

PA PROMIS_e[™]

User Manual



PA PROMIS_e[™]

ePrescribing

User Manual

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ePrescribing Summary

The new PROMIS^e™ ePrescribing application gives Pennsylvania Medical Assistance (MA) providers the ability to electronically transmit most prescriptions directly to the pharmacy.

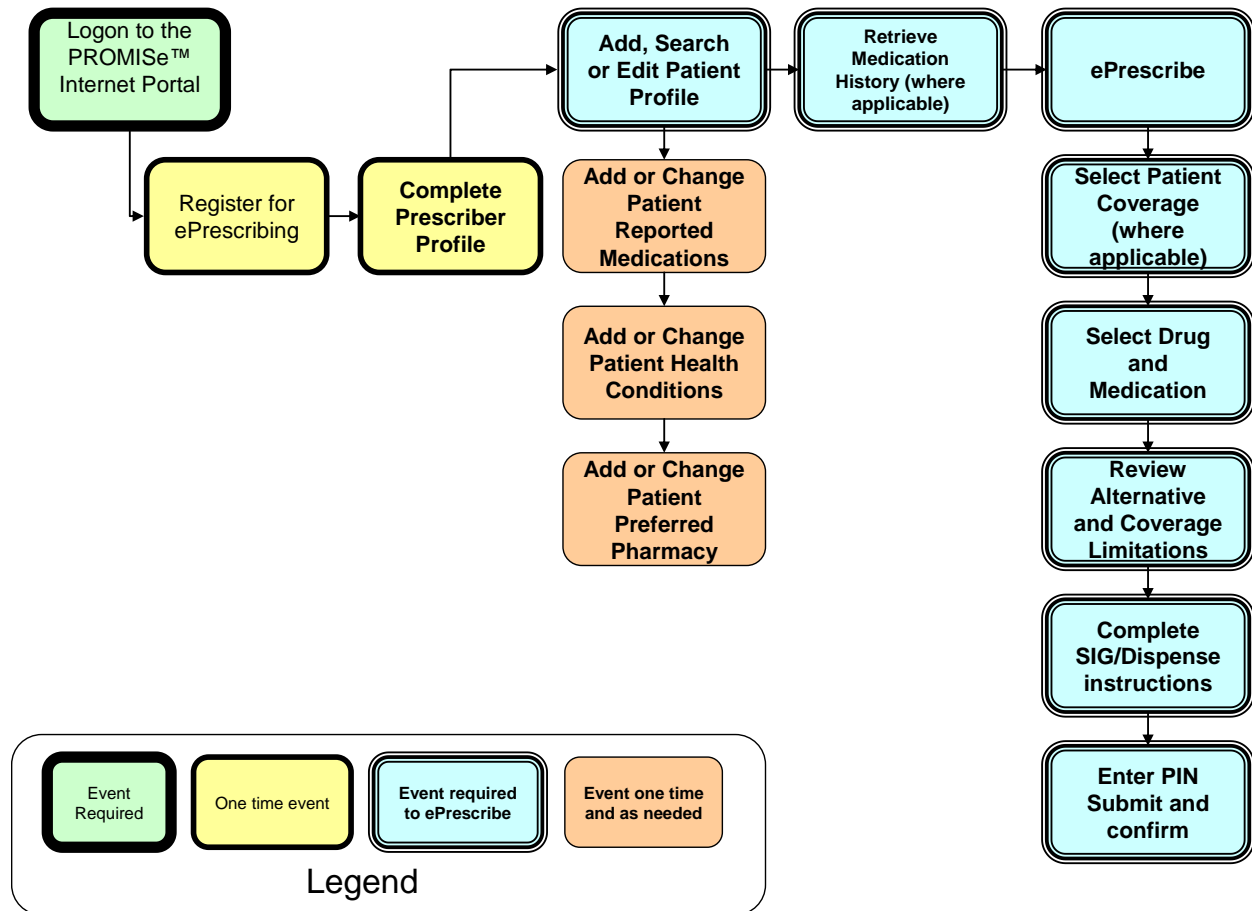
MA enrolled prescribers utilizing the new PROMIS^e™ ePrescribing application will be able to transmit prescriptions electronically to a Surescripts participating pharmacy designated by the MA recipient. The transmission occurs through the network connections between the prescriber's office, Surescripts, and the pharmacy. As part of this process, prescribers will have access to the MA preferred drug list (PDL) and prior authorization requirements. In order for the Surescripts participating pharmacy to be eligible for payment, the pharmacy must be enrolled in the MA Program.

All providers who intend to use the new PROMIS^e™ ePrescribing application must first register to use the PROMIS^e™ Internet Portal. Only MA enrolled prescribers can use the portal for ePrescribing. If the provider is one of six provider types permitted to prescribe, the Register for ePrescribe link will appear on the main page of the PROMIS^e™ Internet portal. The six provider types who may prescribe are: physicians, dentists, certified registered nurse practitioners, podiatrists, optometrists, and certified nurse midwives. While Physician Assistants are licensed to write prescriptions, they are not enrolled in the Pennsylvania Medicaid Program.

The one-time ePrescribing prescriber registration process requires entry of several key pieces of information. This includes name and contact information, DEA number (for prescribing controlled substances on paper), state license number, provider specialty (based on American Medical Association (AMA) codes), and a self created Personal Identification Number (PIN) which is used by the prescriber to finalize the electronic prescription. In addition, the prescriber must indicate if he/she grants access to alternate users to perform clerical functions such as updating the patient's profile or performing an eligibility transaction. If the Grant Alternate Access drop-down is selected, all alternates will have the ability to access the clerical functions of ePrescribe. Please note that alternates do not have the capability to finalize a prescription because the prescriber PIN is needed to complete this process. Upon completion of the prescriber profile, the only time the prescriber needs to access the profile is to update any profile information.

If you are already using a POC or ePrescribing product, and receive Renewal Requests through that product, you should consider how you want to continue to receive Renewal Requests before registering with the PROMIS^e™ ePrescribe application. Surescripts allows multiple prescriber registrations using different ePrescribing products. It will also route renewal requests to multiple vendor products or provider locations, however, due to limitations in pharmacy software, there may be the potential for a renewal request routing error to occur when a prescriber uses multiple products to receive renewal request services, or if the prescriber has multiple locations registered. If you choose to use the PROMIS^e™ ePrescribe application in addition to or in place of an existing POC or ePrescribing product with renewal request services, you will need to request a Prescriber Vendor Release form from the PROMIS^e™ Provider Assistance Center (PAC) at 1-800-248-2152. The completed form must be returned to Surescripts for processing. After Surescripts updates your prescriber registration data, you will be able to complete the PROMIS^e™ ePrescribe registration process.

The following chart shows the flow of ePrescribing from the initial logon and prescriber registration through submitting a prescription.



After the prescriber profile is created, patients must be added to the PROMISe™ ePrescribing application. This includes entering the patient’s name, patient number (if applicable), date of birth, gender, demographic information, telephone, and fax number. The prescriber must indicate the patient’s consent regarding the provider’s ability to view medication history. Patient information is entered into a database unique to the prescriber. This data is not shared among other prescribers. Each patient’s self-reported medications, health conditions and preferred pharmacy comprise the patient profile. Health conditions entered as part of the profile process, in addition to medication history returned from claims history, are used as part of the prescribing process. After the initial entry of the profile, updates can be applied with each succeeding patient visit. Updates may include new allergies or diseases, changes to medications or conditions such as pregnancy.

Prior to prescribing, the PROMISe™ ePrescribing application prompts the prescriber to initiate a medication history transaction. If the patient has not granted the prescriber the consent to see medication history records, the prompt will not appear. Medication history is available to aid in the prescribing process and provides valuable information used to alert the prescriber should a prescribed medication interact negatively with a current medication.

ePrescribing involves a few easy steps which are listed and described below.

- Select the patient's pharmacy coverage followed by the drug and medication specifics
- Review the drug alternative and coverage limitations if present, and complete the SIG/dispense information
- Enter the self-created prescriber PIN and submit and confirm the prescription for processing

The prescriber selects the patient's pharmacy coverage and enters the drug and medication specifics. Depending on the patient's pharmacy coverage supplied from the eligibility transaction, the prescriber will select the pharmacy coverage to be used for the prescription. Pennsylvania Medicaid is the payer of last resort so if multiple coverages are listed, coverage other than PA Medicaid should be selected.

Next, the prescriber reviews the drug alternative and coverage limitations if present. The drug information is selected. As the prescriber begins to type the drug, any drug that contains the typed letters is displayed. The prescriber continues to type until the drug appears in the list. After selecting the drug, the medication options, dosage and strength, are available for selection.

Depending on the drug and medication selected, as well as the patient's pharmacy coverage, payer or therapeutic alternatives are presented. The prescriber may opt to choose an alternative medication or ignore the alternative options. Coverage limitations, or constraints regarding the drug, are also provided by the pharmacy benefit manager or payer. The next step in the prescribing process involves creating the SIG and dispensing instructions. Here the prescriber enters the directions for use as well as the dispense quantity and refill options.

Before the prescription can be submitted, the prescriber must enter the four digit prescriber PIN that was created during the prescriber registration process. The prescriber must have entered a DEA number in the registration process to be able to create and print prescriptions for controlled substances. State or federal law preclude some prescriptions, such as those with controlled substances or those deemed as brand medically necessary, from being prescribed electronically. These prescriptions may be entered into the system, however, they must be printed, signed and then hand carried by the patient to the pharmacy.

The last step is to submit the prescription for processing. The prescriber is immediately notified of the transmission status for those prescriptions transmitted electronically. After the prescription is processed, the prescriber has the option to view the history of submitted prescriptions for each client at any time in the future.

The remainder of this manual describes in detail the various steps outlined in this overview.

1 Application Features

The PROMIS^e™ ePrescribing application allows providers to safely and securely send and receive prescriptions and prescription related information electronically. The PROMIS^e™ ePrescribing application supports a shift to a paperless and more informed way for providers to effectively and conveniently manage medications for their patients and improve clinical workflows.

1.1 Key Features and Benefits

The interactive features of the PROMIS^e™ ePrescribing application provide easy access and exchange of information between prescribers and pharmacies. One immediate advantage is that prescribers do not need to purchase, install, or develop special software or applications to use the PROMIS^e™ ePrescribing application.

The PROMIS^e™ Internet Portal allows you to log on using a standard Internet browser. Any information you pull from this application is specific to your provider number and will not be shared with others.

1.2 Secure Website

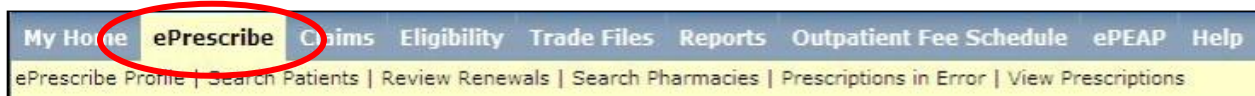
PROMIS^e™ provides security to the Internet web-based application. Using your logon ID, password, and site certificate features, this secure web site is accessible through the public Internet. If you have not yet registered to use the PROMIS^e™ portal please refer to <http://promise.dpw.state.pa.us/>

The options listed below are available to PROMIS^e™ providers who have received authorization to access the ePrescribing functions via PROMIS^e™ Portal.

- Add a new patient profile
- View a patient's eligibility, medication history, health conditions, and previous prescriptions (including renewals)
- Write a new prescription

Only the following MA enrolled prescribers can electronically prescribe using the PROMIS^e™ ePrescribing application: Physicians, Dentists, Podiatrists, Optometrists, Certified Registered Nurse Practitioners, and Certified Nurse Midwives.

1.2.1 The Menu Bar



The PROMIS^e™ Internet Portal Menu Bar contains the main heading for providers who are eligible to ePrescribe. Additional features, commands, and page options appear in horizontal sub-menus and take you to a specific function or page.

Select a command or page option in the following manner:

1. Move the cursor over the **ePrescribe** tab on the Menu Bar.

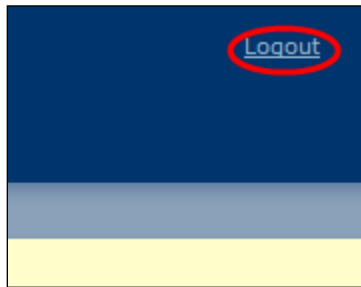
2. A horizontal menu appears with sub-headers for the ePrescribe options: **ePrescribe Profile, Search Patients, Review Renewals, Search Pharmacies, Prescriptions in Error, and View Prescriptions**. These options are described in detail later in the document.
3. Select the desired option.

The table below describes the menu and page options that are accessible from the Menu Bar.

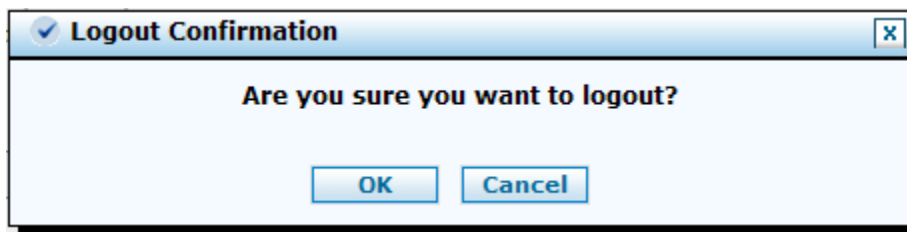
Menu Selection	
My Home	Displays or returns to the Provider My Home Page.
ePrescribing	
– ePrescribe Profile	Displays the prescriber’s ePrescribe profile.
– Search Patients	Displays the functionality to search for existing patients or to add new patients.
– Review Renewals	Displays the Renewal requests from pharmacies. It also includes any renewal responses that are in error. Renewal responses in error were unable to be processed through the system, possibly due to a network error. You will need to contact the requesting pharmacy to respond to the request.
– Search Pharmacies	Displays functionality to search for pharmacies on the Surescripts network based on demographic criteria selected.
– Prescriptions in Error	Displays prescriptions that were submitted but not processed successfully, possibly due to a network error.
– View Prescriptions	Displays previous prescriptions by date range.
Help	Opens the PROMIS ^e ™ Internet Help function.

1.2.2 Logout Link

The **Logout** link is located in the upper-right corner of most PROMIS^e™ Internet pages.



Clicking this link will cause the following confirmation message to appear:



Click the **OK** button to logout. You will be returned to the PROMIS^e™ Welcome Page in a logged-out status.

1.2.3 Radio Buttons

Throughout this document are references to Radio Buttons. Radio Buttons are a selection method of choosing one option from a supplied list of choices. To select an option using a Radio Button, click inside the circle corresponding to your choice. A green circle will display, indicating your selection.



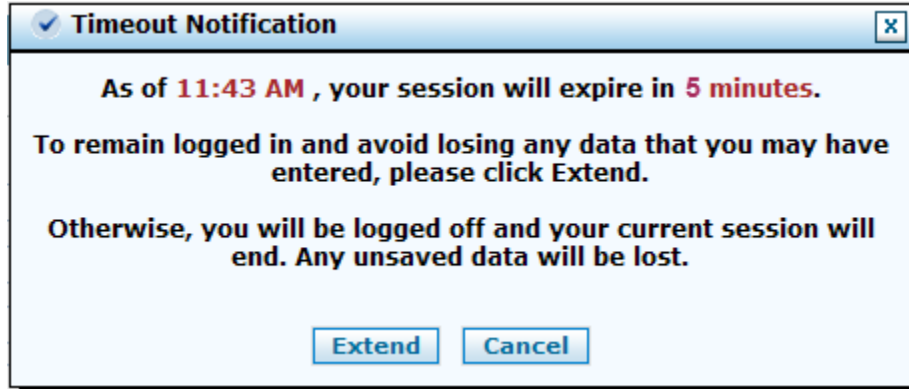
Example: Radio Button that *has not* been selected



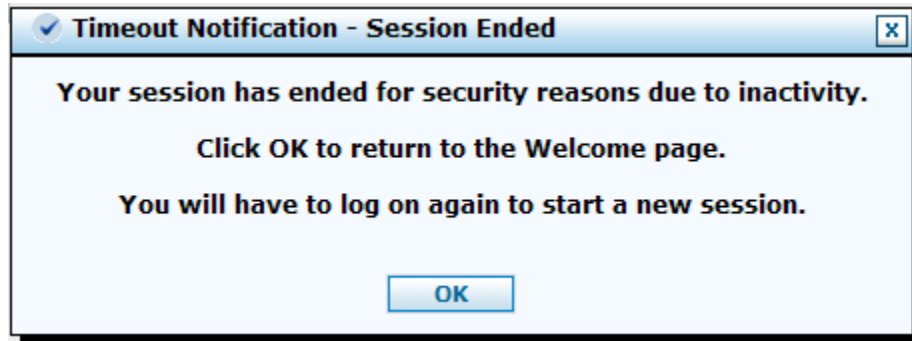
Example: Radio Button that *has* been selected

1.3 Timeout Notifications

If you stop working in the PROMIS^e™ Internet for more than 25 minutes, you will receive a “Timeout Notification” instructing you to click the Extend button to continue working in the portal.



If you stop working in the PROMIS^e™ Internet for more than 30 minutes, the system will log you out, and you will receive a “Timeout Notification – Session Ended” message. Any data that was not saved prior to the timeout will be lost.



If your session is terminated due to inactivity, the following steps will allow you to log back into the application.

1. Click the **OK** button.
2. Click the **Home** tab.
3. You will be returned to the PROMIS^e™ Provider **My Home** Page.
4. Re-enter logon information

2 Registering

Prescribers must follow the registration process to be granted access to the PROMISe™ ePrescribing application. Please ensure you have:

1. Enrolled with the Commonwealth of Pennsylvania as a valid Medical Assistance provider.
2. Provided your NPI as part of the provider enrollment process.
3. Acquired a computer with access to the Internet. The initial release of this product does not support handheld devices.
4. Registered to use the PROMISe™ Internet Portal at <http://promise.dpw.state.pa.us/>.

To register for the PROMISe™ ePrescribing application, first logon to the PROMISe™ Internet portal. Use this link – <http://promise.dpw.state.pa.us/> - to access the PROMISe™ Welcome Page. Log on using the credentials you created when registering for the PROMISe™ Internet portal.

The screenshot shows the home page of the PROMISe™ Internet portal. The header includes the Pennsylvania Department of Public Welfare logo and the text 'PROMISe™ Internet'. A navigation bar contains 'Home', 'Contact Us', and 'Login'. The main content area is divided into several sections: 'Provider Login' (highlighted with a red circle), 'Broadcast Message', 'Quick Links', and a 'Welcome to PROMISe™' banner at the bottom. The 'Provider Login' section includes a 'User ID' input field, a 'Log In' button, and links for 'Forgot User ID?', 'Register Now', and 'Where do I enter my password?'. The 'Broadcast Message' section contains two notices: one about HCSIS service plans and another about system maintenance. The 'Quick Links' section lists various resources. The banner at the bottom features a photo of smiling people and the text 'Welcome to PROMISe™'.

Once logged in, click on the **Register for ePrescribe** link and you will be redirected to the **Prescriber Registration** page.

