

Electronic Prescribing of Controlled Substances (EPCS)

Electronic prescribing of controlled substances (EPCS) has been permitted by the DEA since 2010.¹ Beginning in 2015, all 50 states and the District of Columbia have approved EPCS for all schedules of drugs.² In 2017, 77% of prescription medications were electronically prescribed.³ However, more than 90% of those electronically prescribed were for non-controlled dangerous drugs.⁴ Only about 21% of controlled substances were electronically prescribed, leaving potential for abuse.⁵

EPCS has many benefits including increasing patient safety, lowering costs, and ensuring higher quality health care. EPCS offers an increased level of the security for prescriptions issued to patients and thus provides a powerful tool to help fight the opioid epidemic. Many states, including Texas, require special prescription forms to dispense CII controlled substances. Not only are these prescription pads more expensive, but individuals will find ways to fraudulently replicate the prescription forms despite their safety features. EPCS provides a safer alternative since paper prescriptions are frequently stolen, forged, or altered.

Another challenge with paper prescriptions is the required record keeping. Electronic prescribing would eliminate the need to maintain and store paper prescriptions. By using an electronic prescribing database, practitioners will experience an overall more efficient workflow. There is also improved workflow for pharmacists. With electronic prescribing, the number of telephone calls to prescribers by pharmacists can be reduced. In addition, electronic prescribing provides a safer alternative to oral and hard copy prescriptions as it decreases transcription and translation errors associated with poor communication and illegible handwriting.

Another benefit is improved patient medication compliance since the prescription is sent directly to the pharmacy by the prescriber and then quickly ready for the patient to pick up at the pharmacy. EPCS doesn't rely on the patient to take the paper prescription to the pharmacy to fill.

In October 2018, the federal Support for Patients and Communities Act was signed which mandates the use of electronic prescribing for all controlled substances under Medicare Part D by January 1, 2021, in an effort to prevent prescription fraud and to more effectively combat the opioid crisis.⁶ States currently have varying regulatory requirements for electronic prescribing.⁷ Since 2018, an increasing number of states are passing legislation to mandate EPCS.⁸ To ensure compliance, various states are even imposing penalties when a prescriber fails to use EPCS. For example, Maine imposes a penalty of \$250 per violation, up to \$5,000 per calendar year.⁹ The Texas Legislature is considering legislation that will impact EPCS.¹⁰

¹ Electronic Prescriptions for Controlled Substances, https://www.deadiversion.usdoj.gov/e-comm/e_rx/faq/practitioners.htm, 1st Q&A (Mar. 2010).

² Data Brief, Mar. 2016, Sure Scripts, <https://surescripts.com/docs/default-source/products-and-services/data-brief-prescriber-pharmacy-adoption-of-ePCS.pdf>.

³ National Progress Report 2017, Sure Scripts, https://surescripts.com/docs/default-source/national-progress-reports/2151_npr_2017_finalB.pdf, p 6.

⁴ National Progress Report 2017, Sure Scripts, https://surescripts.com/docs/default-source/national-progress-reports/2151_npr_2017_finalB.pdf, p 6.

⁵ National Progress Report 2017, Sure Scripts, https://surescripts.com/docs/default-source/national-progress-reports/2151_npr_2017_finalB.pdf, p 6.

⁶ Summary: H.R.6, <https://www.congress.gov/bill/115th-congress/house-bill/6>.

⁷ See <https://surescripts.com/EPCS/>.

⁸ See <https://surescripts.com/EPCS/>.

⁹ Point-of-Care Partners, Nov. 2018, p 11, <https://www.pocp.com/wp-content/uploads/NASCOSA-2018-EPCS-Workshop.pdf>.

¹⁰ Texas Legislature Online, capitol.texas.gov, search "electronic prescription".

