



**2017** NATIONAL  
PROGRESS  
REPORT

**L**ast year marked another chapter of growth and change in the story of the **Surescripts Network Alliance™**. Together, we expanded the strength and number of our connections and continued to lead the industry in driving changes that improve patient safety, lower costs and ensure quality care. **The following data tracks exactly how far we advanced healthcare in 2017.**



IN 2017, WE WORKED TOGETHER TO

# MAKE MORE CONNECTIONS & EXPAND INTEROPERABILITY

## NETWORK CONNECTIONS

---

Today, the Surescripts Network Alliance connects virtually all electronic health records (EHR) vendors, pharmacy benefit managers (PBMs), pharmacies and clinicians, plus an increasing number of health plans, long-term and post-acute care organizations and specialty pharmacy organizations.

**1.47 MILLION**

connected healthcare professionals  
13% increase since 2016

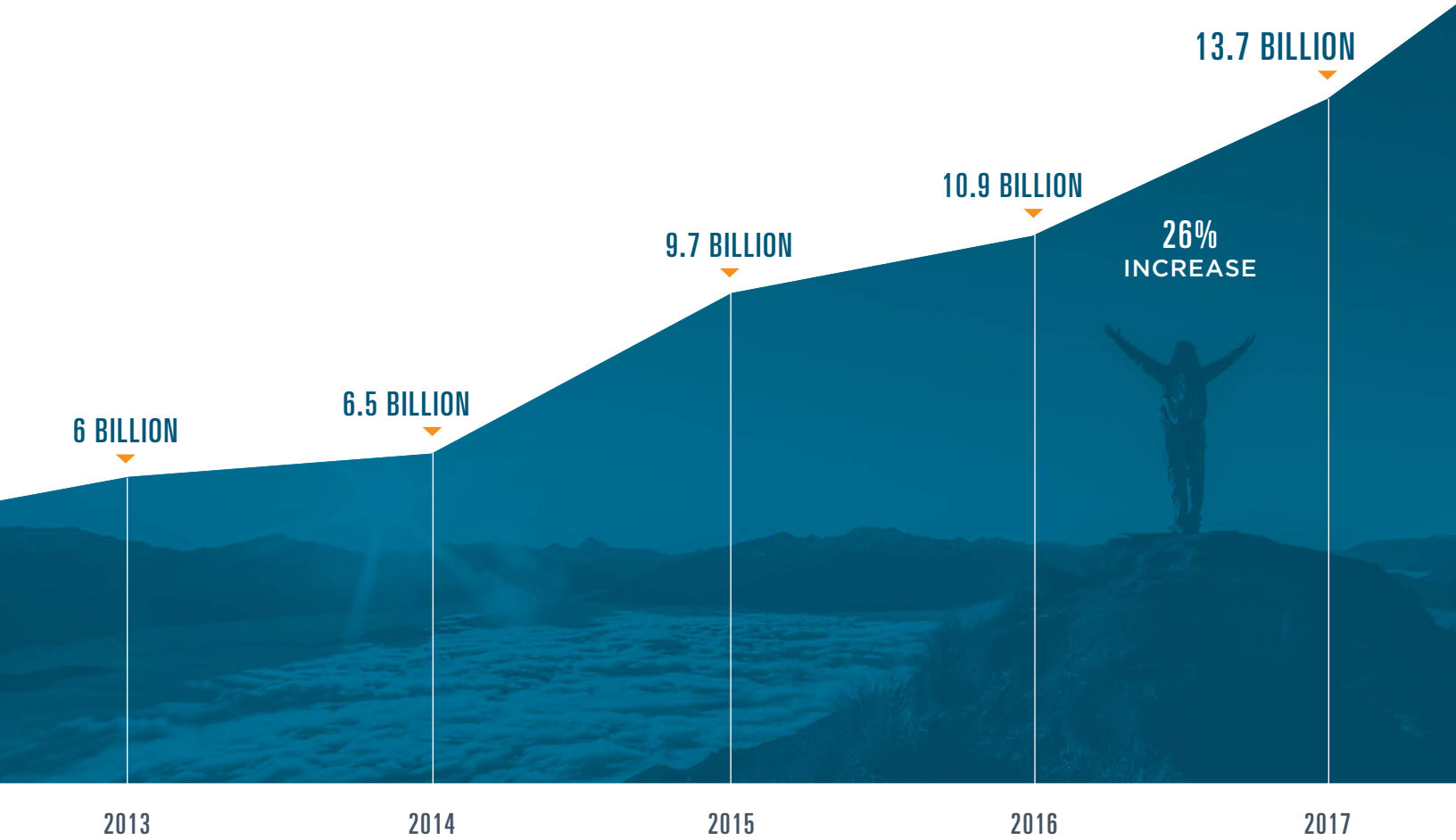
**233 MILLION**

patients in our master patient index  
representing 71% of the U.S. population

We convene the Surescripts Network Alliance to provide actionable intelligence that increases patient safety, lowers costs and ensures quality care.