Note: Only the following provider types are able to register and use this application. This link will not appear for other provider types.

- Physicians
- Dentists
- Certified Registered Nurse Practitioners
- Podiatrists
- Certified Nurse Midwives
- Optometrists

The screenshot shows the Pennsylvania Department of Public Welfare's PROMISe Internet portal. The header includes the state logo, 'pennsylvania DEPARTMENT OF PUBLIC WELFARE', and 'PROMISe™ Internet' with a 'Logout' link. A navigation bar contains 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. The main content area shows 'My Home' with the date 'Thursday 10/07/2010 01:40 PM EST'. There are three main sections: 'Provider' (Name: John Doe, Provider ID: 123456789, Location ID: 0001, with links for My Profile, Manage Alternates, and Manage Billing Agents), 'Broadcast Messages' (a security warning about a 30-minute timeout), and 'DPW Resources' (with links for DPW Home, DPW Provider Information, and 'Register for ePrescribe', which is circled in red).


Note: If you already use a POC or ePrescribing product, and receive Renewal Requests through that product, you should consider how you want to continue to receive Renewal Requests before registering with the PROMISe™ ePrescribe application. Surescripts allows multiple prescriber registrations using different ePrescribing products. It will also route renewal requests to multiple vendor products or provider locations, however, due to limitations in pharmacy software, there may be the potential for a renewal request routing error to occur when a prescriber uses multiple products to receive renewal request services, or if the prescriber has multiple locations registered.

If you choose to use the PROMISe™ ePrescribe application in addition to or in place of an existing POC or ePrescribing product with renewal request services, you will need to request a Prescriber Vendor Release form from the PROMISe™ Provider Assistance Center (800-248-2152). The completed form must be returned to the PROMISe™ PAC so it can be forwarded to

Surescripts for processing. After Surescripts updates your prescriber registration data, you will be able to complete the PROMIS^e™ ePrescribe registration process.

2.1 Registering for ePrescribing

The Registration process allows prescribers to request access to the PROMIS^e™ ePrescribing application. Prescribers are required to fill out the page with the identifying information. Fields identified with an asterisk* are required fields.


pennsylvania
DEPARTMENT OF PUBLIC WELFARE
Logout
PROMISe™ Internet

My Home
Claims
Eligibility
Trade Files
Reports
Outpatient Fee Schedule
ePEAP
Help

My Home > My Profile > ePrescribe Registration
Thursday 09/30/2010 01:03 PM EST

Prescriber Registration

To register for ePrescribe, verify the following information and make updates before submitting your registration request. The NPI information is required and must be associated to your individual physician license.

Controlled substances cannot currently be ePrescribed through this application. If you use the ePrescribing system for controlled drug substances, you will be prompted to print the prescription.

* Indicates a required field.

Identification

A DEA number is required to prescribe controlled drugs.

NPI

DEA # <input type="text"/>	Confirm DEA # <input type="text"/>
* State License # <input type="text"/>	* Confirm State License # <input type="text"/>
* Specialty <input type="text"/>	

* Grant Alternate Access * PIN

Prefix

* First Name <input type="text"/>	Middle Name <input type="text"/>	* Last Name <input type="text"/>
Suffix <input type="text"/>		

Address

If you have multiple service locations, enter the primary service location. The address cannot be a P.O. Box.

Location Name

* Address

* City * State * Zip Code

Enter a phone number and email the pharmacy can contact to ask questions about a patient's prescription.

* Pharmacy Inquiries Ext * Facsimile

* Contact Email * Confirm Email

User Agreement

The ePrescribing application provides access to confidential information. This information is to be used only for treatment purposes. I agree that this information will be accessed only for treatment purposes.

By checking this box, you acknowledge that you have read and understood the Prescriber User Agreement, and agree to the terms and conditions as described.

1. Click the **Register for ePrescribe** link located under the DPW Resources section on the PROMIS^e™ Provider Main Page.

Note: The prescriber's National Provider Identifier (NPI) will be populated

2. Enter your **Drug Enforcement Administration (DEA)** number, then re-enter it to confirm.

Note: The DEA number is not a required field, however if the field is not populated, you will not be able to enter controlled substances or print the prescription.

Note: Surescripts will validate the NPI and DEA numbers against their records. If any discrepancies exist, you will receive one of the following messages. For assistance, please contact the Provider Assistance Center (800-248-2152).

- The DEA number provided is invalid.
- DEA Duplicate: DEA number provided already exists in the Surescripts directory under a different name. If prescribing under another person or an institutional DEA, please use a unique DEA suffix.
- Name Duplicate: A prescriber with the given DEA and last name already exists in the Surescripts directories.
- Duplicate: A prescriber with the given DEA and last name already exists in the Surescripts directories.
- Surescripts Prescriber ID (SPI) root does not exist in the Surescripts directories.
- Surescripts Prescriber ID (SPI) does not exist in the Surescripts directories.

3. Enter your **State License number**, then re-enter it to confirm.

Note: This field is required to register for the ePrescribing application.

4. Enter two characters to initiate the **Specialty** search feature. As you enter characters in the field, a list of possible matches to your entry will display for selection. The search is based on specialties as identified by the American Medical Association.

Note: You must select a **Provider Specialty** for ePrescribing from the drop down list. Please see *Appendix A – AMA Specialty List* for the list of AMA specialties.

5. Select **Yes** if you want to give your PROMIS^e™ portal alternates access to ePrescribing. This will allow registered alternates access to the system to perform administrative functions such as obtaining eligibility. Alternates will not have the ability to submit prescriptions. Select **No** if you do not want to grant alternate access.

Note: By granting access for alternates, all alternates will have the ability to enter the ePrescribing application. No access would indicate that no alternate would have access to the application.

Note: The four digit prescriber PIN established during registration is required to finalize and submit a prescription and should not be shared with alternates.

5. Enter a four numeric **Personal Identification Number (PIN)**. This prescriber PIN will be required to complete a prescription and to complete a response to a renewal request.

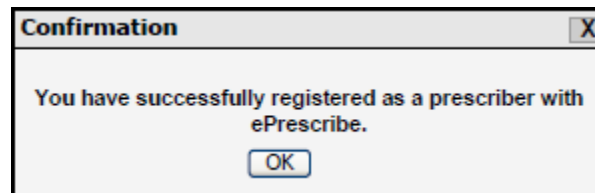
6. Enter the prefix to your name, first name, middle name, last name, and suffix.

Note: The prefix, middle name, and suffix fields are optional.

7. Enter your **primary service location name (optional), address, city, state, and zip code.**

Note: The primary service location cannot be a P.O. Box.

8. Enter a **phone number, facsimile number, and a contact email.** The pharmacy can use any means to contact you about the patient's prescription.
9. Click **Submit** to submit your prescriber registration
10. Upon successful registration, the following confirmation message will appear.



2.2 Editing the Provider Profile

If the need arises to edit the profile after initial set up, select **My Profile** from the Provider My Home Page.

The screenshot displays the Pennsylvania Department of Public Welfare's PROMISE Internet portal. The header includes the state logo, the text 'pennsylvania DEPARTMENT OF PUBLIC WELFARE', and 'PROMISE™ Internet' with a 'Logout' link. A navigation bar contains links for 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. The main content area is titled 'My Home' and shows the date 'Wednesday 08/18/2010 11:42 AM EST'. On the left, a 'Provider' section lists 'Name: Doe, John', 'Provider ID: 123456789', and 'Location ID: 0001'. Below these are links for 'My Profile' (circled in red), 'Manage Alternates', and 'Manage Billing Agents'. A 'DPW Resources' section includes links for 'DPW Home' and 'DPW Provider Information'. On the right, a 'Broadcast Messages' section contains an email contact instruction, a notice for 'Providers with Service Plans in HCSIS' regarding a maintenance window, and a closing message: 'Thank you for your patience.'

Note: The NPI and DEA number fields are not able to be edited. In the case where these fields need to be changed, contact the Provider Assistance Center (800-248-2152) to resolve.

The screenshot shows the 'ePrescribe Profile' registration page on the Pennsylvania Department of Public Welfare's PROMISe Internet portal. The page includes a navigation menu with options like 'My Home', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. The breadcrumb trail indicates the user is in 'My Home > My Profile > ePrescribe Registration'. The current date and time are Thursday 09/30/2010 01:03 PM EST.

The form is titled 'ePrescribe Profile' and includes a legend: '* Indicates a required field.' The form is divided into several sections:

- Identification:** This section contains the following fields:
 - NPI: 1969196918
 - DEA #: CW9999999
 - * State License #: [Text Input]
 - * Confirm State License #: [Text Input]
 - * Specialty: GP-General Practice
- Grant Delegate Access:** A dropdown menu set to 'No'.
- PIN:** A text input field containing '1234'.
- Personal Information:** Fields for Prefix, * First Name, Middle Name, * Last Name, and Suffix.
- Address:** This section includes a note: 'If you have multiple service locations, enter the primary service location. The address cannot be a P.O. Box.' Fields include:
 - Location Name: [Text Input]
 - * Address: [Text Input]
 - * City: [Text Input]
 - * State: [Dropdown Menu]
 - * Zip Code: [Text Input]
- Contact Information:** Fields for:
 - * Pharmacy Inquiries: [Text Input]
 - Ext: [Text Input]
 - * Facsimile: [Text Input]
 - * Contact Email: [Text Input]
 - * Confirm Email: [Text Input]

At the bottom of the form, there are two buttons: 'Submit' and 'Cancel'.

2.3 Accessing ePrescribing

Once you have successfully registered, from the Provider My Home Page click on the **ePrescribe** tab to access the application.

The screenshot shows the 'My Home' page for a provider on the PROMISe Internet portal. The navigation menu at the top includes 'My Home', 'ePrescribe' (highlighted with a red circle), 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. The page content is divided into several sections:

- Provider Information:** Displays the provider's name, account number (0018724100001), Provider ID (1234567890001), and Location ID (0001). It also includes links for 'My Profile', 'Manage Alternates', and 'Manage Billing Agents'.
- Broadcast Messages:** Contains a message about alternative contact methods (email to PAPAC1@hp.com) and a notice for providers with service plans in HCSIS regarding a nightly maintenance window from 11:40 PM to 12:10 AM.
- DPW Resources:** Includes links for 'DPW Home' and 'DPW Provider Information'.

Clicking on the **ePrescribe** tab will direct you to the PROMIS^e™ ePrescribing application. Here prescribers can update their patient profiles, search patients, review prescription renewals, search pharmacies, view prescriptions with errors, and view existing prescriptions. These functions are described in detail in the following sections.

The screenshot shows the web interface for the PROMIS^e™ Internet ePrescribe application. At the top left is the Pennsylvania Department of Public Welfare logo. The main header includes the text "pennsylvania DEPARTMENT OF PUBLIC WELFARE" and "PROMIS^e™ Internet" with a "Logout" link. A navigation menu contains "My Home", "ePrescribe", "Claims", "Eligibility", "Trade Files", "Reports", "Outpatient Fee Schedule", "ePEAP", and "Help". The "ePrescribe" tab is circled in red. Below the navigation menu is a breadcrumb trail: "ePrescribe > Profile | Search Patients | Review Renewals | Search Pharmacies | Prescriptions in Error |". The main content area features a "Welcome to Electronic Prescription Processing" heading. On the left, there are three menu sections: "Prescriber" with a link to "eRx Prescriber Profile"; "Prescription Services" with links to "Search Patients", "Review Renewals", and "Prescriptions in Error"; and "Other Services" with a link to "Search Pharmacies". A central image shows a glass vial with red capsules spilling out, next to a pill bottle cap and a handwritten prescription slip. Below the image, a commitment statement reads: "We are committed to make it easier for physicians and other providers to perform their business." A disclaimer follows: "DISCLAIMER: Use of the ePrescribe application is not intended to replace the requirements for any prescriber to perform the proper due diligence with their patients, before authorizing any prescriptions on their behalf."

3 Add a New Patient

One of the first actions a prescriber must perform is to add patients into the PROMISe™ ePrescribing application. Patients are uniquely related to the prescriber and are not shared with any other provider.

Once the patient's profile has been added, a prescriber can view the patient's eligibility for pharmacy coverage, as well as add the patient's medications, allergies, disease conditions, and preferred pharmacies to the patient's profile.

To add a new patient, select the Search Patients menu item and then click on the link **Add a New Patient** in the bottom right corner.

The screenshot shows the 'Search Patient' form in the PROMISe Internet application. The form is titled 'Search Patient' and includes a help icon. It contains the following fields and options:

- Patient Name** and **Patient #** tabs.
- Instructions: "Search for a new patient by Last Name. All other fields are optional. Then select the Search button to search for all available patients with matching information." and a note: "* Indicates a required field."
- *Last Name** (required) and **First Name** (optional) text input fields.
- Birth Date** (required) text input field with a calendar icon.
- Gender** dropdown menu.
- Include Inactive Patients** checkbox.
- Search** and **Cancel** buttons.
- Add a New Patient** link, which is circled in red in the image.

3.1 About the Add a New Patient Page

While there are several fields on this page, not all are required. Fields marked with an asterisk (*) are required and must be completed to proceed.

The screenshot shows the 'Add a New Patient' form in the PROMISE Internet portal. The form is titled 'Add a New Patient' and includes a help icon. Below the title, there is a brief instruction: 'Enter the patient information and demographics to add a new patient profile. Once the profile has been created for the patient, the option will be available to add allergies, disease codes, medications and preferred pharmacies to the patient profile.' A note indicates that an asterisk (*) denotes a required field.

The form fields are as follows:

- *Last Name:** Smith
- *First Name:** Jane
- Middle Name:** Ann
- Suffix:** (empty)
- Patient #:** 123456789
- *Birth Date:** 01/01/1980 (with a calendar icon)
- *Gender:** Female (dropdown menu)
- Pregnant:** (checkbox, unchecked)

Below these fields, there is a section for address and phone numbers:

- *Address:** 445 Sycamore St
- *City:** Harrisburg
- *State:** Pennsylvania (dropdown menu)
- *Zip Code:** 17110
- Phone:** Home (dropdown menu), 7175555555, Ext (empty)
- Phone:** (dropdown menu), (empty), Ext (empty)

At the bottom, there is a section for patient consent:

- *Patient Consent:** All Prescriber History (dropdown menu)

At the very bottom of the form, there are two buttons: 'Add' and 'Cancel'.

1. Enter the new patient's **Last Name, First Name, Middle name, and Suffix** (if applicable).
2. Enter the **Patient #** (optional). This is a prescriber unique number used to reference the patient, such as a chart number or patient account number. This field can contain combinations of letters, numbers and characters.
3. Enter the patient's **Birth Date** or select it from the calendar.
4. Select the patient's **Gender**.

If the patient is female and pregnant, check the **Pregnant** checkbox.

Note: The provider will need to update this indicator after delivery of the baby.

5. Enter the **patient's Address, City, State, and Zip Code**.
6. Select the patient's **Phone** type and enter the phone number and extension (optional). You may enter up to two different phone numbers.
7. Select the **Patient Consent** type. The patient consent indicates the patient's permission for the prescriber to view the medication history, as published by any pharmacy benefit

manager or payer participating in the Surescripts network. If the patient is a minor, consent should be obtained from the patient's guardian on behalf of the minor.

If **All Prescriber History** is selected, then all medication history including the current prescriber (you) and any other previous prescribers is displayed. This means the patient consents to allow you to view all of his or her prescription history

If **Current Prescriber History** is selected, then only the medication history for the current prescriber (medications you previously prescribed) is displayed. This means the patient consents to allow you to view the history of prescriptions only you have prescribed.

If **No History** is selected, then no medication history will be displayed. This means the patient does not consent to allow you to view any of his or her prescription history.

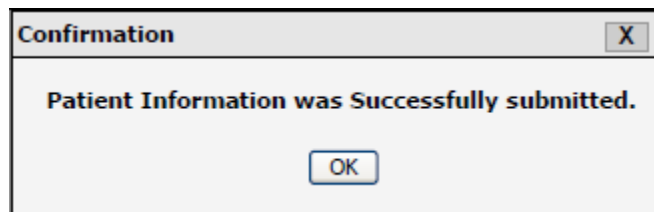
Note: Medication History is retrieved from payer and is based upon claims paid.

Note: Prescribers should have paperwork on site from the patient indicating what level of consent for medication history retrieval they have authorized.

Note: Correct entry of the patient's name, birth date, gender, and zip code are very important because these elements are used to retrieve the patient's eligibility information from the pharmacy benefit managers or payers.

Note: Due to confidentiality rules regarding HIV/AIDS, this drug history will not be present for PA Medicaid patients.

8. Click **Add** to add the new patient's profile. A Confirmation dialog box displays.



9. Click **OK** to close the dialog box.

At this point, the patient's profile is stored. The Patient Information panels allow you to add the patient's medications, allergies, health conditions, and preferred pharmacies to the patient's profile. You can also write a new prescription for the patient.

4 Search Patients

When submitting an online prescription through the PROMIS^e™ ePrescribing application, you must first determine if the patient is already entered by using the Search Patient function. If not, you will need to add the patient to your patient database before a prescription can be submitted. Once the patient has been added, you can search for the patient record.

Note: Patient files will not be visible or shared by other prescribers. The first time you add a patient an ePrescribing eligibility transaction is initiated to determine the patient’s prescription coverage and associated payers. Each time thereafter that you access the patient record, provided it has been more than 3 days from the time the last eligibility was requested, an ePrescribing eligibility transaction is automatically initiated. Eligibility information obtained during the ePrescribing process is not a guarantee of payment.

The following sections will review the two methods of searching for the patient: searching by name and searching by number.

4.1 Search for a Patient by Name

From the ePrescribe Main page, select **Search Patients**, and click on the tab called **Patient Name**.

The screenshot shows the 'Search Patient' form in the PROMIS^e Internet application. The 'Patient Name' tab is selected and circled in red. The form includes the following fields and options:

- Last Name** (required): Smith
- First Name** (optional): J
- Birth Date** (required): 01/01/1964
- Gender** (required): Male
- Include Inactive Patients**:

Buttons for **Search**, **Cancel**, and **Add a New Patient** are visible.

Search Results

Select the patient to view and update their patient information, view their eligibility information, or write a prescription for the patient. Total Records: 3

Patient ▲	Patient #	Birth Date	Address	Status
Smith, Joe	11111	01/01/1964	123 First St.	Active
Smith, John	22222	01/01/1964	111 Main Street	Active
Smith, Joe	33333	01/01/1964	555 Elm Street	Active

1. In the **Last Name** field, enter the patient’s last name or at least the first character to use the ‘starts with’ search feature.
2. Enter any of the following optional information: first name, birth date, and gender.


Note: In the first name field, enter at least one character to use the 'starts with' search feature.

3. Click **Include Inactive Patients** to include the patients that have an inactive status. Inactive patients are patients who may have left your practice, and for whom you are no longer maintaining an active patient record. Patients can be marked inactive by editing the patient profile and changing the status from active to inactive.