States with Current E-Prescribing Laws

State	Electronic-Prescribing Requirement	Effective Date	Exceptions	Waivers	Penalties	Prescriber Enablement	Pharmacy Enablement
Arizona	Schedule II Opioids	January 1, 2019 - populations >150k July 1, 2019 - populations <150k	Yes	No	No	58.3%	98.8%
Arkansas	All Prescriptions	January 1, 2021	-	-	Yes	24.6%	98.7%
California	All Prescriptions	January 1, 2022	Yes	-	Yes	30.3%	93.8%
Connecticut	All Controlled Substances	January 1, 2018	Yes	Yes	No	60.7%	98.6%
Iowa	All Prescriptions	January 1, 2020	Yes	Yes	Yes	29.9%	96.9%
Maine	All Controlled Substances containing opiates ➤ Includes provisions that limit duration and quantities of opioid prescriptions	July 1, 2017	-	Yes	Yes	69.4%	99.3%
Massachusetts	All Prescriptions	January 1, 2020	Yes	Yes	No	21.5%	97.9%
Minnesota	All Prescriptions	January 1, 2011	-	-	No	33.3%	95.9%
New Jersey	Schedule II Controlled Substances	May 1, 2019	Yes	Yes	No	16.7%	97.5%
New York	All Prescriptions – ISTOP law	March 27, 2016	Yes	Yes	Yes	77.8%	97.9%
North Carolina	Schedule II and III opioids – STOP Act	January 1, 2020	-	No	No	42.5%	97.5%
Oklahoma	All Controlled Substances ➤ Must have EPCS software by 1/1/19	January 1, 2020	Yes	Yes	No	20.5%	98.1%
Pennsylvania	All Controlled Substances	October 24, 2019	Yes	Yes	Yes	25.3%	97.3%
Rhode Island	All Controlled Substances	January 1, 2020	Yes	Yes	No	32.1%	91.1%
Tennessee	Schedule II Controlled Substances	July 1, 2020	Yes	Yes	Yes	23.5%	96.7%
Virginia	All Prescriptions containing opiates	July 1, 2020	No	No	No	19.6%	96.2%
Wyoming	All Controlled Substances	January 1, 2021	Yes	No	No	18%	92.5%

% EPCS – enabled Prescribers Nationwide	33.4%
% EPCS – enabled Pharmacies Nationwide	95.2%

States with Pending E-Prescribing Legislation

State	Electronic-Prescribing Requirements	Effective Date	Bill	Status
Colorado	All Controlled Substances (Schedule II-IV)	July 1, 2021 or 2023 for rural areas	SB 79	Senate/House - 3/19/19
Florida	All Prescriptions	Upon license renewal or July 1, 2021	SB 1192	Introduced to Senate - 3/5/19
Georgia	Schedule II and III Controlled Substances	January 1, 2020	SB 471	Senate read and referred - 2/22/18
Illinois	All Prescriptions	January 1, 2022	SB 2058	Session Sine Die - 1/9/19
Kansas	All Controlled Substances	January 1, 2020	HB 2389	Died in Committee - 5/4/18
Kentucky	All Controlled Substances	January 1, 2021	HB 342	Passed - delivered to Governor 3/14/19
Louisiana	All Prescriptions	January 1, 2019	SB 368, HB 548	Returned to calendar - 4/11/18
Michigan	All Prescriptions	January 1, 2020	HB 4217	Introduced to House - 2/21/19
Missouri	All Controlled Substances	January 1, 2021	SB 262	Senate passed - 3/13/19
Montana	All Controlled Substances	January 1, 2021	HB 86	Signed by House Speaker - 3/18/19
South Carolina	All Controlled Substances	<i>Pending</i>	SB 136	Committee - errors corrected - 3/8/19
Texas	All Controlled Substances	September 1, 2021	HB 2766	Referred to Public Health - 3/12/19
Washington	All Prescriptions	January 1, 2020	SB 5446	Session - no action taken - 2/19/19
West Virginia	All Prescriptions	July 1, 2019	HB 3042	To House Judiciary - 2/12/19

States with E-Prescribing Mandates

