



Approval of Electronic Prescription Transmission Systems & Computerized Prescriber Order Entry Systems

Updated 8/17/2022

The State of Ohio Board of Pharmacy requires the approval of the following systems for the transmission of electronic prescriptions:

1. Systems used to transmit inpatient orders (commonly referred to as CPOE) at institutional facilities as defined in rule [4729:5-9-01](#) of the Ohio Administrative Code. This includes compliance with the Board's positive identification requirements [see OAC [4729:5-9-02.3](#) (N)]
2. Systems for the transmission of non-controlled prescriptions or orders that converts the prescription or order into a computer-generated fax or scanned image if transmitted within a closed system. A closed system includes a system whereby prescription information is transmitted directly between:
 - (i) Any division, subsidiary, parent or affiliated or related company under common ownership and control.
 - (ii) One or more contracted entities. Contracted means having a written agreement (to include business associate agreements) between one or more prescribers and a pharmacy and shall not include a third-party intermediary unless otherwise approved by the board.
 - (iii) Any other entities as approved by the board [see OAC [4729:5-3-11](#) (C)].

IMPORTANT: Only the systems that meet the above criteria will be subject to Board approval.

REMINDER: *No prescriptions may be transmitted by means of an electronic prescription transmission system or computerized prescriber order entry system that converts the prescription or order into a computer-generated fax or scanned image [see OAC [4729:5-3-11](#) (C)].*

This prohibition does not apply to the following:

1. *A board approved third-party intermediary* if the conversion is necessitated by a temporary telecommunication outage of the intermediary or receiving pharmacy; or*
2. *A board approved system for the transmission of non-controlled prescriptions that converts the prescription into a computer-generated fax or scanned image if transmitted within a closed system.*



***The following third-party intermediaries have been approved by the Board:**

- 1. Surescripts (Approved 12/11/2017)**
- 2. eRx Network (Approved 2/7/2018)**
- 3. WENO Exchange (Approved 11/6/2019)**

For more information on this policy change, please review the following frequently asked questions. If you need any additional information, please contact the Board by email at erx@pharmacy.ohio.gov.

Frequently Asked Questions

Q1) The Board of Pharmacy's updated rule on approval required for CPOE systems applies to "institutional facilities." What type of facilities are covered by this rule?

Rule [4729-17-01](#) of the Ohio Administrative Code defines an institutional facility as follows:

"Institutional facility" means any of the following:

- (1) A public hospital or hospital as defined in section [3701.01](#) or [5122.01](#) of the Revised Code.
- (2) A freestanding emergency department.
- (3) A freestanding inpatient rehabilitation facility or inpatient rehabilitation facility as defined in rule [3701-83-25](#) of the Administrative Code.
- (4) An ambulatory surgical facility as defined in rule [3701-83-15](#) of the Administrative Code.
- (5) A nursing home licensed under Chapter 3721. of the Revised Code;
- (6) An inpatient psychiatric service provider as defined in rule [5122-14-01](#) of the Administrative Code;
- (7) A facility that provides medically supervised detoxification services that meets the following requirements:
 - (a) Patients are administered dangerous drugs to alleviate adverse physiological or psychological effects incident to withdrawal from the continuous or sustained use of drugs or alcohol;
 - (b) Patients are under the care of a licensed prescriber and are provided continuous onsite monitoring by nurses licensed in accordance with Chapter 4723. of the Revised Code;
 - (c) If the period of detoxification is less than twenty-four hours, patients shall be transitioned to an inpatient, residential, or outpatient treatment program; and

(d) The facility holds the appropriate license or certification by the Ohio department of mental health and addiction services.

(8) A residential care facility licensed under Chapter 3721. of the Revised Code that provides skilled nursing care to its residents, including medication administration as authorized in Chapter 3701-16 of the Administrative Code, provided the facility meets the following requirements:

(a) The administration of medication shall be in compliance with this chapter and Chapter 3701-16 of the Administrative Code, including the requirement to maintain individual medication records and documentation of medication orders; and

(b) The residential care facility maintains an executed contract or agreement with an institutional pharmacy for the provision of institutional pharmacy services. The executed contract or agreement shall be maintained in a readily retrievable manner.