4. Click **Search** to search for the patient.

The Search Results panel displays patients that match the search criteria. If the search returns too many results, enter more specific search criteria to display fewer results. If you still cannot find the patient you are looking for, you may need to add the person as a new patient.

5. Click the desired patient name to view and update the patient information, view the eligibility information, or write a prescription for the patient.


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[My Home](#) | **ePrescribe** | [Claims](#) | [Eligibility](#) | [Trade Files](#) | [Reports](#) | [Outpatient Fee Schedule](#) | [ePEAP](#) | [Hospital Assessment](#) | [Help](#)

[ePrescribe Profile](#) | **Search Patients** | [Review Renewals](#) | [Search Pharmacies](#) | [Prescriptions in Error](#) | [View Prescriptions](#)

[ePrescribe](#) > [Search Patients](#) > Patient Information Monday 06/18/2012 08:46 AM EST

ePrescribe ?

Smith, Jane 01/01/1980 Female	Patient Information	Medications	Health Conditions	Preferred Pharmacies
Prescribe				

Patient Information ?

The patient information associated to the selected patient profile is displayed below. The fields related to patient eligibility cannot be updated while a prescription is in progress for the selected patient.

Last Name Smith	Middle Name Ann	Suffix _
First Name Jane	Birth Date 01/01/1980	
Patient # 123456789	Pregnant <input type="checkbox"/>	Status Active
Gender Female		

The patient demographics associated to the selected patient profile are displayed below.

Address 445 Sycamore St

City Harrisburg	State Pennsylvania	Zip Code 17110
Phone Home 1-717-555-5555	Phone _	Ext _

Patient consent for medication history is indicated below. If the patient is below the age of consent, then the parent/guardian consent is provided.

Patient Consent All Prescriber History

[Edit](#)

Patient Eligibility -

The patient information for each carrier for which the patient is eligible is listed below. Please confirm each Coverage selection that should be included for the identified patient. Updates can be applied to the patient profile as necessary. Deselecting a listed Coverage will make it unavailable on the Prescription Pad.

Pennsylvania Dept of Public Welfare
Coverage Determined on 06/18/2012
Covered-Mail Order, Retail, Long Term Care; Coverage not specified-Specialty

Last Name SMITH	Middle Name ANN	Suffix _
First Name JANE	Birth Date 01/01/1980	
Gender Female	Address 445 Sycamore St	
City HARRISBURG	State Pennsylvania	Zip Code 17110


Aetna Retail Coverage
Coverage Determined on 06/18/2012
Covered-Mail Order, Retail; Coverage not specified-Long Term Care, Specialty

Last Name SMITH	Middle Name ANN	Suffix _
First Name JANE	Birth Date 01/01/1980	
Gender Female	Address 445 Sycamore St	
City HARRISBURG	State Pennsylvania	Zip Code 17110

Note: Pennsylvania Department of Public Welfare refers to the Medicaid Fee for Service (FFS) program. Information from Managed Care Organizations (MCOs) regarding PA Medicaid patients will be identified by the name of the MCO.

For each patient, you will see the pharmacy coverage details; the payer and health plan name, type of coverage (mail, retail, or both), and demographic information, as known by that payer.

If Surescripts returns patient information that differs from what is on the patient profile, a red icon (as shown below) will appear next to the eligibility coverage. In that case, review the information with the patient to ensure the data on file is accurate. Make updates to the patient profile as needed.


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Logout

PROMISe™ Internet

[My Home](#) | [ePrescribe](#) | [Claims](#) | [Eligibility](#) | [Trade Files](#) | [Reports](#) | [Outpatient Fee Schedule](#) | [ePEAP](#) | [Hospital Assessment](#) | [Help](#)

[ePrescribe Profile](#) | [Search Patients](#) | [Review Renewals](#) | [Search Pharmacies](#) | [Prescriptions in Error](#) | [View Prescriptions](#)

ePrescribe > Search Patients > Patient Information Monday 06/18/2012 08:46 AM EST

ePrescribe ?

Smith, Jane
 01/01/1980
 Female

[Patient Information](#) | [Medications](#) | [Health Conditions](#) | [Preferred Pharmacies](#)

[Prescribe](#)

Patient Information ?

The patient information associated to the selected patient profile is displayed below. The fields related to patient eligibility cannot be updated while a prescription is in progress for the selected patient.

Last Name Smith
First Name Jane
Patient # 123456789
Gender Female

Middle Name Ann
Birth Date 01/01/1980
 Pregnant

Suffix _
Status Active

The patient demographics associated to the selected patient profile are displayed below.

Address 445 Sycamore St
 -
City Harrisburg
State Pennsylvania
Zip Code 17110

Phone Home 1-717-555-5555 Ext _
Phone _ _ _ Ext _

Patient consent for medication history is indicated below. If the patient is below the age of consent, then the parent/guardian consent is provided.

Patient Consent All Prescriber History

[Edit](#)

Patient Eligibility -

The patient information for each carrier for which the patient is eligible is listed below. Please confirm each Coverage selection that should be included for the identified patient. Updates can be applied to the patient profile as necessary. Deselecting a listed Coverage will make it unavailable on the Prescription Pad.


Pennsylvania Dept of Public Welfare
 Coverage Determined on 06/18/2012
 Covered-Mail Order, Retail, Long Term Care; Coverage not specified-Specialty

Last Name SMITH
First Name JANE
Gender Female
Address 445 Sycamore St
 -
City HARRISBURG

Middle Name ANN
Birth Date 01/01/1980

Suffix _
State Pennsylvania
Zip Code 17110

Aetna Retail Coverage
 Coverage Determined on 06/18/2012
 Covered-Mail Order, Retail; Coverage not specified-Long Term Care, Specialty



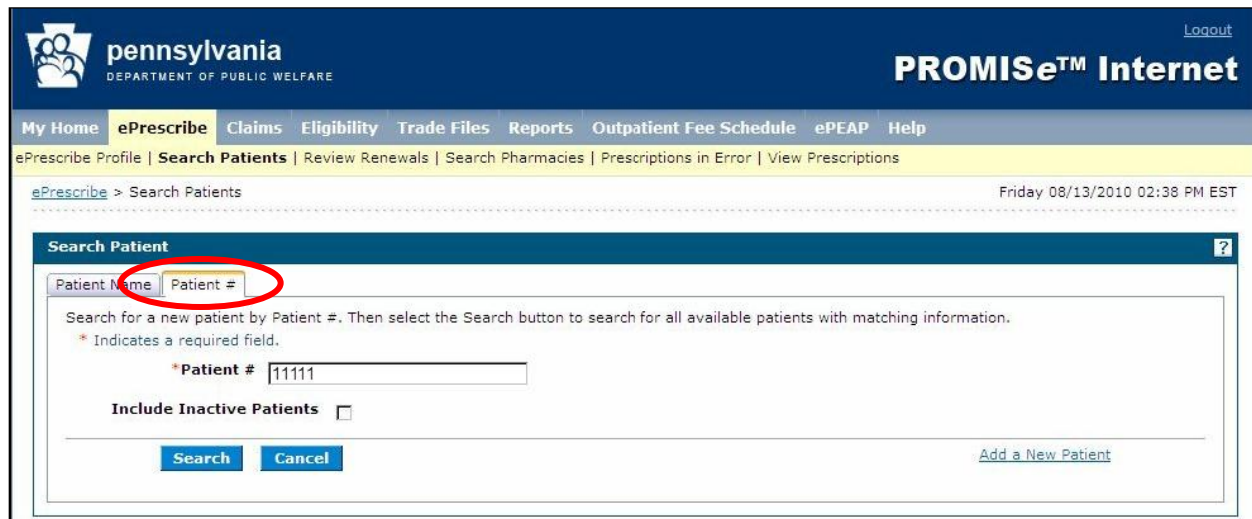
Last Name SMITH
First Name JANE
Gender Female
Address 445 Elm St
 -
City HARRISBURG

Middle Name ANN
Birth Date 01/01/1980

Suffix _
State Pennsylvania
Zip Code 17110

4.2 Search for a Patient by Number

From the ePrescribe Main page, select **Search Patients**, and click on the **Patient #** tab.



The screenshot shows the 'Search Patient' form in the PROMISe Internet interface. The form has two tabs: 'Patient Name' and 'Patient #'. The 'Patient #' tab is selected and circled in red. Below the tabs, there is a search instruction: 'Search for a new patient by Patient #. Then select the Search button to search for all available patients with matching information.' A note indicates that an asterisk (*) denotes a required field. The 'Patient #' field contains the number '11111'. There is an unchecked checkbox for 'Include Inactive Patients'. At the bottom of the form are 'Search' and 'Cancel' buttons, and a link for 'Add a New Patient'.

1. Enter the patient number in the **Patient #** field. This is a number, entered by the prescriber, that is specific to the prescriber or practice. It is used to reference the patient (i.e. chart number or account number).

Note: The patient number search is an 'exact match' search not a 'starts with' search.

2. Click **Include Inactive Patients** to include the patients that you have designated as Inactive. Inactive patients are patients who may have left your practice and for whom you are no longer maintaining an active patient record.

Note: Patients can be marked inactive by editing the patient profile and changing the status from active to inactive.

3. Click the **Search** button to search for the patient. The Search Results panel displays patients that match the search criteria. If you still cannot find the patient you are looking for, you may need to add them as a new patient.
4. Click the desired patient name to view and update the patient information, view the eligibility information, or write a prescription for the patient.

5 Patient Specific Information

This section of the ePrescribing User Manual contains detailed information specific to each of your patients, such as self-reported medications, health conditions and preferred pharmacies. This compilation of information is referred to as the Patient Profile.

This page is accessed after selecting an existing patient or adding a new one, as described in the previous sections.

penNSYLVANIA DEPARTMENT OF PUBLIC WELFARE **PROMISe™ Internet** Logout

My Home **ePrescribe** Claims Eligibility Trade Files Reports Outpatient Fee Schedule ePEAP Hospital Assessment Help

ePrescribe Profile | Search Patients | Review Renewals | Search Pharmacies | Prescriptions in Error | View Prescriptions

ePrescribe > Search Patients > Patient Information Monday 06/18/2012 08:46 AM EST

Smith, Jane
01/01/1980
Female

Patient Information Medications Health Conditions Preferred Pharmacies

Patient Information

The patient information associated to the selected patient profile is displayed below. The fields related to patient eligibility cannot be updated while a prescription is in progress for the selected patient.

Last Name Smith
First Name Jane
Patient # 123456789
Gender Female

Middle Name Ann
Birth Date 01/01/1980
Pregnant

Suffix _
Status Active

The patient demographics associated to the selected patient profile are displayed below.

Address 445 Sycamore St
_

City Harrisburg
State Pennsylvania
Phone Home 1-717-555-5555 Ext _ **Phone** _ Ext _

Zip Code 17110

Patient consent for medication history is indicated below. If the patient is below the age of consent, then the parent/guardian consent is provided.

Patient Consent All Prescriber History

Edit

Patient Eligibility

The patient information for each carrier for which the patient is eligible is listed below. Please confirm each Coverage selection that should be included for the identified patient. Updates can be applied to the patient profile as necessary. Deselecting a listed Coverage will make it unavailable on the Prescription Pad.

Pennsylvania Dept of Public Welfare
Coverage Determined on 06/18/2012
Covered-Mail Order, Retail, Long Term Care; Coverage not specified-Specialty

Last Name SMITH
First Name JANE
Gender Female
Address 445 Sycamore St
_

Middle Name ANN
Birth Date 01/01/1980

City HARRISBURG
State Pennsylvania
Zip Code 17110

Suffix _

Aetna Retail Coverage
Coverage Determined on 06/18/2012
Covered-Mail Order, Retail; Coverage not specified-Long Term Care, Specialty

Last Name SMITH
First Name JANE
Gender Female
Address 445 Sycamore St
_

Middle Name ANN
Birth Date 01/01/1980

City HARRISBURG
State Pennsylvania
Zip Code 17110

Suffix _

5.1 Medications

The Medications page has two sections. The first section references the **Medication History Request**. The second section, **Medications Manually Entered/Patient Reported**, refers to medications specifically reported by the patient which are entered by the prescriber.

The Medication History request is used to obtain the patient's medication history prior to prescribing or when making decisions regarding renewals. This function is described in detail in the ePrescribing section.

The Medications Manually Entered/Patient reported page is used to enter, edit and display medications as reported by the patient.

5.1.1 Adding a New Patient-Reported Medication

In the event a patient informs you of any medications or supplements he/she is taking where they have paid cash, you have the ability to add the medications to the patient profile. This screen will allow entry of items reported by the patient.

The screenshot shows the PROMISe Internet interface for a patient named Jane Smith. The 'Medications: Manually Entered / Patient Reported' section is highlighted with a red oval. The form includes the following fields:

Date	Drug / Supplement	Amount and Frequency	Action
Click to collapse.			
* Indicates a required field.			
*Type	Supplements / Alternative Therapy		
*Supplements / Alternative Therapy	Multivitamin		
Amount and Frequency	1 tablet daily		
<input type="button" value="Add"/>			

1. In the **Type** field, use the drop down to select either Drug or Supplement/Alternative Therapy.
2. If entering a Drug, use the **Drug Name** field to enter the name of the medication the patient reports. You can enter a partial name and it will populate a list from which to choose.
3. If entering a Supplement/Alternative Therapy, use the **Supplements/Alternative Therapy** to enter the name of the supplement or alternative history the patient reports.

4. In the **Amount and Frequency** field, enter the dosage information.
5. Click the **Add** button to complete the process. The drug or supplement will be added to the self-reported medications list.

5.1.2 Editing a Medication

If you need to adjust the dosage information for a patient-reported medication listed, you can accomplish that using this page.

The screenshot shows the PROMISe Internet ePrescribe interface for patient Jane Smith. The page includes a navigation menu with options like My Home, ePrescribe, Claims, Eligibility, Trade Files, Reports, Outpatient Fee Schedule, ePEAP, and Help. The breadcrumb trail is ePrescribe > Search Patients > Patient Information > Medications. The date and time are Tuesday 08/24/2010 10:17 AM EST.

The ePrescribe section displays patient information for Jane Smith (DOB: 01/01/1980, Female) and navigation links for Patient Information, Medications, Health Conditions, and Preferred Pharmacies. A Prescribe button is also visible.

The Medication History Request section provides instructions on how to retrieve medication history and includes a form with fields for 'Retrieve medication history from' (08/24/2008) and 'To' (08/24/2010), along with a Retrieve button.

The Medications: Manually Entered / Patient Reported (3) section contains a table of medications. The Lexapro entry is highlighted with a red circle around the Edit | Remove link. Below the table, there is a form for editing the Lexapro entry, including fields for Type (Drug), Drug Name (Lexapro), and Amount and Frequency (10mg once daily), with Save and Cancel buttons.

Date	Drug / Supplement	Amount and Frequency	Action
Click to add a new Drug / Supplement			
08/24/2010	Lexapro	10mg once daily	Edit Remove
Type Drug			
Drug Name Lexapro			
Amount and Frequency 10mg once daily			
<input type="button" value="Save"/> <input type="button" value="Cancel"/>			
08/23/2010	Vicodin	1 table per day	Edit Remove
08/23/2010	Multi-vitamin	1 tablet each day	Edit Remove

1. Click on the **Edit** link.
2. In the **Amount and Frequency** field, enter the new dosage information.
3. Click the **Save** button to complete the process. The drug or supplement will then be modified to reflect the change. The date field will be populated with the current date.

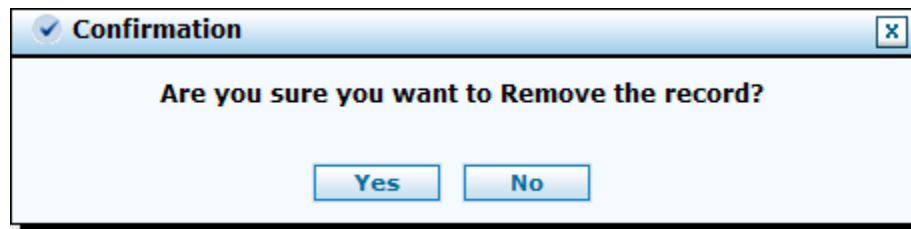
5.1.3 Removing a Medication

If a listed medication is no longer being taken, you can remove it from the patient-reported Medications using this page.

The screenshot shows the PROMISe Internet ePrescribe interface for patient Jane Smith. The page includes a navigation menu with options like My Home, ePrescribe, Claims, Eligibility, Trade Files, Reports, Outpatient Fee Schedule, ePEAP, and Help. The breadcrumb trail is ePrescribe > Search Patients > Patient Information > Medications. The date and time are Tuesday 08/24/2010 10:17 AM EST. The ePrescribe section shows patient information for Jane Smith (DOB: 01/01/1980, Female) and navigation links for Patient Information, Medications, Health Conditions, Preferred Pharmacies, and Prescribe. Below this is the Medication History Request section, which includes a form to retrieve medication history from 08/24/2008 to 08/24/2010. The main section is titled 'Medications: Manually Entered / Patient Reported (3)' and contains a table with columns for Date, Drug / Supplement, Amount and Frequency, and Action. The table lists three medications: Lexapro (08/24/2010, 10mg once daily), Vicodin (08/23/2010, 1 table per day), and Multi-vitamin (08/23/2010, 1 tablet each day). The 'Remove' link for the Lexapro medication is circled in red.

Date	Drug / Supplement	Amount and Frequency	Action
08/24/2010	Lexapro	10mg once daily	Edit Remove
08/23/2010	Vicodin	1 table per day	Edit Remove
08/23/2010	Multi-vitamin	1 tablet each day	Edit Remove

1. Click on the **Remove** link. A message will display, verifying that you wish to delete the record



2. Click the **Yes** button to delete the record.

Note: Medications that are removed will not be stored in history and therefore unavailable for future viewing.

5.2 Health Conditions

You have the ability to add your patient's health conditions (diseases and allergies) to the patient's profile.

The screenshot shows the PROMISE Internet interface for the Pennsylvania Department of Public Welfare. The user is logged in as 'ePrescribe'. The breadcrumb trail is: ePrescribe > Search Patients > Patient Information > Medications > Health Conditions. The patient's name is Jane Smith, DOB 01/01/1980, Female. The 'Health Conditions' link in the navigation bar is circled in red. Below this, the 'Health Conditions' section is expanded, showing instructions to add conditions and a table with two sections: 'Disease Conditions' and 'Allergies'.

Description	Last Update	Action
Central Diabetes Insipidus	08/23/2010	Remove

Allergen	Reaction	Last Update	Action
CEDAR LEAF (THUJA)	Sinusitis	08/23/2010	Edit Remove

1. From the Patient Information page, click the **Health Conditions** link. The patient's health conditions will display

5.2.1 Adding a Disease Condition

From this page, you can view Disease Conditions or add new conditions.

