WRSHealth

To:	WRS Health Users
From:	WRS Development Team
Date:	8/25/21
Re:	New EPCS Workflow

WRS Health is proud to announce the release of a new update to the system – a new workflow for e-prescribing controlled medications.

ITEMS IN THIS RELEASE
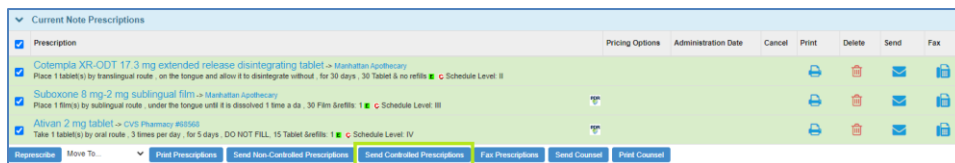
New EPCS Workflow - UPDATED

Other Changes

New Electronic Prescription of Controlled Substances (EPCS) Workflow

In compliance with migration to the National Council of Prescription Drug Programs (NCPDP) SCRIPT Standard v2017071, WRS recently updated the workflow for e-prescribing controlled medications effective on July 30, 2021.

The new EPCS workflow is as follows:
1. **To send multiple controlled prescriptions, simply tick the appropriate prescription boxes and click the "Send Controlled Prescriptions" button.**
   a. **We have added a "Schedule Level" visual cue to let the prescribing provider know what level the medication is for potential abuse. This is ranked I-V, "I" being the highest potential for abuse and "V" the lowest.**

2. After selecting the "Send" icon, the user will be taken to the Prescription Preview page. The Prescription Preview page will now display additional information such Schedule Level and Vital Signs information.

Prescription Details

Controlled prescriptions that will be routed :

Cotempla XR-ODT 17.3 mg extended release disintegrating tablet

	Manhattan Apothecary
33 year old, Male	147 W. 35th St., New York, NY 10001
DOB: 09/01/1987	Tel: (212)302-0600
123 Main Street	Fax: (212)302-0604
LAKE LINCOLNDALE, NY 10541	
Tel: (912)994-6808	

Date: 08/25/2021	WRS Implementation and Training
Rx No.: 30397305	6925 Bessemer Ave, Cleveland, OK 441271234
Note No.*: 14108558	Tel: 8451234567 Fax: 8459876543
Sent*: 2:56PM Aug 25, 2021	Doctor Test, MD, DEA #BG4020741

Rx
Drug: Cotempla XR-ODT 17.3 mg extended release disintegrating tablet
Sig: Place 1 tablet(s) by translingual route , on the tongue and allow it to disintegrate without , for 30 days
Quantity: 30   Unit of Measure: Tablet

Duration: 30 days
DAW: No
Start Date: 08/25/2021

Vitals as of 6/22/2021
Height: 5 ' 0" / 152.40 cm
Weight: 8 lb 0oz / 3.63 kg

Suboxone 8 mg-2 mg sublingual film

	Manhattan Apothecary
33 year old, Male	147 W. 35th St., New York, NY 10001
DOB: 09/01/1987	Tel: (212)302-0600
123 Main Street	Fax: (212)302-0604
LAKE LINCOLNDALE, NY 10541	
Tel: (912)994-6808	

Date: 08/25/2021	WRS Implementation and Training
Rx No.: 30397306	6925 Bessemer Ave, Cleveland, OK 441271234
Note No.*: 14108558	Tel: 8451234567 Fax: 8459876543
Sent*: 2:56PM Aug 25, 2021	Doctor Test, MD, DEA #BG4020741

Rx
Drug: Suboxone 8 mg-2 mg sublingual film
Sig: Place 1 film(s) by sublingual route , under the tongue until it is dissolved 1 time a da
Quantity: 30   Unit of Measure: Film

Refills: 1
DAW: No
Start Date: 08/25/2021

Vitals as of 6/22/2021
Height: 5 ' 0" / 152.40 cm
Weight: 8 lb 0oz / 3.63 kg

Ativan 2 mg tablet

	CVS Pharmacy #68568
33 year old, Male	197 Clarendon Street, New York, NY 10001
DOB: 09/01/1987	Tel: (401)770-5514
123 Main Street	Fax: (401)770-2136
LAKE LINCOLNDALE, NY 10541	
Tel: (912)994-6808	

Date: 08/25/2021	WRS Implementation and Training
Rx No.: 30397307	6925 Bessemer Ave, Cleveland, OK 441271234
Note No.*: 14108558	Tel: 8451234567 Fax: 8459876543
Sent*: 2:56PM Aug 25, 2021	Doctor Test, MD, DEA #BG4020741

Rx
Drug: Ativan 2 mg tablet
Sig: Take 1 tablet(s) by oral route , 3 times per day , for 5 days , DO NOT FILL
Quantity: 15   Unit of Measure: Tablet

Duration: 5 days
Refills: 1
DAW: No
Start Date: 08/25/2021

Vitals as of 6/22/2021
Height: 5 ' 0" / 152.40 cm
Weight: 8 lb 0oz / 3.63 kg

Approve & Sign

Fields with * are internal fields

3. Selecting the "Approve & Sign" button will take the user to the sign off page where they will enter the token password and security code. Selecting the "Sign + Send" button will sign and send the controlled prescription

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Controlled Substance Signoff Required

Prescriber:	Doctor Test MD DEA#BG4020741 6925 Bessemer Ave Cleveland OH 441271234
Patient:	John Test 123 Main Street nowhere NE 12345
Prescription:	Cotempla XR-ODT 17.3 mg extended release disintegrating tablet Sig:Place 1 tablet(s) by translingual route , 1 time per day , for 5 days , Dispense:5 Tablet, Refills:0 Written Date:6/10/2021 Effective:6/10/2021

By completing the two-factor authentication protocol at this time, you are legally signing the prescription(s) and authorizing the transmission of the above information to the pharmacy for dispensing. The two-factor authentication protocol may only be completed by the practitioner whose name and DEA registration number appear above.

Token Password:	•••••••••• *This is your token password-a secret password you set when registering your token(may be different from login password)*	
Security Code:	•••••• *This is the 6 digit code showing on your token right now (expires in 30 seconds)*	VIP-Push Enabled by: Symantec. Validation & ID Protection

Please wait.. Signing rx... ▮▮▮

Other Changes

Cancel Prescription Field Removed
Previously, there was a "cancel reason" field towards the bottom of the page. This has since been removed as it is no longer a requirement.

NADEAN REQUIREMENT

Narcotic Addiction DEA Number (NADEAN) identification number is now required for clinicians to prescribe controlled medications for opioid dependency treatment. The NADEAN ID is entered in Administration > Resource Management > General.

Please Note: Non-compliance will result in the prescription NOT being sent to the pharmacy.

| TAXONOMY CODE: | 207RN0300X [Internal Me ∨ | | DEA NUMBER: | *(mandatory for ERx and Formulary checking)* | | NADEAN: | |

GHB Prescription Reason: REQUIRED

When prescribing GHB medication, documentation of medical need for prescription is required in the NOTE TO PHARMACIST field in the following format: **GHB:reason.**

Please Note: Non-compliance will result in the prescription NOT being sent to the pharmacy.