(9) A state or local correctional facility, as defined in section [5163.45](#) of the Revised Code;

(10) A juvenile correctional facility that is under the management and control of the department of youth services or a private entity with which the department of youth services has contracted for the institutional care; and

(11) Any other facility as determined by the board. For additional facilities approved by th

Q2) Will EPTS systems that generate outpatient prescriptions in an institutional facility require approval by the Board of Pharmacy?

No. Systems that transmit outpatient prescriptions are not required to be approved by the Board. All controlled substance electronic prescriptions are covered by the Drug Enforcement Administration's (DEA) regulations on E-Prescribing of Controlled Substances (EPCS), including acceptable forms of two-factor authentication.

Q3) What systems will the Board of Pharmacy be reviewing and approving?

The Board of Pharmacy will *ONLY* be reviewing and approving systems that are used to transmit prescriptions internally (i.e. inpatient orders/prescriptions) within an institutional facility and all systems that transmit prescriptions by converting the prescription into a computer-generated fax or scanned image (commonly referred to as "e to fax") for transmission within a closed system. The Board of Pharmacy will be specifically reviewing each system to ensure it meets the positive ID requirements defined in OAC [4729:5-9-01](#) (R) of the Ohio Administrative Code.

Q4) What new restrictions will be placed on “e to fax” prescription transmission systems?

Except as outlined in the next paragraph, prescribers will not be permitted to transmit prescriptions by computer-generated fax (this includes both EPTS and CPOE systems). However, the prescriber can print out the prescription, sign it with a manual wet-ink signature, and fax the prescription or order to the pharmacy. The fax of the prescription must include header information identifying the origin of the fax.

There are two exceptions to restrictions on “e to fax” prescription transmission systems:

- 1) If there is a temporary outage by a Board-approved third-party intermediary or the receiving pharmacy, then a computer-generated faxed prescription will be accepted. **NOTE: An updated list of third-party intermediaries will be added to this document in early December.**
- 2) An “e to fax” prescription transmission system can also be used for prescriptions or orders transmitted as part of a closed system. A closed-system “e to fax” prescription or order transmission system requires approval by the Board.

Q5) Will an e-prescribing system used by ambulatory providers (i.e. ambulatory surgical centers, hospital outpatient departments, and the offices of physicians and other health professionals) to electronically transmit controlled substances (EPCS) be reviewed and approved by the Board?

No. It should be noted that while the Board will not review and approve EPCS systems, it is a requirement of the Medical, Nursing and Dental Boards that, effective December 29, 2017, every prescriber includes the first four alphanumeric characters (ex. M16.5) of the diagnosis code (ICD-10) or the full procedure code (Current Dental Terminology - CDT) on all opioid prescriptions.

Q6) Will systems used by the ambulatory providers (i.e., ambulatory surgical centers, hospital outpatient departments, and the offices of physicians and other health professionals) to electronically transmit non-controlled substances to outpatient pharmacies (eRx) be reviewed and approved by the Board?

No. Systems that are used to electronically transmit non-controlled substance outpatient prescriptions will not be reviewed or approved by the Board. It is the responsibility of the vendor and prescriber to ensure that all prescriptions include the required information listed in OAC 4729:5-5-15 of the Ohio Administrative Code. For more information on prescription requirements visit: www.pharmacy.ohio.gov/RX.

Q7) Should an institutional facility plan on scheduling a review with the Board of Pharmacy even if the facility's CPOE system has been reviewed before?

No. However, the Board strongly recommends institutional facilities that have made recent upgrades or changes to their previously approved systems and have not consulted a Board of Pharmacy Compliance Specialist to contact the Board to review and re-approve the CPOE/EHR system. This will ensure that changes do not impact a facility's compliance with Board of Pharmacy regulations.

Q8) How can the institutional facility schedule a review of its CPOE/EHR system?

The facility should contact the Board of Pharmacy at erx@pharmacy.ohio.gov to schedule a review.

Q9) Where can I go to get answers to other questions about the Board of Pharmacy review/approval process?

For other questions, you may contact the Board at the following email address:
erx@pharmacy.ohio.gov.