The screenshot shows the 'PROMISe™ Internet' interface for the Pennsylvania Department of Public Welfare. The user is logged in as 'Smith, Jane' (DOB: 01/01/1980, Female). The navigation menu includes 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. The breadcrumb trail is 'ePrescribe > Search Patients > Patient Information > Health Conditions'. The date and time are 'Tuesday 08/24/2010 01:53 PM EST'. The 'ePrescribe' section has tabs for 'Patient Information', 'Medications', 'Health Conditions', and 'Preferred Pharmacies'. The 'Health Conditions' section contains a table with columns 'Description', 'Last Update', and 'Action'. A red circle highlights the 'Add' button in the 'Disease' field.

Description	Last Update	Action
2016-Acute Duodenal Ulcer with Hemorrhage		
Central Diabetes Insipidus	08/23/2010	Remove

1. In the **Disease** field, start by typing the name of the disease. A list of potential matches using the ICD-9 descriptors will display for selection. Choose the appropriate disease.
2. Click the **Add** button to complete the process. The disease will display under Disease Conditions.

Note: Diseases entered in the patient's profile will be used for editing during the prescribing process.

5.2.2 Removing a Disease Condition

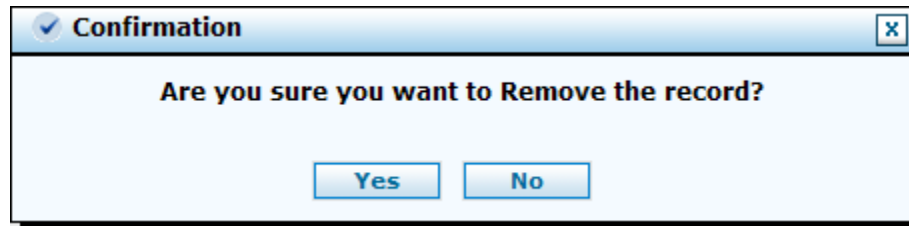
If a listed disease is no longer applicable, you can remove it from the Health Conditions. Use this page to remove diseases that are no longer valid.

The screenshot shows the Pennsylvania Department of Public Welfare's PROMISE Internet interface. The user is logged in as Jane Smith (DOB: 01/01/1980, Female). The navigation menu includes My Home, ePrescribe, Claims, Eligibility, Trade Files, Reports, Outpatient Fee Schedule, ePEAP, and Help. The breadcrumb trail is ePrescribe > Search Patients > Patient Information > Medications > Health Conditions. The page title is ePrescribe. The patient information section shows Jane Smith's details and navigation links for Patient Information, Medications, Health Conditions, and Preferred Pharmacies. The Health Conditions section contains a table with the following data:

Description	Last Update	Action
Central Diabetes Insipidus	08/23/2010	Remove

The 'Remove' link in the Action column for 'Central Diabetes Insipidus' is circled in red.

1. Click on the **Remove** link for the line you wish to remove. A message will display verifying you wish to remove the record.



2. Clicking the **Yes** button will remove the record.

5.2.3 Adding an Allergy

From this page, you can view or add Allergies.

The screenshot shows the 'Allergies' management page. At the top, there is a header 'Allergies' and a sub-header 'Click the **Edit** link to update the details in a row. Click the **Remove** link to remove the entire row.' Below this is a table with columns: Allergen, Reaction, Last Update, and Action. A 'Click to collapse' link is visible. Below the table, there is a form for adding a new allergy. The form has two fields: '* Allergen' (with a red circle around the asterisk) containing '900208-BEE POLLENS' and 'Reaction' containing 'Hives'. Below these fields is a blue 'Add' button, which is circled in red. At the bottom of the form, there is a table with one row: 'CEDAR LEAF (THUJA)' | Sinusitis | 08/23/2010 | [Edit](#) | [Remove](#).

1. In the **Allergen** field, type the name of the allergy. A list of potential matches will display for selection.
2. In the **Reaction** field, enter the physical reaction from the Allergen.
3. Click the **Add** button to complete the process. The allergen will then display under Allergies.

Note: Allergies entered in the patient's profile will be used for editing during the prescribing process.

5.2.4 Editing an Allergy

If you need to change information relating to an allergen, you can accomplish that by clicking on the **Edit** link.

The screenshot shows the 'Allergies' management page. At the top, there is a header 'Allergies' and a sub-header 'Click the **Edit** link to update the details in a row. Click the **Remove** link to remove the entire row.' Below this is a table with columns: Allergen, Reaction, Last Update, and Action. A 'Click to add a new allergen.' link is visible. Below the table, there is a table with two rows: 'BEE POLLENS' | Hives | 08/24/2010 | [Edit](#) | [Remove](#) and 'CEDAR LEAF (THUJA)' | Sinusitis | 08/23/2010 | [Edit](#) | [Remove](#). The 'Edit' link for the BEE POLLENS row is circled in red. Below the table, there is a form for editing an allergy. The form has two fields: 'Allergen' containing 'CEDAR LEAF (THUJA)' and 'Reaction' containing 'Sinusitis'. Below these fields are two buttons: 'Save' and 'Cancel'.

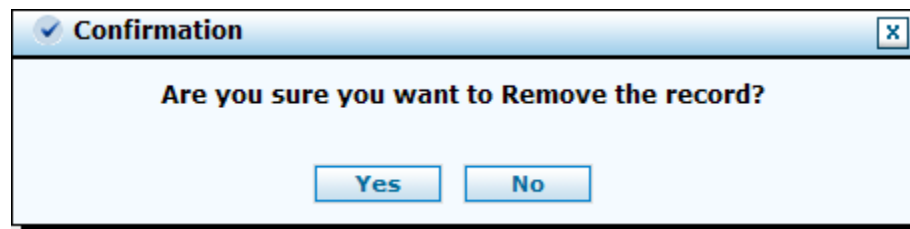
1. Click on the link for **Edit**.
2. In the **Reaction** field, enter the new reaction information.
3. Click the **Save** button to complete the process. The allergen will be modified to reflect the change.

5.2.5 Removing an Allergy

If a listed Allergy is no longer applicable, you can remove it from the Health Conditions page.

Allergies			
Click the Edit link to update the details in a row. Click the Remove link to remove the entire row.			
Allergen	Reaction	Last Update	Action
Click to add a new allergen.			
BEE POLLENS	Hives	08/24/2010	Edit Remove
CEDAR LEAF (THUJA)	Sinusitis	08/23/2010	Edit Remove

1. Click on the **Remove** link for the line you wish to remove. A message will display verifying you wish to remove the record.



2. Click the **Yes** button to remove the record.

5.3 Preferred Pharmacies

You have the ability to add and view the specific pharmacy where the patient would like to pick up prescriptions. In the event there is more than one preferred pharmacy listed, one pharmacy can be selected as the primary. The primary pharmacy will be pre-populated when writing a new prescription. Pharmacies listed for selection participate in the Surescripts network and are equipped to receive electronic prescriptions.

Note: Pharmacies listed participate in the Surescripts network but may not be PA Medicaid participating pharmacies.

The screenshot shows the PROMISe Internet ePrescribe interface. At the top, there is a navigation bar with 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. Below this is a breadcrumb trail: 'ePrescribe > Search Patients > Patient Information > Health Conditions > Preferred Pharmacies'. The patient information section shows 'Smith, Jane' with DOB '01/01/1980' and gender 'Female'. There are links for 'Patient Information', 'Medications', 'Health Conditions', and 'Preferred Pharmacies' (which is circled in red). Below this is the 'Preferred Pharmacies' section, which includes a table with one entry: 'CVS Pharmacy # 1630' at '1116 CARLISLE RD., CAMP HILL, Pennsylvania, 17011'. The table has columns for 'Pharmacy', 'Address', and 'Action' (with a 'Remove' link). An 'Add Pharmacy' button is located below the table.

1. Click the link for **Preferred Pharmacies**.
2. If the patient's preferred pharmacy is not listed click the **Add Pharmacy** button.
3. If there is an incorrect pharmacy listed and needs to be removed, click the **Remove** button.

5.3.1 Adding Preferred Pharmacies

From this page, you can view **Preferred Pharmacies** or you can search for and add new pharmacies.

There are several criteria for searching for a new pharmacy:

1. Pharmacy name and city
2. Pharmacy name, city, and state
3. Pharmacy name, city, and zip code
4. Address and state
5. City and state
6. Zip code

The screenshot shows the 'Search Pharmacies' form in the PROMISe Internet application. The form is titled 'Search Pharmacies' and includes a help icon. Below the title, there is a search instruction: 'To search for a specific pharmacy, enter the Pharmacy and City or State or ZIP Code; or Address and State; or a City and State; or ZIP Code.' The form contains several input fields: 'Pharmacy' (with 'CVS' entered), 'Address Contains', 'City' (with 'Harrisburg' entered), 'State' (a dropdown menu with 'Pennsylvania' selected), and 'Zip Code'. There are 'Search' and 'Cancel' buttons at the bottom of the form.

Search Results			Total Records: 6
Pharmacy ▲	Address	Action	
CVS Pharmacy # 1624	ROUTE 22 & COLONIAL ROAD, HARRISBURG, Pennsylvania, 17109 Office 1-717-652-6621, Fax 1-717-545-2833	Select	
CVS Pharmacy # 1641	4402 OAKHURST BOULEVARD, HARRISBURG, Pennsylvania, 17110 Office 1-717-545-2121, Fax 1-717-541-0440	Select	
CVS Pharmacy # 1917	6007 ALLENTOWN BLVD, PAXTON SQUARE, HARRISBURG, Pennsylvania, 17112 Office 1-717-540-8621, Fax 1-717-540-5663	Select	
CVS Pharmacy # 1922	6301 GRAYSON RD, SWATARA SQUARE S/, HARRISBURG, Pennsylvania, 17111 Office 1-717-561-4573, Fax 1-717-561-0136	Select	
CVS Pharmacy # 2370	3865 DERRY STREET, HARRISBURG, Pennsylvania, 17111 Office 1-717-558-1603, Fax 1-717-558-1545	Select	
CVS Pharmacy # 4037	221-223 MARKET STREET, HARRISBURG, Pennsylvania, 17101 Office 1-717-238-1584, Fax 1-717-238-6092	Select	

1. In the **Pharmacy** field, enter the pharmacy name or at least the first three characters.
2. In the **Address Contains** field, enter at least the first three characters that the address starts with or contains.
3. In the **City** field, enter at least the first three characters of the city.
4. In the **State** field, use the drop down to select the state.

5. In the **Zip Code** field, enter the zip code or at least the first three characters.
6. Click the **Search** button. A list of pharmacies meeting the search criteria will display. If your patient's pharmacy does not display, use more specific information.
7. Once the correct pharmacy is displayed, click on the **Select** link. The selected pharmacy will be added to the patient's preferred pharmacy list.

5.3.2 Removing a Preferred Pharmacy

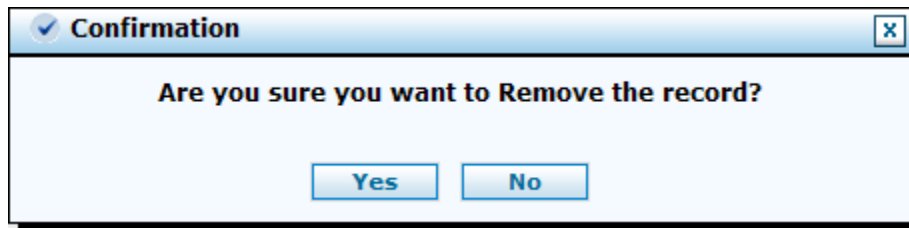
If the patient has moved, or now prefers a different pharmacy, you can remove from the Preferred Pharmacies panel. Click the **Remove** link to remove any pharmacies that are no longer valid.

The screenshot shows the PROMISe Internet interface for patient Jane Smith. The 'Preferred Pharmacies' section contains the following table:

Pharmacy	Address	Action
<input checked="" type="checkbox"/> CVS Pharmacy # 1630	1116 CARLISLE RD., CAMP HILL, Pennsylvania, 17011 Office 1-717-612-5067, Fax 1-717-761-7970	Remove or Set as Primary
<input type="checkbox"/> CVS Pharmacy # 1917	6007 ALLENTOWN BLVD, PAXTON SQUARE, HARRISBURG, Pennsylvania, 17112 Office 1-717-540-8621, Fax 1-717-540-5663	

Below the table is an 'Add Pharmacy' button.

1. Click on the **Remove** link for the line you want to remove. A message will display verifying you wish to remove the record.



2. Clicking the **Yes** button will remove the record.

5.3.3 Setting a Primary Preferred Pharmacy

If the patient uses more than one pharmacy, you have the ability to choose one as the Primary Pharmacy. The preferred pharmacy will automatically populate on the Prescription Pad. Click the **Set as Primary** link.

The screenshot shows the PROMISe Internet interface for patient Jane Smith. The page title is "PROMISe™ Internet" and the user is logged out. The navigation bar includes "My Home", "ePrescribe", "Claims", "Eligibility", "Trade Files", "Reports", "Outpatient Fee Schedule", "ePEAP", and "Help". The breadcrumb trail is "ePrescribe > Search Patients > Patient Information > Preferred Pharmacies". The patient information header shows "Smith, Jane", "01/01/1980", and "Female". The "Preferred Pharmacies" section contains a table with two rows. The first row is for "CVS Pharmacy # 1630" at "1116 CARLISLE RD., CAMP HILL, Pennsylvania, 17011" with a checked checkbox. The second row is for "CVS Pharmacy # 1917" at "6007 ALLENTOWN BLVD, PAXTON SQUARE, HARRISBURG, Pennsylvania, 17112" with a link "Set as Primary" circled in red. An "Add Pharmacy" button is located below the table.

Pharmacy	Address	Action
<input checked="" type="checkbox"/> CVS Pharmacy # 1630	1116 CARLISLE RD., CAMP HILL, Pennsylvania, 17011 Office 1-717-612-5067, Fax 1-717-761-7970	
CVS Pharmacy # 1917	6007 ALLENTOWN BLVD, PAXTON SQUARE, HARRISBURG, Pennsylvania, 17112 Office 1-717-540-8621, Fax 1-717-540-5663	Set as Primary

1. Click on the **Set as Primary** link for the Preferred Pharmacy you want to make primary. A message will display verifying you wish to set the primary preferred pharmacy.

The screenshot shows a confirmation dialog box titled "Confirmation" with a close button (X) in the top right corner. The main text asks, "Do you want to set this as the primary preferred pharmacy?". Below the text are two buttons: "Yes" and "No".

2. Clicking on the **Yes** button will set the pharmacy as the primary preferred pharmacy.

After a patient record has been created or located, the prescriber is able to enter prescriptions electronically.

6.1 Prescription Pad

There are some prescriptions that cannot be transmitted electronically, even if the prescriber has entered the DEA number in the profile. Brand Medically Necessary and Controlled Substance drugs can be entered into the PROMIS^e™ ePrescribing application but must be printed and signed for the patient to hand carry to the pharmacy.

The Generic Equivalent Drug Act requires the prescriber to handwrite “brand necessary” or “brand medically necessary” on a prescription in order for a brand name product to be dispensed by the pharmacist (35 P.S. §§ 960.1-960.7). Prescribers must therefore continue to use paper prescriptions for brand medically necessary drugs.

Controlled substances cannot be transmitted electronically, and therefore prescribers must continue to use paper prescriptions. Although the Drug Enforcement Administration issued a rule that allows electronic prescribing of controlled substances, effective June 1, 2010 which provided that specified security requirements are met (75 Fed. Reg. 16236, March 31, 2010), Pennsylvania state law requires that Schedule II drugs contain the manual signature of the prescriber (49 Pa. Code § 27.18).

Note: Surescripts does not currently accept electronic prescriptions for controlled substances.

Note: Compound drugs requiring more than one drug cannot be submitted via the PROMIS^e™ ePrescribing application, as the pharmacy transaction does not allow for the designation of compound drugs.

To begin the prescribing process, select **Prescribe** from the Patient Information page to display the Prescription Pad.

The screenshot displays the Pennsylvania Department of Public Welfare's PROMISe Internet ePrescribe interface. The top navigation bar includes 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', 'Hospital Assessment', and 'Help'. The breadcrumb trail shows 'ePrescribe > Search Patients > Patient Information'. The patient profile for Jane Smith (DOB: 01/01/1980, Female) is shown with tabs for 'Patient Information', 'Medications', 'Health Conditions', and 'Preferred Pharmacies'. The 'Prescribe' button is highlighted with a red circle. Below, the 'Patient Information' section provides details on name, birth date, gender, address, and consent.

Patient Information			
The patient information associated to the selected patient profile is displayed below. The fields related to patient eligibility cannot be updated while a prescription is in progress for the selected patient.			
Last Name	Smith	Middle Name	Ann
First Name	Jane	Birth Date	01/01/1980
Patient #	123456789	Pregnant	<input type="checkbox"/>
Gender	Female	Status	Active
The patient demographics associated to the selected patient profile are displayed below.			
Address	445 Sycamore St		
City	Harrisburg	State	Pennsylvania
Phone Home	1-717-555-5555	Phone	
Zip Code	17110		
Patient consent for medication history is indicated below. If the patient is below the age of consent, then the parent/guardian consent is provided.			
Patient Consent	All Prescriber History		
Edit			

6.1.1 Retrieving the Patient's Medication History

Medication history is published by pharmacy benefit managers or payers based on pharmacy claims filed on behalf of or by the patient. Medication history, along with information from the patient's profile such as allergies or diseases will be used in the ProDUR (Prospective Drug Utilization Review) review that is performed when you write a new prescription.

You should review the patient's medication history, as reported by the patient's Pharmacy Benefit Manager (PBM)/Payer.

Note: The **Retrieve Medication History** feature is only displayed when the Prescription Pad is empty. It will not be displayed after prescriptions are added. The medication history obtained is viewable from the patient's medication page of the profile. If there is no medication history available, a note will indicate that no medication history was available.

Note: Medication History may be incomplete. It may not include drugs that the patient asked not to be disclosed, OTC drugs, or drugs paid for by the patient. Also, payers may not report all drugs. PA Medicaid does not report HIV/AIDS treatment drugs. Medication History may also be inaccurate if there were errors in the claims information used by the payer to report medication history.


Note: Medication History will only display medications paid by the Pharmacy Benefit Manager or payer. Medication History will not display medications obtained where the patient paid cash or if the payer is not affiliated with the Surescripts network.

Note: The **Medication History Request** panel is not available when a patient does not have eligibility/coverage.

Note: Medication History is returned for patients with current PA Medicaid coverage.

Note: Due to confidentiality laws regarding AIDS/HIV treatment, these drugs will not be included in the Medication History from PA Medicaid.

To retrieve Medication History, on the **Patient Information** page, click the link for **Medications**.


pennsylvania
DEPARTMENT OF PUBLIC WELFARE
PROMISe™ Internet
Logout

[My Home](#) | **ePrescribe** | [Claims](#) | [Eligibility](#) | [Trade Files](#) | [Reports](#) | [Outpatient Fee Schedule](#) | [ePEAP](#) | [Hospital Assessment](#) | [Help](#)

[ePrescribe Profile](#) | **Search Patients** | [Review Renewals](#) | [Search Pharmacies](#) | [Prescriptions in Error](#) | [View Prescriptions](#)

[ePrescribe](#) > [Search Patients](#) > [Patient Information](#) Monday 06/18/2012 08:46 AM EST

ePrescribe ?

