

FAQs - Electronic Prescribing - Pharmacy

(updated 1/27/2022)

Care Facility

Question: Are long-term-care prescriptions required to be submitted to the pharmacy electronically?

Collaborative Practice

Question: Can a pharmacist who is practicing under a Collaborative Practice Agreement with a physician electronically transmit a prescription on behalf of the prescriber to be filled at another pharmacy?

Emergency Service Programs

Question: For a pharmacy-based service program, is the medical director required to electronically transmit prescriptions to the pharmacy to justify the use/replacement of controlled substances to the service program?

Exemptions

Question: With the electronic prescribing mandate, is there an exclusion for IV therapy?

Question: Does the electronic prescribing mandate apply to the transmission of medication orders within the hospital setting to the inpatient hospital pharmacy?

Question: What types of prescriptions are exempt from the electronic transmission mandate?

Question: What does "emergency situation" mean?

General

Question: What should a pharmacist do when they get a paper, fax, or telephonic prescription?

Question: What if a pharmacy calls back and doesn't have a med or needs to change the prescription? Can they accept that change over the phone?

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Question: Can a pharmacy transfer an unfilled/profiled CII-V prescription to another pharmacy?

Care Facility

Question: Are long-term-care prescriptions required to be submitted to the pharmacy electronically?

Answer: No. Long-term-care and nursing home prescriptions are specifically exempted by Code and Board rules. Assisted living facilities and mental health group homes can be considered long-term-care for the purposes of this mandate.

Collaborative Practice

Question: Can a pharmacist who is practicing under a Collaborative Practice Agreement with a physician electronically transmit a prescription on behalf of the prescriber to be filled at another pharmacy?

Answer: Prescriptions issued pursuant to a CPA are exempt from the electronic transmission mandate, but are allowed to be transmitted electronically.

Emergency Service Programs

Question: For a pharmacy-based service program, is the medical director required to electronically transmit prescriptions to the pharmacy to justify the use/replacement of controlled substances to the service program?

Answer: **No.** The prescriptions issued in response to the administration of a controlled substance by a service program would be exempt from the electronic prescribing mandate as an emergency situation. The prescription (or patient care record, if used) would still be required to have all the required elements when presented to the pharmacy.

Exemptions

Question: With the electronic prescribing mandate, is there an exclusion for IV therapy?

Answer: **It depends.** The Code provides an exemption to electronic transmission for “a prescription requiring information that makes electronic transmission impractical, such as complicated or lengthy directions for use or attachments” and for “a prescription for a compounded preparation containing two or more components.” If the IV therapy falls into either of those two descriptions, the prescription would be exempt from the electronic transmission mandate. If the IV therapy is an FDA-approved, commercially available product, it would not likely meet those criteria for exemption.

Question: Does the electronic prescribing mandate apply to the transmission of medication orders within the hospital setting to the inpatient hospital pharmacy?

Answer: **No.** The mandate to transmit electronically applies to “prescriptions.” Iowa Code 155A.3 provides separate definitions for “prescription drug orders” and “medication orders,” implying that the electronic mandate does not apply to “medication orders” in the hospital setting.

Question: What types of prescriptions are exempt from the electronic transmission mandate?

Answer: Iowa Code 155A.27 and 124.308 exempt prescriptions:

1. For a patient residing in a nursing home, long-term care facility, correctional facility, or jail
2. Authorized by a licensed veterinarian
3. For devices
4. Dispensed by a department of Veterans Affairs pharmacy
5. Requiring information that makes electronic transmission impractical, such as complicated or lengthy directions for use or attachments
6. For compounded preparations containing two or more components
7. Issued in response to a public health emergency in a situation where a non-patient specific prescription would be permitted
8. Issued for an opioid antagonist pursuant to Iowa Code section 135.190 or issued for epinephrine pursuant to Iowa Code section 135.185
9. Issued during a temporary technical or electronic failure at the location of the prescriber or pharmacy, provided that the prescription indicates the temporary technical or electronic failure
10. Issued pursuant to a collaborative practice agreement, standing order, drug research protocol
11. Issued in an emergency situation

Question: What does “emergency situation” mean?

Answer: An emergency situation may include, but is not limited to, the issuance of a prescription to meet the immediate care need of a patient after hours when a prescriber is unable to access electronic prescribing capabilities. Such prescription shall be limited to a quantity sufficient to meet the acute need of the patient with no authorized refills.

General

Question: What should a pharmacist do when they get a paper, fax, or telephonic prescription?

Answer: The eRx mandate does not automatically nullify or void prescription transmitted by non-electronic methods. After the pharmacist fulfills his/her professional responsibility as it relates to prescription dispensing, the pharmacist may fill prescriptions transmitted verbally, via facsimile, or written on paper. The pharmacist may, in his/her professional judgement, report violations of the eRx mandate to the BOP or the prescriber's professional licensing board.

Question: What if a pharmacy calls back and doesn't have a med or needs to change the prescription? Can they accept that change over the phone?

Answer: Yes, changes can be made over the phone. The original transmission is still valid and the pharmacy can electronically annotate the prescription in the system. Additionally, systems may have the capability to forward prescriptions to another pharmacy, reject a prescription back to the prescriber, and request changes.

Non-Resident

Question: Can a pharmacy fill a non-electronic prescription issued by a prescriber practicing in another state?

Answer: It depends

- If the prescriber is practicing in another state and is treating the patient in that state, the prescriber is not bound by Iowa law pertaining to electronic prescribing. If the patient then travels across state lines to fill the prescription in Iowa, the pharmacy may fill the prescription. Pharmacies may adopt their own policies on whether or not they will fill/honor prescriptions issued in a non-electronic format.
- If the prescriber is treating the patient while the patient is located in Iowa (telehealth, traveling provider), the provider must be licensed in the state of Iowa and is bound by the e-prescribing requirements.

Question: Does the electronic prescribing mandate apply to nonresident pharmacies and, if so, is it for prescriptions to Iowa patients or from Iowa doctors?

Answer: For the mandate to apply, the practice has to be subject to the jurisdiction of Iowa. So, both the prescriber and the pharmacy would need to be engaged in the practice in Iowa (including by telehealth) - if one of them isn't, the mandate cannot apply.

Transfers

Question: Can a pharmacy transfer an unfilled/profiled CII-V prescription to another pharmacy?

Answer: It depends

- When a pharmacy receives a CII-V prescription *via electronic transmission* and does not fill the prescription, the original prescription may be *electronically forwarded* to another pharmacy. The prescription may not be transferred via phone or fax like other transfers of refills.
- When a pharmacy receives a CII-V prescription via hard copy, fax, or phone and does not fill the prescription, the original prescription *may not be transferred* to another pharmacy. A hard copy prescription may be returned to the patient to take to another pharmacy of the patient's choice. A prescription received via fax or phone may not be transferred and the prescriber will need to phone or fax a new prescription to the pharmacy of the patient's choice.