

Electronic Prescription Transfer Systems

2009

Electronic prescription transfer (ePrescribing) of medicines is the process by which a prescription is electronically generated by a prescriber, authenticated via an electronic signature and securely transmitted to a pharmacy for dispensing.¹

The AMA supports the development of an ePrescribing system as a fundamental building block for a national electronic health (eHealth) system in Australia.

When fully implemented ePrescribing should enhance the safety and quality of patient care and the quality use of medicines in Australia through the sharing of precise information about patient medication between the prescriber and the dispenser.

This position statement sets out the principles the AMA considers should underpin a functional electronic prescription transfer system for medical practitioners in Australia.

1. Background

- 1.1. Expenditure on medicines for which a prescription is required accounted for 12 per cent (\$11.2 billion) of health expenditure in 2006-07² with 237 million prescriptions filled each year. At least 94 per cent of GPs already use electronic prescribing software to generate paper prescriptions³ which has reduced prescribing and dispensing errors.⁴

2. The Principles of an ePrescribing System

- 2.1. The National eHealth Strategy advocates for a national approach to the implementation of electronic prescription transfers.⁵
- 2.2. Initially a national ePrescribing system will simply facilitate the electronic transfer of prescriptions. In the longer term a comprehensive ePrescribing system should contribute to a more complete electronic medication and eHealth record, improve monitoring of the use and mis-use of prescription medicines, and mitigate the fraud risk present in current paper-based process.
- 2.3. A national ePrescribing system should be based on the following principles:
 - (a) It should streamline work processes for medical practitioners and integrate with clinical practice management software.
 - (b) It should be cost neutral for medical practitioners to implement and use.
 - (c) It should not preclude the use of paper-based prescriptions.
 - (d) A manual system should be retained where it is not practicable to introduce IT infrastructure or where a provider and/or a consumer chooses not to use the system.
 - (e) It must be intuitive and simple to use.
 - (f) It must be practical and adaptive within contemporary legislative frameworks and compliance practices, and across all technological platforms that meet national eHealth standards and specifications.
 - (g) It must support a common approach to prescribing across different practice settings.
 - (h) It should accommodate the prescription of all medicines including government subsidised and private scripts.
 - (i) Patients must be able to have a prescription dispensed at their pharmacy of choice.

¹ Electronic Prescribing and Dispensing principles. July 2007. Australian Government, Department of Health and Ageing.

² Health Expenditure Australia 2006-07. Australian Institute of Health and Welfare. Table 4.15.

³ Australia's Health 2008. Australian Institute of Health and Welfare. p331.

⁴ Australia's Health 2008. Australian Institute of Health and Welfare. p382.

⁵ National E-Health Strategy Summary. 2008. Australian Health Ministers' Conference.

- (j) Patient privacy and confidentiality must be maintained.
- (k) Protection from prescription forgery must be assured through encryption and authentication of the source of every electronic prescription.
- (l) Governance arrangements must be transparent and accountable.
- (m) It must integrate with current and future eHealth systems and quality use of medicines initiatives.
- (n) There must be a simple and clear mechanism for patients to have their prescriptions dispensed in a timely manner if the system fails.
- (o) That appropriate incentives, education and training are adequately funded and provided.

3. The Development of an ePrescribing system

- 3.1. The AMA acknowledges the work program of the National eHealth Transition Authority (NeHTA) to develop an eHealth system in Australia. Their collection of national standards and specifications will inform the development and implementation of a secure ePrescribing system and clinical practice management software conformity.
- 3.2. Governance of ePrescribing arrangements should ensure ePrescribing systems maintain their purpose and conform to the standards and specifications developed by NeHTA.
- 3.3. The medical profession must be widely consulted on the development and implementation of an ePrescribing system to ensure the system reflects, and does not dictate, medical practice. It is important that before the functionality of an ePrescribing system is extended that the implications for medical practice and patient care are fully explored and evaluated in consultation with the medical profession.
- 3.4. Once implemented, an ePrescribing system should be evaluated at appropriate intervals against the rationale for introducing the system to ensure that it meets its goals and objectives.

The AMA Therapeutics Committee has principal carriage of the AMA Position Statement on Electronic Prescribing and Dispensing.

See also:

AMA Position Statement – Unique Healthcare Identifiers – 2008.

AMA Position Statement – Connectivity – 2007.

AMA Position Statement – Safety and Quality of E-Health Systems – 2006.

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