Smith, Jane <small>01/01/1980</small> <small>Female</small>	Patient Information Medications Health Conditions Preferred Pharmacies	Prescribe
--	---	---------------------------

Patient Information ?

The patient information associated to the selected patient profile is displayed below. The fields related to patient eligibility cannot be updated while a prescription is in progress for the selected patient.

Last Name Smith	Middle Name Ann	Suffix _
First Name Jane	Birth Date 01/01/1980	Status Active
Patient # 123456789	Pregnant <input type="checkbox"/>	
Gender Female		

The patient demographics associated to the selected patient profile are displayed below.

Address 445 Sycamore St

City Harrisburg State Pennsylvania Zip Code 17110

Phone Home 1-717-555-5555 Ext _ Phone _ Ext _

Patient consent for medication history is indicated below. If the patient is below the age of consent, then the parent/guardian consent is provided.

Patient Consent All Prescriber History

[Edit](#)

Medication History Request ?

If you want the system to check for drug-to-drug interactions, you must retrieve medication history. The last two (2) years of medication history can be requested. PA Medicaid will return up to one (1) year of the most recent medication history.

Retrieve medication history from **To**

[Retrieve](#)

Medications: Claims / Pharmacy Benefit Manager (10) -

Medication history may be incomplete. It may not include drugs the patient asked not to be disclosed, OTC drugs, or drugs paid for by the patient. Also, payers may not report all drugs. PA Medicaid does not report HIV/AIDS treatment drugs. Medication history may also be inaccurate if there were errors in the claims information used by the payer to report medication history.

[Expand All](#) | [Collapse All](#)

Medication	Source	Last Fill Date
AMNESTEEM	RXHUBPBM	12/10/2010
ZOLOFT	RXHUBPBM	12/09/2010
MINOCYCLINE HCL	RXHUBPBM	12/08/2010
CLONAZEPAM	RXHUBPBM	12/07/2010
LEXAPRO	RXHUBPBM	12/06/2010
CLARAVIS	RXHUBPBM	12/05/2010
ATENOLOL	RXHUBPBM	12/04/2010
BREVEXYL-8	RXHUBPBM	12/03/2010
DIFFERIN	RXHUBPBM	12/02/2010
AMNESTEEM	RXHUBPBM	11/01/2010

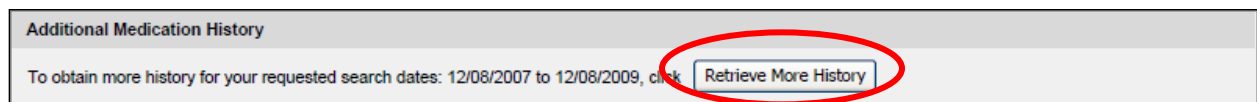
1. Click the **Retrieve medication history from** field and use the drop down to select a start date for Medication History.
2. Click the **To** field and select an end date for Medication History.
3. Click the **Retrieve** button to pull up the Medication History.

Note: Enter the dates to retrieve medication history or use the default dates which include today's date up to two years prior.

Note: While up to two years of Medication History can be returned, only one year of PA Medicaid FFS medication history will be returned.

Note: If the patient has not given consent to view history, an error message will display in place of the panel.

4. If there are more records to be displayed, click **Retrieve More History** to retrieve additional records. The additional medication history is added to the end of the initial results. To view the additional medication history, scroll to the bottom of the panel.



6.1.2 Medication History Failures

In some cases, when attempting to retrieve medication history, there may be an issue between the PROMIS^e™ ePrescribing application and the Pharmacy Benefit Manager (PBM) or payer that prevents the Medication History information from being displayed.

Error messages, generated from the PBM or payer system, which define the issue(s) preventing a successful medication history transaction may include but are not limited to:

- Poorly formatted message
- Cannot find patient identified
- Patient not eligible
- Consent not given
- Responder cannot process a physician only consent
- Physician identifier is not valid
- Physician identifier is not supported
- Date range for medication history is invalid

In these instances, please contact the Provider Assistance Center (800-248-2152) to resolve the issue.

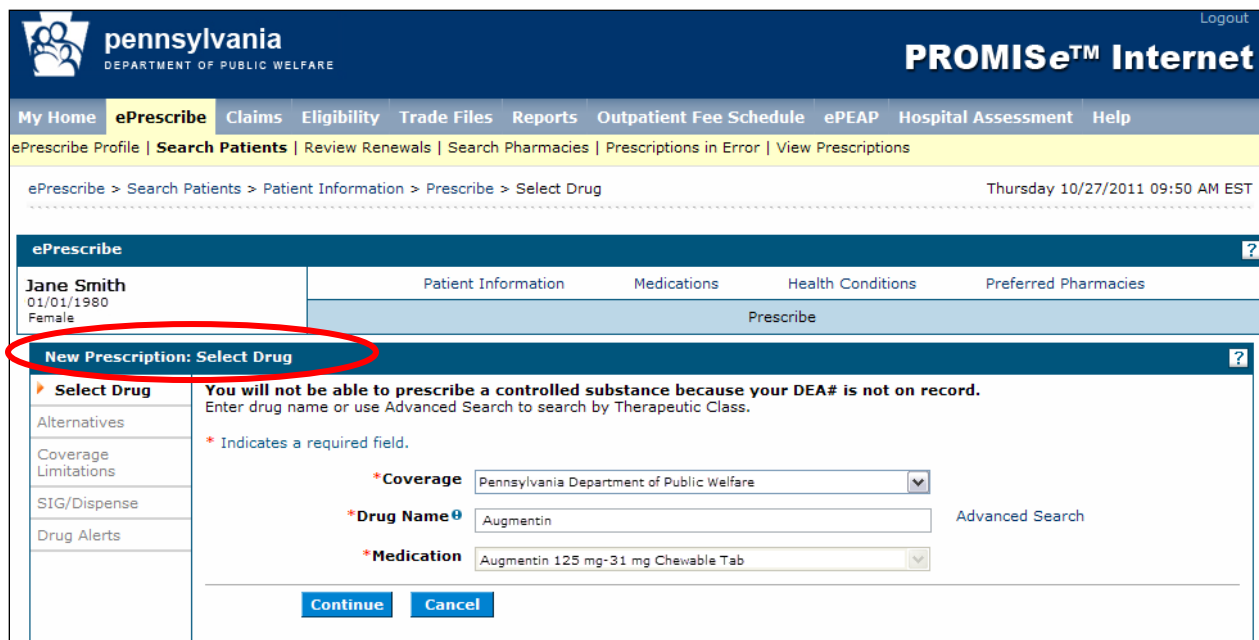
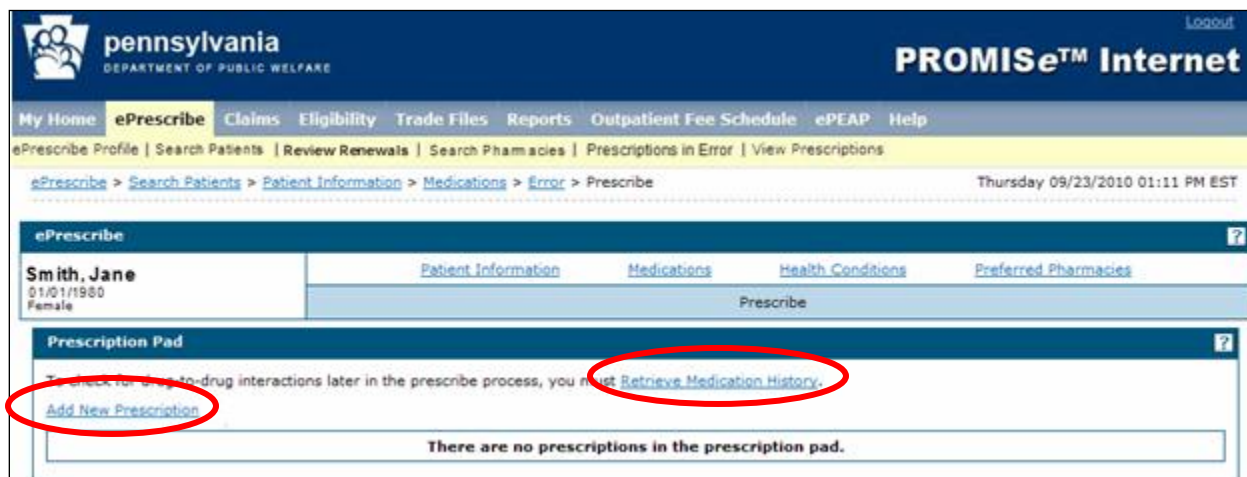
6.1.3 Adding a New Prescription

From this page, you will be able to add the prescriptions for the patient. Once you have completed this process, the **Prescription Pad** will display the prescribed drug.

Click on the **Add New Prescription** link to open the Select Drug page.

Note: If the medication history had not previously been retrieved, it can be retrieved by selecting the **Retrieve Medication History** link on the Prescription Pad. Medication History should be checked with each new prescription.

Note: The pharmacy transaction does not allow for the designation of compound drugs, therefore compound drugs cannot be submitted electronically.



1. Click the **Coverage** field and use the drop down to select the prescription plan you wish to use to obtain the patient's pharmacy benefits and coverage information. A patient may

have multiple pharmacy coverage plans. In this case, as PA Medicaid is a payer of last resort, an alternate coverage should be used for prescribing.

2. In the **Originally Selected Drug** field, enter the medication name or at least the first three characters. The drugs containing the characters entered will appear in a list for selection.
3. Click the **Medication** field and use the drop down to select the strength and dosage information.
4. Click the **Continue** button to proceed to the next step. If the medication has alternatives, such as payer or therapeutic alternatives, the Alternative panel will display. If no Alternatives are available, the application will display any Coverage Limitations identified by the selected coverage payer/PBM.

6.1.4 Advanced Search

Using the Advanced Search feature, you have the option of searching for a medication by either Therapeutic Class or Organ System.

To use this feature, click on the Advanced Search link to the right of **Drug Name**.

The screenshot displays the Pennsylvania Department of Public Welfare's PROMISe Internet ePrescribe interface. The top navigation bar includes 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', 'Hospital Assessment', and 'Help'. The breadcrumb trail shows 'ePrescribe > Search Patients > Patient Information > Prescribe > Select Drug'. The patient information for Jane Smith (DOB: 01/01/1980, Female) is visible. The 'New Prescription: Select Drug' form is the main focus, with a sidebar on the left containing 'Select Drug', 'Alternatives', 'Coverage Limitations', 'SIG/Dispense', and 'Drug Alerts'. The form contains three required fields: '* Coverage' (set to Pennsylvania Department of Public Welfare), '* Drug Name' (Augmentin), and '* Medication' (Augmentin 125 mg-31 mg Chewable Tab). An 'Advanced Search' link is circled in red next to the Drug Name field. 'Continue' and 'Cancel' buttons are at the bottom.

6.1.5 Searching by Therapeutic Class

You can search for medication using the Therapeutic Class. They are medications that are similar in chemical structure, pharmacological effect, and/or clinical use.

The screenshot shows the 'ePrescribe' interface for patient Jane Smith. The 'Advanced Search' section is active, with the 'Therapeutic Class' tab selected. The search criteria are: Therapeutic Class: ACE Inhibitors (ACEIs) Combinations; Subclass: ACE Inhibitor and Calcium Channel Blocker Combinations. The 'Search' button is highlighted.

1. Select the **Therapeutic Class** tab
2. In the **Therapeutic Class** field, enter at least the first three characters of the class. The therapeutic classes containing the characters entered will appear in a list for selection
3. In the **Subclass** field, use the drop down to choose the appropriate selection
4. Click **Search**. The list of appropriate medications displays. They are broken down by Generic and Brand Name
5. Use the radio buttons to select the correct drug and click **Select**

The screenshot shows the 'Search Results' section. It contains a table with two columns: 'Generic Drug' and 'Brand Drug'. The table lists two options: amlodipine-benazepril (Lotrel) and trandolapril-verapamil (Tarka). There are radio buttons next to each option and a 'Select' button at the bottom.

Generic Drug	Brand Drug
<input type="radio"/> amlodipine-benazepril	<input type="radio"/> Lotrel
<input type="radio"/> trandolapril-verapamil	<input type="radio"/> Tarka

6.1.6 Searching by Organ System

You can also perform a search by Organ System. These are groups of organs that work together to carry out a particular task.

The screenshot shows the PROMISe Internet ePrescribe interface. At the top, there is a navigation bar with the Pennsylvania Department of Public Welfare logo and the text "PROMISe™ Internet". Below this is a menu with options: My Home, ePrescribe, Claims, Eligibility, Trade Files, Reports, Outpatient Fee Schedule, ePEAP, Hospital Assessment, and Help. A secondary navigation bar contains links: ePrescribe Profile, Search Patients, Review Renewals, Search Pharmacies, Prescriptions in Error, and View Prescriptions. The breadcrumb trail reads: ePrescribe > Search Patients > Patient Information > Prescribe > Select Drug > Advanced Search. The date and time are Thursday 10/27/2011 09:59 AM EST. The main content area shows the patient information for Jane Smith (DOB: 01/01/1980, Female) and tabs for Patient Information, Medications, Health Conditions, and Preferred Pharmacies. The "Advanced Search" form is active, with the "Organ System" tab selected and circled in red. The form contains three required fields: "Organ System" (set to DURABLE MEDICAL EQUIPMENT), "Pharmacological Class" (set to DIABETIC SUPPLIES), and "Subclass" (set to DIABETIC SUPPLIES). There are "Search" and "Cancel" buttons at the bottom of the form.

1. Select the **Organ System** tab
2. In the **Organ System** field, use the drop down and select the appropriate Organ System
3. In the **Pharmacological Class** field, use the drop down and select the appropriate Pharmacological Class
4. In the **Subclass** field, use the drop down and select the appropriate Subclass
5. Click **Search**. The list of appropriate medications displays. They are broken down by Generic and Brand Name

6. Use the radio buttons to select the correct drug and click **Select**

Advanced Search

Therapeutic Class: Organ System

* Indicates a required field.

*Organ System: DURABLE MEDICAL EQUIPMENT

*Pharmacological Class: DIABETIC SUPPLIES

*Subclass: DIABETIC SUPPLIES

Search **Cancel**

Search Results

Select a drug name then click **Select** to continue the prescription writing process.

Generic Drug	Brand Drug
<input type="radio"/> blood glucose cntl hi & normal	<input type="radio"/> Accu-Chek Comp Blue Cont, M-H
	<input type="radio"/> Assure Dose Norm-Hi Control
	<input type="radio"/> Glucocard 01 Hi-Normal Control
<input type="radio"/> blood glucose control high&low	<input type="radio"/> Accu-Chek Aviva Control Soln
	<input type="radio"/> Accutrend Glucose Control
	<input type="radio"/> Assure Pro Control
	<input type="radio"/> FreeStyle Control
	<input type="radio"/> Microdot High-Low Control
	<input type="radio"/> UltraTRAK High-Low Control
	<input type="radio"/> Victory High, Low Control
<input type="radio"/> blood glucose control high	<input type="radio"/> Acura Control High

Select

6.1.7 Alternatives Page

If there are alternative drugs for the prescribed drug, the **New Prescription: Alternatives** page displays. Here you can select an alternative drug to the originally selected drug.

Note: All payer-specified alternatives will be displayed, regardless of formulary status preference level. Only therapeutic alternatives which have a higher formulary status preference level than the prescribed drug will be displayed.

You can elect to ignore the alternatives and continue the prescription process using the drug you originally selected, select a payer specified alternative, or select a therapeutic alternative if the alternatives types are available.

You can also navigate back to the New Prescription: Select Drug panel by using the left navigation bar.

1. If you do not want to prescribe any of the alternative drugs displayed, click the **Ignore Alternatives** radio button.
2. If you do wish to prescribe an alternative, select the drug by using the drug's radio button.
3. Click the **Continue** to proceed to the next step. The **Coverage Limitations** panel will then display.

Note: PA Medicaid Formulary equates to the current Preferred Drug List (PDL).

Note: Formulary status for all PA Medicaid drugs will indicate On Formulary–Preferred Level 1.

Note: Drugs that are not on the PA Medicaid “formulary” will indicate a formulary status of Non-Reimbursable.

The screenshot shows the 'New Prescription: Alternatives' screen in the PROMISe Internet system. The patient is Jane Smith, and the originally selected drug is Lexapro. The screen displays a list of preferred alternatives for fluoxetine. The 'Ignore Alternatives - use Originally Selected Drug.' option is circled in red.

Payer Specified Alternatives	Formulary Status	Supplied	Co-Pay
<input type="radio"/> fluoxetine 10 mg Cap	On Formulary	Rx	Co-pay tier 1 of 3 Any
<input type="radio"/> fluoxetine 10 mg Tab	On Formulary	Rx	Unknown
<input type="radio"/> fluoxetine 20 mg Cap	On Formulary	Rx	Unknown
<input type="radio"/> fluoxetine 20 mg Tab	On Formulary	Rx	Unknown
<input type="radio"/> fluoxetine 20 mg/5 mL Oral Soln	On Formulary	Rx	Unknown
<input type="radio"/> fluoxetine 40 mg Cap	On Formulary	Rx	Unknown
<input type="radio"/> fluoxetine 60 mg Tab	On Formulary	Rx	Unknown

6.1.8 Coverage Limitation Page

Coverage limitations is a term used by Surescripts to inform the prescriber that the pharmacy benefit manager or payer has drug-specific coverage constraints or requirements. The limits may be patient specific or general and displayed for every patient with that pharmacy benefit.

Surescripts uses specific labels to designate possible payer coverage limits that can occur including the following:

- Product coverage exclusion – Drug not covered. This designation is not applicable to the PA MA Pharmacy program.
- Prior authorization required – Drug is covered but requires prior authorization. This designation is applicable to the PA MA Pharmacy program.
- Medical necessity required –Drug only covered if medical necessity has been validated. This designation is not applicable to the PA MA Pharmacy program.
- Step therapy required – Drug only covered if appropriate step therapy regimen has been followed. This designation is not applicable to the PA MA Pharmacy program.
- Coverage text message – Specific message from payer regarding coverage. Specialty Pharmacy Drugs included in the PA MA Pharmacy program will include a message that they must be dispensed from one of the preferred specialty pharmacies.

Note: The first 25 characters of a message that exceeds 100 characters are displayed followed by a Read More link. When the message text is 100 characters or less, the complete text will be displayed in the coverage limitations panel.

- Step medication – Specific drugs or required number of drugs from the same class must be tried prior to coverage of selected drug.
- Quantity limits – Drug only covered up to certain limits on quantity, fills, dollar amount, or days supply within certain time periods.
- Age limits Drug only covered for patients over a minimum age or under a maximum age.
- Gender limits – Drug only covered for patients of specific gender.
- Resource link – Summary Level – Provides link for more information.
- Resource link – Drug Specific – Provides link for more information on a specific drug.

