E-prescribing in North Dakota, June 2010 - February 2012



References and Links

To learn more about North Dakota's HIT planning loan program, please contact Sheldon Wolf at shwolf@nd.gov.

And for more information please visit:

- [North Dakota Health Information Technology](#)
- [North Dakota HIT Planning Loan Program](#)