

MEDITECH

January 16, 2018

Seema Verma
Administrator for the Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Administrator Verma,

On behalf of MEDITECH, a leading electronic health record vendor, we are pleased to offer our comments on the Medicare Program; Contract Year 2019 Policy and Technical Changes to the Medicare Advantage, Medicare Cost Plan, Medicare Fee-for-Service, the Medicare Prescription Drug Benefit Programs, and the PACE Program.

As an electronic health record vendor who has been supporting electronic prescribing workflows for approximately 10 years, MEDITECH supports the continued evolution of e-prescribing messages. We agreed with the proposed rule by the Centers for Medicare & Medicaid Services to upgrade the message format from NCPDP SCRIPT 10.6 to NCPDP SCRIPT 2017071. The new SCRIPT format will provide a means to exchange more information in a more structured format, and will be a beneficial update after using the 10.6 version for the past four years.

However, the timeframe proposed to sunset SCRIPT 10.6 is too aggressive. Prior to the sunset date, there is a significant amount of work required by software vendors who support prescribers, pharmacies, and PBMs, as well as those healthcare organizations themselves. With the publication of this proposed rule, the technology vendors now know the specific NCPDP version that is being targeted, and can begin official planning for the upgrade, which wasn't really feasible before. In order to allow enough time for planning, development, roll-out to customers, training, and go-live of the new version, there should be approximately two years between the final rule and the sunset of the previous version. For example, if it takes a technology vendor one year to update its product and deploy to all its customers, then allowing another year for the healthcare organizations to train its users on the update and make the transition would be appropriate. Using past experience as a guide, CMS published an interim final rule in July 2010 adopting NCPDP SCRIPT 10.6 on a voluntary basis. A sunset date for the previous version was not announced by CMS until 2013, but in May 2011 Surescripts announced plans to sunset version 8.1 in October 2013, consistent with our recommendation to allow a two-year transition period.

We agree that the existing transactions using the SCRIPT 10.6 format should be required to update to SCRIPT 2017071 after an implementation period. The proposed rule also proposes that several new message types be adopted in a mandatory fashion, which include prescription drug administration message, new prescription requests and response denials, prescription transfer message, prescription recertification, Risk Evaluation and Mitigation Strategy (REMS) initiation request and response, and REMS request and response. Because these are new transaction types not yet widely adopted in the industry and Surescripts is still validating workflow use cases and best practices for these message types, we recommend that these message types be adopted in the ruling as optional transactions until

the industry has more experience with them. In addition, we recommend that the eight Electronic Prior Authorization (EPA) message types be included in the ruling to upgrade to the 2017071. EPA transactions have been adopted by some, but not all, payers and EHR vendors, so we recommend that EPA messages be optional for payers and prescribers in general, but for those participants that do support EPA messages, they should be required to upgrade to the NCPDP SCRIPT 2017071 version.

Thank you for the opportunity to comment on this proposed rule.

Sincerely,

A handwritten signature in black ink, appearing to read "K. Gordon", with a stylized flourish at the end.

Kari Gordon
Manager Development, E-Prescribing
MEDITECH