Note: If the content of the link is provided within the ePrescribe portal, it will be opened in a pop-up page.

Note: If the content of the link is provided outside the ePrescribe portal, it will be opened in a new browser page.

New Prescription: Coverage Limitations

[Select Drug](#)

[Alternatives](#)

Coverage Limitations

[SIG/Dispense](#)

[Drug Alerts](#)

Coverage Pennsylvania Dept of Public Welfare **Formulary Status** Non Formulary Generic

Medication Lisinopril 5 mg Tab **Supplied** Rx

Co-Pay Co-pay tier 3 of 3 Any

Coverage Limitations

- Age limits apply.
- Quantity limits apply.

[Continue](#) [Cancel](#)

1. If additional information regarding the **Coverage Limitations** exists, it will be presented as a hyperlink(s) on the page. To view, you can click on the available link(s).
2. Click the **Continue** button to proceed to the next step. The SIG/Dispense page will then display.

6.1.9 SIG/Dispense Page

Using this page, you enter the directions for drug use, dispensing information and notes to the pharmacist.

All fields are mandatory except the **Comments to the Pharmacist** and **Brand Medically Necessary/Dispense as Written** fields. The contents of the Comments to the Pharmacist field are sent to the pharmacy, but do not display on the prescription label.

New Prescription: SIG/Dispense

Select Drug * Indicates a required field.

Coverage Pennsylvania Dept of Public Welfare Formulary Status Non Formulary Brand

Medication Wellbutrin 100 mg Tab Supplied Rx

Co-Pay Unknown

*Dispense 60 Tablet

Either enter the number of refills or check the PRN indicator.

Refill Qty 0 or Refill as Needed (PRN)

*Days Supply 30 Brand Medically Necessary / Dispense as Written

*SIG 1 twice daily

Please verify that the SIG applies to the Dispense and Days Supply data entered.

*SIG Verified

Comments to Pharmacist

Note: The Comments to Pharmacist will not display on the prescription label.

Continue Cancel

1. In the **Dispense** field, enter the number of units you wish to prescribe and choose the type of unit the drug comes in.
2. In the **Refill Qty** field, enter the number of refills available, or click the **PRN** field to indicate the prescription should be refilled as needed.

Note: The PA Medicaid Pharmacy Program allows prescriptions to be refilled as long as the total authorization does not exceed a 6 months' supply from the time the original prescription was filled.

3. In the **Days Supply** field, enter the number of days the quantity will last for the drug you prescribe.
4. In the **Brand Medically Necessary/Dispense as Written** box, enter a check mark if a generic equivalent cannot be substituted for the brand due to medical reasons.
5. In the **SIG** field, enter any directions for how to use the medication. This field holds up to 140 characters.
6. Check the **SIG Verified** box to indicate the information has been reviewed. If the **Dispense** and/or **Days Supply** data is modified after initial entry, this indicator will be cleared. You must re-check the box to verify the new information has been reviewed (see section 6.1.7).

6.1.11 Submission Type and Pharmacy

From this page, you can view all pending prescriptions on the Prescription Pad, select how the prescription is submitted, and select the pharmacy.

Prescription Pad: Submission Type and Pharmacy

* Indicates a required field.

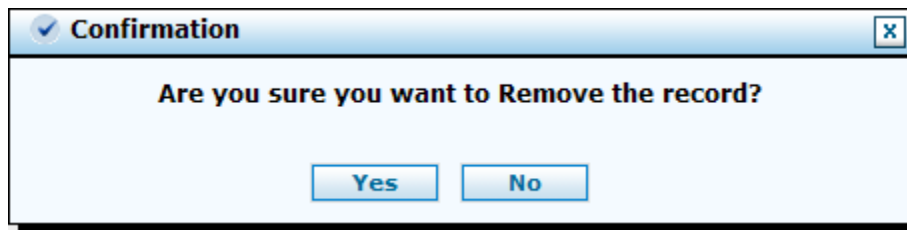
Prescriptions	Action
<p>Lisinopril 5 mg Tab</p> <p>SIG 1 tablet twice a day</p> <p>Dispense 60 Tablet Substitution Allowed</p> <p>Refills 1 Days Supply 30</p> <p>Comments to Pharmacist -</p> <p>*Submission Type Electronic</p> <p>Pharmacy RITE AID-5277 SIMPSON FERRY, 5277 SIMPSON FERRY ROAD, MECHANICSBURG, Pennsylvania</p>	Remove
<p>Vicodin 5 mg-500 mg Tab</p> <p>SIG 1 tablet 4 times a day as needed for pain</p> <p>Dispense 16 Tablet Substitution Allowed</p> <p>Refills 0 Days Supply 4</p> <p>Comments to Pharmacist -</p> <p>This prescription must be printed. It is a Schedule III controlled substance.</p>	Remove

Enter the four digit PIN, and click Submit Prescription Pad to proceed.

*PIN [] [Submit Prescription Pad](#) [Return to Prescription Pad](#)

1. Confirm all prescription information is accurate.

Click the **Remove** link if you want to remove one or more of the drugs prescribed. A message will display to verify you would like to remove the record. A message will display to verify you would like to remove the record.



2. In the **Submission Type** field, select the preferred submission type. This is where you would select **Paper** if you choose to have the patient hand carry the prescription.

Note: If you choose Electronic for the submission type you will not be able to print the prescription in paper format.

3. In the **Pharmacy** field, select the pharmacy you would like the prescription sent to. If you have entered a primary preferred pharmacy in the patient's profile, it will populate, although you can choose another pharmacy if needed.
4. In the **PIN** field, enter the four (4) digit prescriber PIN you established during registration for ePrescribing.
5. Click the **Submit Prescription Pad** button to submit the prescription for confirmation.

Note: It is possible to enter five (5) prescriptions on the prescription pad prior to submitting the prescription pad for processing.

6. If you wish to return to the Prescription Pad, click on the **Return to Prescription Pad** button, where you can add or remove additional prescriptions.

If the drug is classified as a **controlled substance**, you will not be able to submit the prescription electronically. In this case, the Submission Type and Pharmacy fields will not display. You will only have the option to print.

1. Confirm all prescription information is accurate. You will see a message stating, “This prescription must be printed. It is a Schedule Controlled Substance”.
2. In the **PIN** field, enter the 4 digit PIN you established during registration for ePrescribing.
3. Click the **Submit Prescription Pad** button to submit the prescription. You will be asked to confirm the prescription before it is electronically transmitted.
4. If you wish to return to the Prescription Pad, click on the **Return to Prescription Pad** button, where you can add or remove additional prescriptions.

Prescription Pad: Confirmation [?]

Prescriptions

Lisinopril 5 mg Tab
SIG 1 tablet twice a day
Dispense 60 Tablet Substitution Allowed
Refills 1 Days Supply 30
Comments to Pharmacist -
Submission Type Electronic
Pharmacy RITE AID-5277 SIMPSON FERRY, 5277 SIMPSON FERRY ROAD, MECHANICSBURG, Pennsylvania 170553515, Office 1-717-766-2533
Prescriber John Doe, D.O., 444 Walnut St, Harrisburg, PA 17110, Office 1-717-555-9990

Vicodin 5 mg-500 mg Tab
SIG 1 tablet 4 times a day as needed for pain
Dispense 16 Tablet Substitution Allowed
Refills 0 Days Supply 4
Comments to Pharmacist -
Prescriber John Doe, D.O., 444 Walnut St, Harrisburg, PA 17110, Office 1-717-555-9990

This prescription must be printed. It is a Schedule III controlled substance.

Confirm Prescription Pad **Cancel Confirmation**

If the drug is classified as **Brand Medically Necessary** (BMN), you will not be able to submit the prescription electronically. In this case, the Submission Type and Pharmacy fields will not display. You will only have the option to Print Preview.

ePrescribe ?

Smith, Jane
01/01/1980
Female

[Patient Information](#) [Medications](#) [Health Conditions](#) [Preferred Pharmacies](#)

Prescribe (1)

Prescription Pad: Submission Type and Pharmacy ?

* Indicates a required field.

Prescriptions	Action
<p>Xopenex HFA 10mCi Inhaler</p> <p>SIG Puff as needed</p> <p>Dispense 1 Inhaler Substitution Not Allowed</p> <p>Refills 1 Days Supply 30</p> <p>Comments to one Pharmacist</p> <p>This prescription is designated as brand medically necessary and therefore must be printed and handed to the patient.</p>	<p>Print Preview</p>

Enter the four digit PIN, and click Submit Prescription Pad to proceed.

*PIN [Submit Prescription Pad](#) [Return to Prescription Pad](#)

1. Select **Print Preview**
2. Print the prescription and give to the patient
3. Click **Submit Prescription Pad**

6.1.12 Confirmation of the Prescription Pad

Once you click submit on the prescription pad, prescriptions (up to five) will display on the Prescription Pad. You will need to review each prescription for accuracy before you confirm.

Note: If there is more than one prescription on the confirmation page, Confirm or Cancel will apply to all prescriptions. If the Cancel Confirmation button is used, you are returned to the Prescription Pad: Submission Type and Pharmacy page. Here you have the option to return to the Prescription Pad: SIG/Dispense page to alter any of the individual prescriptions.

The screenshot shows the 'ePrescribe' section of the PROMISe Internet interface. The patient is Jane Smith, DOB 01/01/1980, Female. The prescription is for Augmentin 125 mg-31.25 mg Chewable Tab. The SIG is '1 tablet Q 8 hours until gone'. Dispense is 30 Tablets, Refills are 1, and Days Supply is 90. The pharmacy is CVS Pharmacy # 1630, 1116 CARLISLE RD., CAMP HILL, Pennsylvania 17011. The prescriber is Alan Smith D.O., 555 Anywhere Street, Camp Hill, PA 17011. At the bottom of the confirmation box, there are two buttons: 'Confirm Prescription Pad' and 'Cancel Confirmation'.

1. Click the **Confirm Prescription Pad** button to process the electronic prescription. A message will display stating the prescription is processing. When it completes, you will be redirected to the Transmission Status page.

The screenshot shows a message box titled 'Prescription Pad: Processing Prescriptions'. It contains a circular loading icon and the text: 'Processing your prescriptions... Please do not close, stop, or refresh the page and do not use the browser "Back" button until you receive confirmation that your prescriptions have been processed successfully.'

2. Click the **Cancel Confirmation** button if you would like to cancel the prescription. You will be redirected back to the Prescription Pad. At this point in the process, you cannot modify the prescription.

6.1.13 Transmission Status

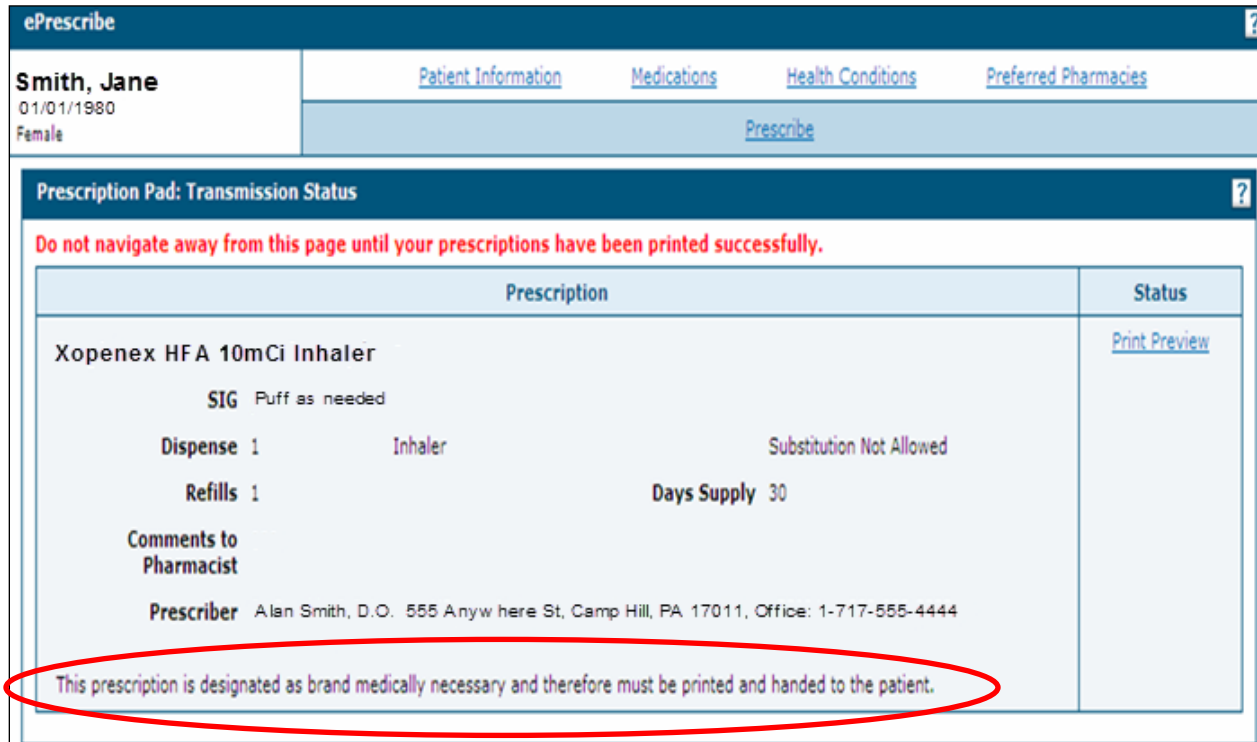
From this page, you will be able to check the status of the prescriptions you submitted. The status types are:

The following will display, indicating the status of the medication being transmitted.

- Pending – The prescription is being processed, but is not yet complete.
- Accepted – The prescription has been successfully transmitted and received by the pharmacy.
- Error – There was an error in the transmission of the file. This condition requires reviewing the medication details and resubmitting the prescription.
- Print Preview – The prescription, generally a controlled substance or Brand Medically Necessary drug, needs to be printed.
- Printed – The prescription, generally a controlled substance or Brand Medically Necessary drug, has been printed. It should be manually signed and given to the patient to be hand carried to the pharmacy.

Prescription Pad: Transmission Status		?
Do not navigate away from this page until your prescriptions have been printed successfully.		
Prescription	Status	
<p>Lisinopril 5 mg Tab</p> <p>SIG 1 tablet twice a day</p> <p>Dispense 60 Tablet Substitution Allowed</p> <p>Refills 1 Days Supply 30</p> <p>Comments to Pharmacist _</p> <p>Submission Type Electronic</p> <p>Pharmacy RITE AID-5277 SIMPSON FERRY, 5277 SIMPSON FERRY ROAD, MECHANICSBURG, Pennsylvania 170553515, Office 1-717-766-2533</p> <p>Prescriber John Doe, D.O., 444 Walnut St, Harrisburg, PA 17110, Office 1-717-555-9990</p>	<p>Accepted</p>	
<p>Vicodin 5 mg-500 mg Tab</p> <p>SIG 1 tablet 4 times a day as needed for pain</p> <p>Dispense 16 Tablet Substitution Allowed</p> <p>Refills 0 Days Supply 4</p> <p>Comments to Pharmacist _</p> <p>Prescriber John Doe, D.O., 444 Walnut St, Harrisburg, PA 17110, Office 1-717-555-9990</p> <p>This prescription must be printed. It is a Schedule III controlled substance.</p>	<p>Print Preview</p>	

For a drug that is **Brand Medically Necessary**, the following message will display. The prescription would need to be printed and given to the patient.



ePrescribe

Smith, Jane
01/01/1980
Female

[Patient Information](#) [Medications](#) [Health Conditions](#) [Preferred Pharmacies](#)

[Prescribe](#)

Prescription Pad: Transmission Status

Do not navigate away from this page until your prescriptions have been printed successfully.

Prescription	Status
<p>Xopenex HFA 10mCi Inhaler</p> <p>SIG Puff as needed</p> <p>Dispense 1 Inhaler Substitution Not Allowed</p> <p>Refills 1 Days Supply 30</p> <p>Comments to Pharmacist</p> <p>Prescriber Alan Smith, D.O. 555 Anywhere St, Camp Hill, PA 17011, Office: 1-717-555-4444</p> <p><i>This prescription is designated as brand medically necessary and therefore must be printed and handed to the patient.</i></p>	<p>Print Preview</p>

Note: Do not navigate away from this page until the prescriptions are successfully printed. If you accidentally navigate away from the page prior to printing the prescription, the record will be stored with a status of “Printed”. If this happens, you will have to manually write a prescription.

Note: The Print Preview link will be available if you chose paper as your submission method, if you prescribed a controlled substance, or if the drug was designated as Brand Medically Necessary.

Note: Prescriptions that are printed and given to the patient have several tamper-resistant features, including bordered and spelled quantities and a microprint signature line that displays 'HPERX' that can be seen when viewed at 5x or greater magnification. It is not necessary for the prescriber to print using special paper.

Date Written 10/27/2011	
Doctor Alan Smith D.O.	Patient Smith, Jane
Location Downtown Clinic	Birth Date 01/01/1980
Pharmacy Inquiries 1-717-555-6556	Address 555 Elm St Harrisburg, PA 17109
Facsimile 1-717-555-6557	Home 1-717-555-9999

Medication Vicodin 5 mg-500 mg Tab	Substitution Allowed
SIG 1 by mouth every 4 hours as needed for pain	
Days Supply 4	
Dispense ***16*** SIXTEEN Tablets	
Refills ***0*** ZERO	
Comments to Pharmacist	

Security features include: (*) bordered and spelled quantities, microprint signature line visible at 5x or > magnification that must show 'HPERX', and this description of features.

Signature

MD123456789

License #

CW99999999

DEA #

987654321

NPI

[Print](#) [Close](#)

Note: Please verify your License number, DEA number (if prescribing a controlled substance), and NPI. Sign the printed prescription.

Note: For best results, we recommend the use of a printer that can support 1200 by 1200 dpi (dots-per-inch) for all printed prescriptions.

Note: Be sure to print the prescription for the controlled substance or Brand Medically Necessary drug before closing the Print Prescription page. If you close the page without printing the prescription, you will not be able to print the prescription later.

Prescription Pad: Transmission Status		?
Do not navigate away from this page until your prescriptions have been printed successfully.		
Prescription	Status	
<p>Lisinopril 5 mg Tab</p> <p>SIG 1 tablet twice a day</p> <p>Dispense 60 Tablet Substitution Allowed</p> <p>Refills 1 Days Supply 30</p> <p>Comments to Pharmacist _</p> <p>Submission Type Electronic</p> <p>Pharmacy RITE AID-5277 SIMPSON FERRY, 5277 SIMPSON FERRY ROAD, MECHANICSBURG, Pennsylvania 170553515, Office 1-717-766-2533</p> <p>Prescriber John Doe, D.O., 444 Walnut St, Harrisburg, PA 17110, Office 1-717-555-9990</p>	Accepted	
<p>Vicodin 5 mg-500 mg Tab</p> <p>SIG 1 tablet 4 times a day as needed for pain</p> <p>Dispense 16 Tablet Substitution Allowed</p> <p>Refills 0 Days Supply 4</p> <p>Comments to Pharmacist _</p> <p>Prescriber John Doe, D.O., 444 Walnut St, Harrisburg, PA 17110, Office 1-717-555-9990</p> <p>This prescription must be printed. It is a Schedule III controlled substance.</p>	Printed	

Note: After the paper prescription has printed, the status will change from Print Preview to Printed.

7 Prescriptions in Error

You can view prescriptions that were not successfully processed. Some possible causes that may prevent a successful transaction are communication errors during transmission or errors on the receiver's end.

In the event an error is encountered, you can print the prescription to finalize it, or remove the prescription from the list.

prescriptions in Error

Listed below are all the new prescriptions that have been submitted but not processed successfully. These requests were not processed successfully due to either a communication error or an error on the receiver's end. Either print these prescriptions in order to finalize them manually or remove them entirely from the list.

Do not navigate away from this page until your prescriptions have been printed successfully. Once a prescription has been printed, it must also be manually removed from the list.

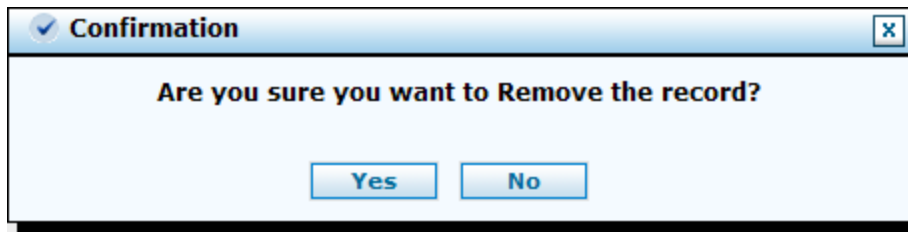
Click the respective prescription link to view prescription details; click the link again to hide the details.

Total Errors: 6
New Errors: 0

Date Written ▼	Patient	Prescription	Action
08/24/2010	Smith, John	Tri-Luma 0.01 %-4 %-0.05 % Topical Cream	Print Preview Remove
08/24/2010	Smith, John	Tri-Luma 0.01 %-4 %-0.05 % Topical Cream	Print Preview Remove

1 2 ...

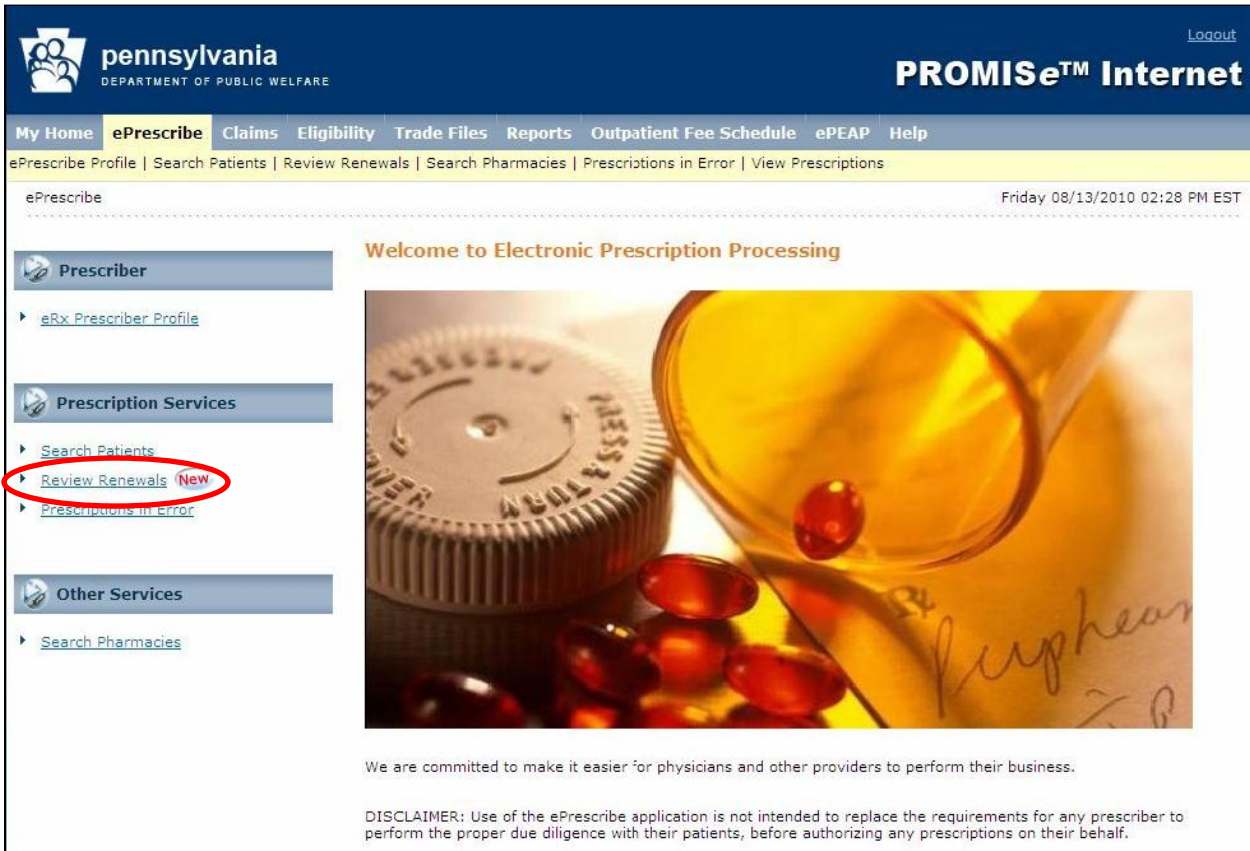
[Cancel](#)



4. Click the **Cancel** button if you don't want to make any changes

8 Renewal Requests

Pharmacies can initiate requests regarding prescription renewals/refills. Prescribers will be able to respond to those requests via the PROMISe™ ePrescribing application. You can review these renewal requests, select a patient for inclusion in the response to the renewal request, view the prescription details and modify the number of refills approved, approve the renewal request, deny the renewal request, or deny and write a new prescription. You can also add a patient if the patient is not listed in the Select Patient panel. New renewals are indicated on the ePrescribe page.



The screenshot displays the Pennsylvania Department of Public Welfare's PROMISe™ Internet ePrescribe application. The header includes the state logo and the text 'pennsylvania DEPARTMENT OF PUBLIC WELFARE' and 'PROMISe™ Internet'. A navigation bar contains links for 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. Below this is a secondary navigation bar with links for 'ePrescribe Profile', 'Search Patients', 'Review Renewals', 'Search Pharmacies', 'Prescriptions in Error', and 'View Prescriptions'. The main content area features a 'Welcome to Electronic Prescription Processing' message and a large image of a glass vial with red capsules and a pill bottle cap. A sidebar on the left contains three main sections: 'Prescriber' with a link to 'eRx Prescriber Profile'; 'Prescription Services' with links for 'Search Patients', 'Review Renewals (New)', and 'Prescriptions in Error'; and 'Other Services' with a link to 'Search Pharmacies'. The 'Review Renewals (New)' link is circled in red. Below the image is a commitment statement: 'We are committed to make it easier for physicians and other providers to perform their business.' and a disclaimer: 'DISCLAIMER: Use of the ePrescribe application is not intended to replace the requirements for any prescriber to perform the proper due diligence with their patients, before authorizing any prescriptions on their behalf.'

Renewal requests are classified into three Type categories: **New, Duplicate, or Error.**

Any recent additions to the renewal work list will be indicated with **New**. A tally of the number of new additions is displayed above the work list.

A **Duplicate** renewal request is identified as having the same pharmacy and the same internal reference number as another refill request on your list of renewals. If you respond to a request that is identified as a Duplicate, all duplicates of that renewal request will be removed from the worklist. Duplicates may occur if the pharmacy does not get an immediate or timely response, and they initiate the request again.

A renewal request with an **Error** icon indicates that a request you previously responded to received a delayed error during processing. For renewals marked as errors, click on the medication link. You will then receive a message that the system was unable to process the

renewal. You will need to contact the requesting pharmacy to provide a response. Once the pharmacy has been contacted, click on the radio button to indicate you have responded to the pharmacy and click Submit. That will remove the renewal from your renewal worklist.

If the response to the renewal request transaction is successfully submitted, the Renewal Requests page will display and the renewal will no longer be listed on the worklist. If the transaction encounters an error, the Renewal Requests page displays and an Error icon will display next to the request on the worklist. In this case, you will need to contact the pharmacy to respond to the renewal.

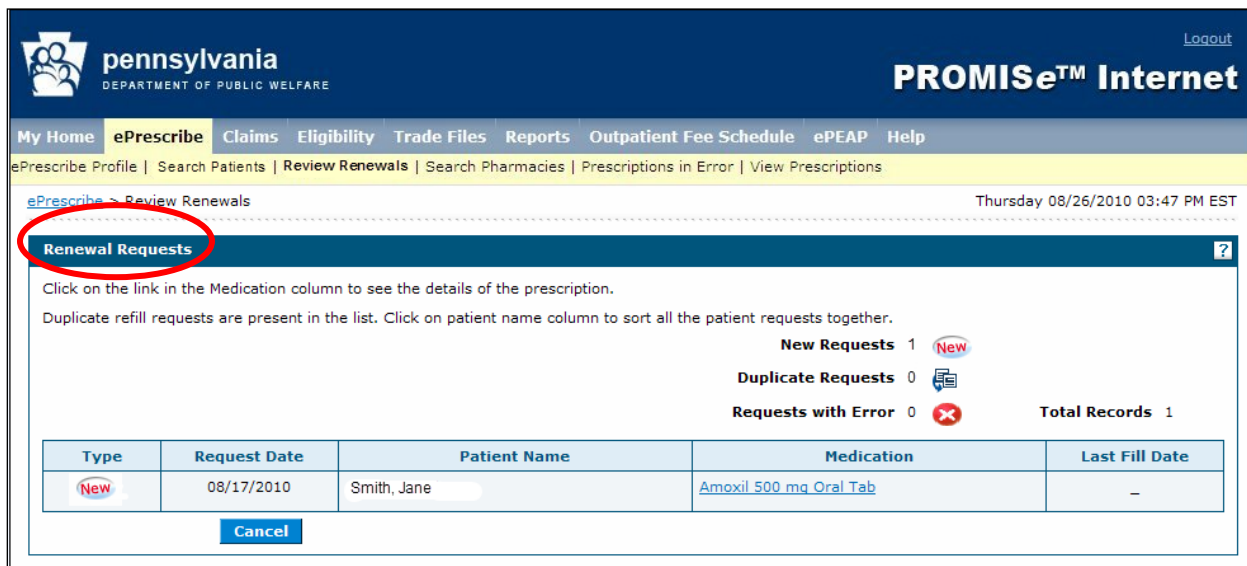
For Controlled Substances, when the Approval Renewal option is selected and the transmission is successful or is pending, the Print Prescription page displays so you can print the prescription renewal for the controlled substance since it cannot be sent electronically.

Successful renewal requests, those responded to from the details view of the Renewal Request page, will be removed from the worklist.

You can view all the renewal requests by request date order from the most recent request to the oldest request and view the details of those requests. You can also sort the renewal requests by patient name so you can view all the renewal requests per patient. Icons will display in the Type field to help you quickly identify renewal requests that are New, Duplicate, or in Error.

8.1 View a Renewal Request's Details

You can view your **Renewal Request** worklist. The following renewal information is presented: Type, Request Date, Patient Name, Medication and Last Fill Date.



The screenshot shows the Pennsylvania Department of Public Welfare's PROMISe Internet interface. The 'Renewal Requests' section is highlighted with a red circle. The interface includes a navigation menu with options like 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAP', and 'Help'. The 'Review Renewals' link is selected. The main content area displays a summary of renewal requests: 1 New Request, 0 Duplicate Requests, and 0 Requests with Error, totaling 1 record. Below this is a table with columns for Type, Request Date, Patient Name, Medication, and Last Fill Date. A single record is shown for a 'New' request on 08/17/2010 for Jane Smith, with the medication 'Amoxil 500 mg Oral Tab' and a last fill date of '-'. A 'Cancel' button is located at the bottom of the table.

Type	Request Date	Patient Name	Medication	Last Fill Date
New	08/17/2010	Smith, Jane	Amoxil 500 mg Oral Tab	-

The medication information includes: drug name, strength, and dosage form followed by the number dispensed, number of refills or PRN (refill as needed), and number of days supply.

8.1.1 Sort the Renewal Requests

You can sort through the patients listed on the **Renewal Request** worklist.

In the Search Results panel, click **Patient Name** to sort the renewals in patient name order or **Request Date** to sort by the date the renewal was written.

The search results display in the sort order selected. You can click on the link for the medication to see the details of the renewal request.

Renewal Requests



Click on the link in the Medication column to see the details of the prescription.

New Requests 5

Duplicate Requests 0

Requests with Error 2

Total Records 38

Type	Request Date ▼	Patient Name	Medication	Last Fill Date
	01/28/2011	Jones, Bob	Amoxil 500 mg Oral Tab	-
	01/28/2011	Brown, Bill	Amoxil 500 mg Oral Tab	-
	01/28/2011	Jones, Diane	Amoxil 200 mg Oral Tab	-
	01/27/2011	Smith, Jane	Amoxil 500 mg Oral Tab	-
	01/27/2011	Peters, Sam	Amoxil 500 mg Oral Tab	-
	01/25/2011	Brown, Bill	Xanax 1 mg Tab	-
	01/24/2011	Smith, William	Amoxil 500 mg Oral Tab	-
	01/24/2011	Smith, John	Amoxil 500 mg Oral Tab	-
	01/24/2011	Brown, Sarah	Amoxil 500 mg Oral Tab	-
	01/24/2011	Jones, Bob	Xanax 1 mg Tab	-

... 3 4

Cancel

8.2 Approve a Renewal Request

If the renewal is appropriate, this page allows the renewal to be processed and transmitted to the pharmacy.

Note: The PROMIS^e™ ePrescribe application does not automatically check eligibility as part of the renewal approval process. Prescribers are encouraged to select the patient profile to review coverage prior to approving renewal requests.

Note: This application does not validate if a Prior Authorization must be obtained from PA Medicaid. Prescribers are encouraged to review PA Medicaid guidelines prior to approving renewal requests.

To access this page, select the medication link on the **Renewal Request** page.

The screenshot displays the 'Renewal Request Details' page in the PROMIS^e Internet application. The page header includes the Pennsylvania Department of Public Welfare logo and the application name. The navigation menu shows 'ePrescribe' as the active section. The breadcrumb trail is 'ePrescribe > Review Renewals > Renewal Request Details'. The page title is 'Renewal Request' with a help icon. The patient information is circled in red: Patient: Jane Smith, 555 Elm St, Harrisburg, PA 17109; Birth Date: 01/01/1980; Gender: Female; Pharmacy: CVS Pharmacy # 1630, 1116 Carlisle Rd, Camp Hill, PA 17011, Office 1-717-612-5067. Below this is a 'Select Patient' section with a message: 'The following patient(s) match the last name, birth date, and gender for the patient listed on the renewal request, please select the patient you would like to include in your response to the pharmacy. If you need to add a new patient, go to the Add Patient page.' A single patient is listed: Jane Smith, 555 Elm St, Harrisburg, PA 17109, Birth Date: 01/01/1980, Gender: Female. The 'Prescription Details' section shows: Medication: Amoxil 500 mg Oral Tab; Dispense: 40 Tablet; Substitution: NA; SIG: Take 2 Tablet(s) By Oral Route BID; Message: _; Total Dispensings Approved: [checkbox]; Date Written: 09/15/2010; Days Supply: 0. The 'Prescriber's Response to Pharmacy' section includes instructions: 'Submit sends your response to the pharmacy. Upon successful completion, the item is deleted from the worklist and you are returned to the worklist. If the Deny Renewal option is chosen, either Comments to the Pharmacist field or the Denial Reason dropdown must be entered.' There are three radio button options: 'Approve Renewal' (selected), 'Deny Renewal', and 'Deny Renewal-Write New Prescription'. A 'Denial Reason' dropdown menu is present. A text field for 'Comments to the Pharmacist' is also shown. A disclaimer states: 'Please note that formulary, coverage and drug alerts will not be checked.' At the bottom, it says: 'Enter the four digit PIN, and click Submit to submit the response.' There is a note: '* Indicates a required field.' and a PIN input field with a 'Submit' button and a 'Cancel' button.

1. Review the patient and pharmacy selection.
2. Select the patient for the renewal request. If it is for a new patient click the link for **Add Patient**.

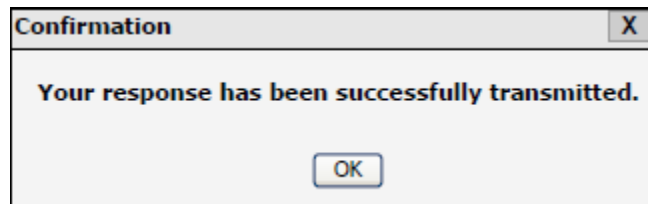
Note: For current patients whose original prescriptions were written on paper, it will be necessary to “add a patient” so the renewal can be done electronically.

3. Review the prescription details and modify the **Total Dispensings Approved** if necessary.


Note: The amount in the Total Dispensing Approved field includes the current fill and any future refills associated with the renewal request.

4. Confirm that **Approve Renewal** is selected.
5. Enter your four (4) digit **prescriber PIN**.
6. Click **Submit** to approve the renewal request and send your response to the pharmacy.

A confirmation dialog box will display.



7. Click **OK** to confirm the successful transmission of the renewal request.
8. In the event of a transmission failure, you will need to contact the pharmacy directly to approve the renewal. Clicking the radio button for **Response provided to pharmacy** will remove the medication from your renewal work list.


pennsylvania
 DEPARTMENT OF PUBLIC WELFARE

Logout

PROMISe™ Internet

[My Home](#) | [ePrescribe](#) | [Claims](#) | [Eligibility](#) | [Trade Files](#) | [Reports](#) | [Outpatient Fee Schedule](#) | [ePEAP](#) | [Help](#)

[ePrescribe Profile](#) | [Search Patients](#) | [Review Renewals](#) | [Search Pharmacies](#) | [Prescriptions in Error](#) | [View Prescriptions](#)

[ePrescribe](#) > [Review Renewals](#) > Renewal Request Details Friday 08/27/2010 02:41 PM EST

Renewal Request ?

Patient Jane Smith, 555 Elm St, Harrisburg, PA 17109	Birth Date 01/01/1980	Gender Female
Pharmacy CVS Pharmacy # 1630, 1116 Carlisle Rd, Camp Hill, PA 17011 Office 1-717-612-5067		

Select Patient

The following patient(s) match the last name, birth date, and gender for the patient listed on the renewal request, please select the patient you would like to include in your response to the pharmacy. If you need to add a new patient, go to the [Add Patient](#) page.

<input checked="" type="radio"/> Jane Smith, 555 Elm St, Harrisburg, PA 17109	Birth Date 01/01/1980	Gender Female
---	------------------------------	----------------------

Prescription Details

Medication Albuterol 100 mcg Inhaler	Total Dispensings Approved <input type="text" value="2"/>
Dispense 1 Inhaler	Date Written 04/01/10
Substitution Substitution not allowed by Prescriber	Days Supply 90
SIG Take 1 or 2 puffs every 6 hours as needed	
Message Patient indicated to pharmacy that they took their last dose of Albuterol last week.	

Prescriber's Response to Pharmacy

Unable to process this renewal.

Please contact the requesting pharmacy to provide a response to this request.

To remove this request from your renewal worklist, select 'Response provided to pharmacy' and proceed to submit.

Response provided to pharmacy

Enter the four digit PIN, and click Submit to submit the response.

* Indicates a required field.

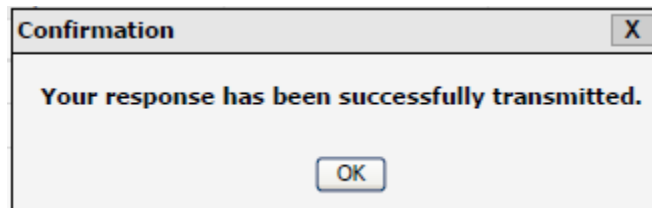
*PIN

8.3 Deny a Renewal Request

From this page, you will be able to deny a renewal request.

Note: If the renewal request is for a controlled substance, only the deny option will be available.

- No attempt will be made to obtain Prior Authorization
 - Patient has not picked up prescription, drug returned to stock
 - Patient has picked up partial fill of prescription
 - Patient has picked up prescription
 - Patient has requested refill too soon
 - Patient needs appointment
 - Patient never under Prescriber's care
 - Patient no longer under Prescriber's care
 - Patient should contact Prescriber first
 - Patient unknown to Prescriber
 - Prescriber not associated with this practice or location
 - Refill not appropriate
 - Request already responded to by other means (e.g. phone or fax)
6. Enter your four (4) digit **Personal Identification Number (PIN)**
 7. Click **Submit** to deny the renewal request.
 8. A confirmation dialog box will display.



9. Click **OK** to confirm the denial of the renewal request.

8.3.1 Deny a Renewal Request and Write a New Prescription

This page is used if a renewal is denied and you want to write a different prescription for the patient.

The screenshot shows a web form titled "Renewal Request" with a help icon. It is divided into several sections:

- Patient Information:** Patient: Smith, Jane, 555 Elm St, Harrisburg, PA 17110; Birth Date: 01/01/1980; Gender: Female; Pharmacy: CVS Pharmacy #1630, 1116 Carlisle Rd Camp Hill, PA 17011; Office: 1-717-612-5067.
- Select Patient:** A message states: "The following patient(s) match the last name, birth date, and gender for the patient listed on the renewal request, please select the patient you would like to include in your response to the pharmacy. If you need to add a new patient, go to the Add Patient page." A radio button is selected for "Jane Smith, 555 Elm St, Harrisburg, PA 17110" with Birth Date 01/01/1980 and Gender Female.
- Prescription Details:** A note says "This prescription must be printed. It is a Schedule III-V controlled substance." Medication: Xanax 2 mg Tab; Dispense: 30 Tablet; Substitution: NA; SIG: Take 1 tab(s) orally once a day (at bedtime); Message: Patient would like to pick up the medication next day. Total Dispensings Approved: 1; Date Written: 09/21/2010; Days Supply: 0.
- Prescriber's Response to Pharmacy:** Instructions: "Submit sends your response to the pharmacy. Upon successful completion, the item is deleted from the worklist and you are returned to the worklist. If the Deny Renewal option is chosen, either Comments to the Pharmacist field or the Denial Reason dropdown must be entered. The renewal request does not specify if substitutions are permitted, therefore, you should send a new prescription and indicate whether substitutions are allowed. This renewal request was received without a license number, therefore, the only allowable response options are to either deny the request or deny the request and create a new prescription." Options: "Deny Renewal" (radio button) and "Deny Renewal-Write New Prescription" (radio button, selected). A red oval highlights the "Deny Renewal-Write New Prescription" option and a warning message: "If you choose to deny this renewal and write a new prescription, the prescription(s) on your prescription pad that are currently in progress will be cleared." A "Denial Reason" dropdown menu is present. A "Comments to the Pharmacist" field contains the text "A license number is required for a renewal request". A disclaimer states: "Please note that formulary, coverage and drug alerts will not be checked." A note says: "Enter the four digit PIN, and click Submit to submit the response." A legend indicates "* Indicates a required field." There is a "*PIN" field, a "Submit" button, and a "Cancel" button.

1. Review the patient and pharmacy selection.
2. **Select the patient** for the renewal request.
3. Review the prescription details.
4. Click **Deny Renewal-Write New Prescription**.

Note: If you choose to deny a renewal and write a new prescription, any prescriptions on your prescription pad that are in progress will be cleared

5. A confirmation will display to verify you wish to write a new prescription.
6. The **Patient Information** page displays so you can view their pharmacy eligibility and then click **Prescribe** proceed to the Prescription Pad to write a new prescription.

8.3.2 Deny a Renewal Due to License Number

PA Medicaid prescriptions require the prescriber's state license number. Refill Renewals are considered prescriptions, therefore PA Medicaid renewal requests require the prescriber's state license number be contained in the transaction from the pharmacy. If the license number is not present or is invalid, the system will present options for the prescriber to deny the renewal or deny and issue a new prescription.

Check the box **Deny Renewal** and place a comment to the pharmacist.

Renewal Request

Patient Jane Smith, 555 Elm St, Harrisburg, PA 17109 **Birth Date** 01/01/1980 **Gender** Female

Pharmacy CVS Pharmacy #1630, 1116 Carlisle Rd, Camp Hill, PA 17011
Office: 717-671-5067

Select Patient

The following patient(s) match the last name, birth date, and gender for the patient listed on the renewal request, please select the patient you would like to include in your response to the pharmacy. If you need to add a new patient, go to the [Add Patient](#) page.

Jane Smith, 555 Elm St, Harrisburg, PA 17109 **Birth Date** 01/01/1980 **Gender** Female

Prescription Details

Medication Amoxil 500mg Oral Tab	Total Dispensings Approved 2
Dispense 40 Tablet	Date Written 11/15/2010
Substitution Substitution Allowed	Days Supply 40
SIG 1 tablet every 24 hours orally	
Message The patient requesting for a refill.	

Prescriber's Response to Pharmacy

Submit sends your response to the pharmacy. Upon successful completion, the item is deleted from the worklist and you are returned to the worklist.

If the Deny Renewal option is chosen, either Comments to the Pharmacist field or the Denial Reason dropdown must be entered.

This renewal request was received without a license number, therefore, the only allowable response options are to either deny the request or deny the request and create a new prescription.

Deny Renewal **Denial Reason**

Deny Renewal-Write New Prescription

Comments to the Pharmacist

Disclaimer: Please note that formulary, coverage and drug alerts will not be checked.

Enter the four digit PIN, and click Submit to submit the response.

* Indicates a required field.

*PIN

Prescriber's Response to Pharmacy

Submit sends your response to the pharmacy. Upon successful completion, the item is deleted from the worklist and you are returned to the worklist.

If the Deny Renewal option is chosen, either Comments to the Pharmacist field or the Denial Reason dropdown must be entered.

This renewal request was received without a license number, therefore, the only allowable response options are to either deny the request or deny the request and create a new prescription.

Deny Renewal **Denial Reason**

Deny Renewal-Write New Prescription

Comments to the Pharmacist

Disclaimer: Please note that formulary, coverage and drug alerts will not be checked.

Enter the four digit PIN, and click Submit to submit the response.

* Indicates a required field.

*PIN

8.4 Fatal Errors

In some cases, a transaction may experience a fatal error preventing it from being processed.

The errors are:

- 600 – Communication Error – try again later
- 601 – Receiver unable to process – do not retry
- 602 – Receiver System Error – try again later
- 900 – Transaction rejected – do not retry

Errors 601 and 900 will display the renewal error message. For these errors, you must contact the pharmacy directly to resolve.

Errors 600 and 602 will allow you to reply to the renewal again.

9 View Prescriptions

Using the PROMIS^e™ ePrescribing application, prescribers are able to view all prescriptions and renewals that they prescribed or took action upon. You can view the following prescription information: patient name, date written, medication, prescription type, and the prescription's transmission status.

The medication information includes: drug name, strength, and dosage form followed by the number dispensed, number of refills or PRN (refill as needed), and number of days supply.

The screenshot displays the PROMIS^e Internet interface. At the top, the Pennsylvania Department of Public Welfare logo is on the left, and the 'Logout' link is on the right. The main header reads 'PROMIS^e™ Internet'. Below this is a navigation bar with tabs for 'My Home', 'ePrescribe', 'Claims', 'Eligibility', 'Trade Files', 'Reports', 'Outpatient Fee Schedule', 'ePEAR', and 'Help'. The 'ePrescribe' tab is active, and a sub-menu below it lists 'ePrescribe Profile', 'Search Patients', 'Review Renewals', 'Search Pharmacies', 'Prescriptions in Error', and 'View Prescriptions', which is circled in red. The page content shows a breadcrumb trail 'ePrescribe > View Prescriptions' and the date 'Friday 08/13/2010 03:48 PM EST'. A 'View Prescriptions' form is displayed, containing instructions: 'View previous prescriptions including renewals, patient information and prescription status. Click Search to accept the default search dates or enter appropriate From and To dates and click Search.' Below the instructions, there is a note '* Indicates a required field.' and two date input fields: '*From Date' with the value '07/14/2010' and '*To Date' with the value '08/13/2010'. At the bottom of the form are 'Search' and 'Cancel' buttons.

1. Enter the **From Date** by selecting it from the calendar, or accepting the default date displayed. The From Date is a past date where you want to start searching for the previous prescriptions.

Note: The default From Date is 30 days prior to the current date.

2. Enter the **To Date**, select it from the calendar, or accept the default date displayed. The To Date is populated with today's date.
3. Click **Search** to search for the previous prescriptions.
4. The **Search Results** panel displays with the prescriptions that match the selected dates. If you do not find the prescription you are looking for, enter a narrower date range.

The screenshot shows the Pennsylvania Department of Public Welfare's PROMISe Internet ePrescribe interface. The 'View Prescriptions' section includes a search form with 'From Date' (08/21/2010) and 'To Date' (09/20/2010) fields, and 'Search' and 'Cancel' buttons. Below the form, a red message states: 'The number of results exceed the maximum number that can be displayed. Refine the search criteria for more specific results.' The 'Search Results' section is circled in red and contains a table with 5 columns: Patient Name, Date Written, Medication (Dispensed / Refills / Days Supply), Type, and Transmission Status. The table lists three prescriptions for John Brown, Jane Brown, and John Smith.

Patient Name ▲	Date Written	Medication Dispensed / Refills / Days Supply	Type	Transmission Status
Brown, John	08/31/2010	Zoloft 50 mg Tab 30 / 3 / 30	New	Printed
Brown, Jane	08/24/2010	Lantus 100 unit/mL Sub-Q 10 / 2 / 10	New	Accepted
John Smith	08/26/2010	Lisinopril 10 mg Tab 4 / 4 / 4	New	Error

The following is a list of the possible transmission statuses, indicating the status of the medication being transmitted.

- Pending – The prescription is being processed, but is not yet complete.
- Accepted – The prescription has been successfully transmitted and received by the pharmacy.
- Error – There was an error in the transmission of the file. This condition requires reviewing the medication details and resubmitting the prescription.
- Printed – The prescription, generally a controlled substance or Brand Medically Necessary drug, has been printed. It should be manually signed and given to the patient to be hand carried to the pharmacy.

10 Glossary

Term	Definition
Accepted	File transmission status; indicates the medication was successfully transmitted to the pharmacy.
Add a New Patient	Process to add a new patient to your provider database. Once added, you can initiate a new prescription.
Alternatives	Window detailing any available alternatives to the medication being prescribed. The Prescriber can either choose one of the alternatives, or to prescribe the original medication.
Coverage Limitations	Window detailing specific constraints about the prescribed medication as defined by the Pharmacy Benefit Manager or payer.
DEA	Drug Enforcement Administration
ePrescribe	Application used to transmit prescriptions electronically, as well as manage renewals from pharmacies.
ePrescribe Profile	Page detailing prescriber's information. All information except NPI and DEA numbers can be edited as needed.
Error	File transmission status; indicates the transaction encountered an error during transmission.
NPI	National Provider Identifier
PBM	Pharmacy Benefit Manager
Pending	File transmission status; indicates the medication is still being processed and is not finalized yet.
PIN	Personal Identification Number
Printed	File transmission status; indicates the medication was printed and given to the patient.
PRN	Refill as needed
ProDUR	Prospective Drug Utilization Review
Radio Button	Selection method of choosing one option from a supplied list of choices. To use a radio button, click on the selection and a green

	circle will display to indicate your selection.
Search Patients	Process where you can search by either name or number to determine if the patient has already been added to your patient database.
SIG/Dispense	Instructions on how to the take the medication
Surescripts Prescriber ID (SPI)	The Surescripts assigned 10-digit identifier used on all transactions and in the Prescriber Directory to identify participating prescribers.

Appendix A - AMA Specialty List

A	Allergy
ADM	Addiction Medicine
ADL	Adolescent Medicine (Pediatrics)
ADP	Addiction Psychiatry
AI	Allergy and Immunology
ALI	Clinical and Laboratory Immunology (Allergy and Immunology)
AM	Aerospace Medicine
AMI	Adolescent Medicine (Internal Medicine)
AN	Anesthesiology
APM	Pain Management (Anesthesiology)
AS	Abdominal Surgery
BBK	Blood Banking/Transfusion Medicine
CBG	Clinical Biochemical Genetics
CCA	Critical Care Medicine (Anesthesiology)
CCG	Clinical Cytogenetics
CCM	Critical Care Medicine (Internal Medicine)
CCP	Pediatric Critical Care Medicine
CCS	Surgical Critical Care (Surgery)
CTS	Cardiothoracic Surgery
CD	Cardiovascular Disease
CG	Clinical Genetics
CHN	Child Neurology

CHP	Child and Adolescent Psychiatry
CLP	Clinical Pathology
CMG	Clinical Molecular Genetics
CN	Clinical Neurophysiology
CRS	Colon and Rectal Surgery
D	Dermatology
DDL	Clinical and Laboratory Dermatological Immunology
DIA	Diabetes
DMP	Dermatopathology (Pathology)
DR	Diagnostic Radiology
DS	Dermatologic Surgery
EM	Emergency Medicine
END	Endocrinology, Diabetes, and Metabolism
EP	Epidemiology
ESM	Sports Medicine (Emergency Medicine)
ETX	Medical Toxicology (Emergency Medicine)
FOP	Forensic Pathology
FP	Family Practice
FPG	Geriatric Medicine (Family Practice)
FPS	Facial Plastic Surgery
FSM	Sports Medicine (Family Practice)
GE	Gastroenterology
GO	Gynecological Oncology
GP	General Practice

GPM	General Preventive Medicine
GS	General Surgery
GYN	Gynecology
HEM	Hematology (Internal Medicine)
HEP	Hepatology
HMP	Hematology (Pathology)
HNS	Head and Neck Surgery
HO	Hematology/Oncology
HS	Hand Surgery
ICE	Clinical Cardiac Electrophysiology
ID	Infectious Disease
IG	Immunology
ILI	Clinical and Laboratory Immunology (Internal Medicine)
IM	Internal Medicine
IMG	Geriatric Medicine (Internal Medicine)
ISM	Sports Medicine (Internal Medicine)
LM	Legal Medicine
MDM	Medical Management
MFM	Maternal and Fetal Medicine
MG	Medical Genetics
MM	Medical Microbiology
MPD	Internal Medicine/Pediatrics
MPH	Public Health and General Preventive Medicine
MXR	Maxillofacial Radiology

N	Neurology
NCC	Critical Care Medicine (Neurological Surgery)
NEP	Nephrology
NM	Nuclear Medicine
NP	Neuropathology
NPM	Neonatal-Perinatal Medicine
NR	Nuclear Radiology
NRN	Neurology/Diagnostic Radiology/Neuroradiology
NS	Neurological Surgery
NSP	Pediatric Surgery (Neurological Surgery)
NTR	Nutrition
OBG	Obstetrics and Gynecology
OBS	Obstetrics
OCC	Critical Care Medicine (Obstetrics and Gynecology)
OFA	Foot and Ankle Orthopedics
OM	Occupational Medicine
OMM	Osteopathic Manipulative Medicine
ON	Medical Oncology
OP	Pediatric Orthopedics
OPH	Ophthalmology
ORS	Orthopedic Surgery
OS	Other
OSS	Orthopedic Surgery of the Spine
OT	Otology/Neurotology

OTO	Otolaryngology
OTR	Orthopedic Trauma
P	Psychiatry
PA	Clinical Pharmacology
PCC	Pulmonary Disease and Critical Care Medicine
PCH	Chemical Pathology
PCP	Cytopathology
PD	Pediatrics
PDA	Pediatric Allergy
PDC	Pediatric Cardiology
PDP	Pediatric Pulmonology
PDE	Pediatric Endocrinology
PDI	Pediatric Infectious Diseases
PDO	Pediatric Otolaryngology
PDR	Pediatric Radiology
PDS	Pediatric Surgery (Surgery)
PDT	Medical Toxicology (Pediatrics)
PE	Pediatric Emergency Medicine (Emergency Medicine)
PEM	Pediatric Emergency Medicine (Pediatrics)
PFP	Forensic Psychiatry
PG	Pediatric Gastroenterology
PHO	Pediatric Hematology/Oncology
PIP	Immunopathology
PLI	Clinical and Laboratory Immunology (Pediatrics)

PLM	Palliative Medicine
PM	Physical Medicine and Rehabilitation
PMD	Pain Medicine
PN	Pediatric Nephrology
PO	Pediatric Ophthalmology
PP	Pediatric Pathology
PPR	Pediatric Rheumatology
PRO	Proctology
PS	Plastic Surgery
PSM	Sports Medicine (Pediatrics)
PTH	Anatomic and Clinical Pathology
PTX	Medical Toxicology (Preventive Medicine)
PUD	Pulmonary Disease
PYA	Psychoanalysis
PYG	Geriatric Psychiatry
OAR	Adult Reconstructive Orthopedics
OMO	Musculoskeletal Oncology
OSM	Sports Medicine (Orthopedic Surgery)
R	Radiology
REN	Reproductive Endocrinology
RHU	Rheumatology
RIP	Radioisotopic Pathology
RNR	Neuroradiology
RO	Radiation Oncology

RP	Radiological Physics
SCI	Spinal Cord Injury Medicine (Physical Medicine and Rehabilitation)
SM	Sleep Medicine
SO	Surgical Oncology
SP	Selective Pathology
TRS	Trauma Surgery
TTS	Transplant Surgery
U	Urology
UM	Undersea Medicine
UP	Pediatric Urology
US	Unspecified
VIR	Vascular and Interventional Radiology
VS	Vascular Surgery