# NETWORK TRANSACTIONS

The Surescripts network delivered 26% more transactions in 2017 compared to 2016. That's a lot more actionable intelligence transmitted to healthcare professionals nationwide to enhance prescribing and inform care decisions.



**1.74 BILLION**  
E-Prescriptions

**3.1 MILLION**  
Real-Time Prescription  
Benefit transactions

**1.46 BILLION**  
Medication Histories

**25.9 MILLION**  
Clinical Direct Messages

## TRANSACTION SPOTLIGHT: CANCELRx

Clinicians and pharmacists are implementing workflow and technology changes to improve prescription accuracy and patient safety, including the ability to cancel a prescription electronically.

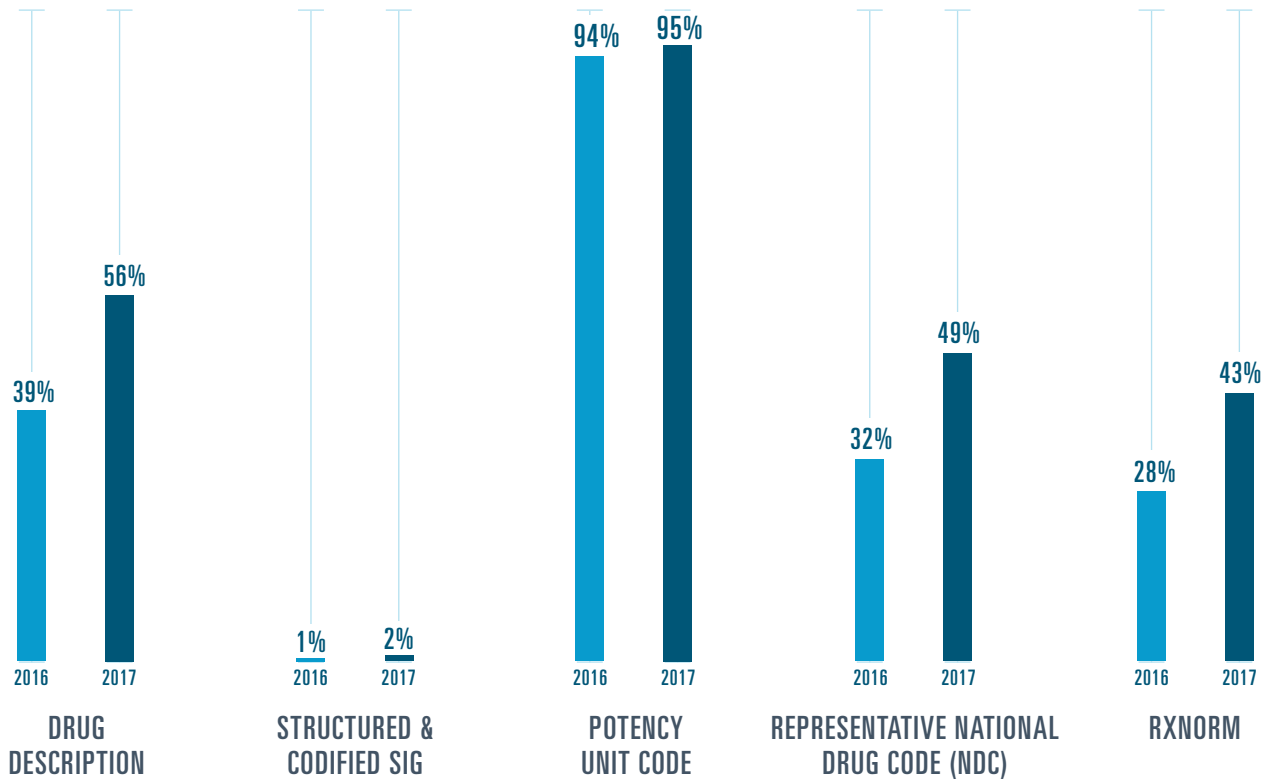
**3.8 MILLION**  
CancelRx transactions processed in 2017  
555,000 prescribers and 31,000 pharmacies  
using certified software

# CRITICAL PERFORMANCE IMPROVEMENT

Surescripts Sentinel™ monitors the accuracy of the prescriptions sent across the Surescripts network to pinpoint opportunities for quality improvement. In 2017, the Surescripts Network Alliance convened the industry through its Critical Performance Improvement program with a common goal: to increase prescription accuracy.

## 26% GREATER ACCURACY SINCE 2016

PERCENT OF E-PRESCRIPTIONS THAT MET QUALITY STANDARDS



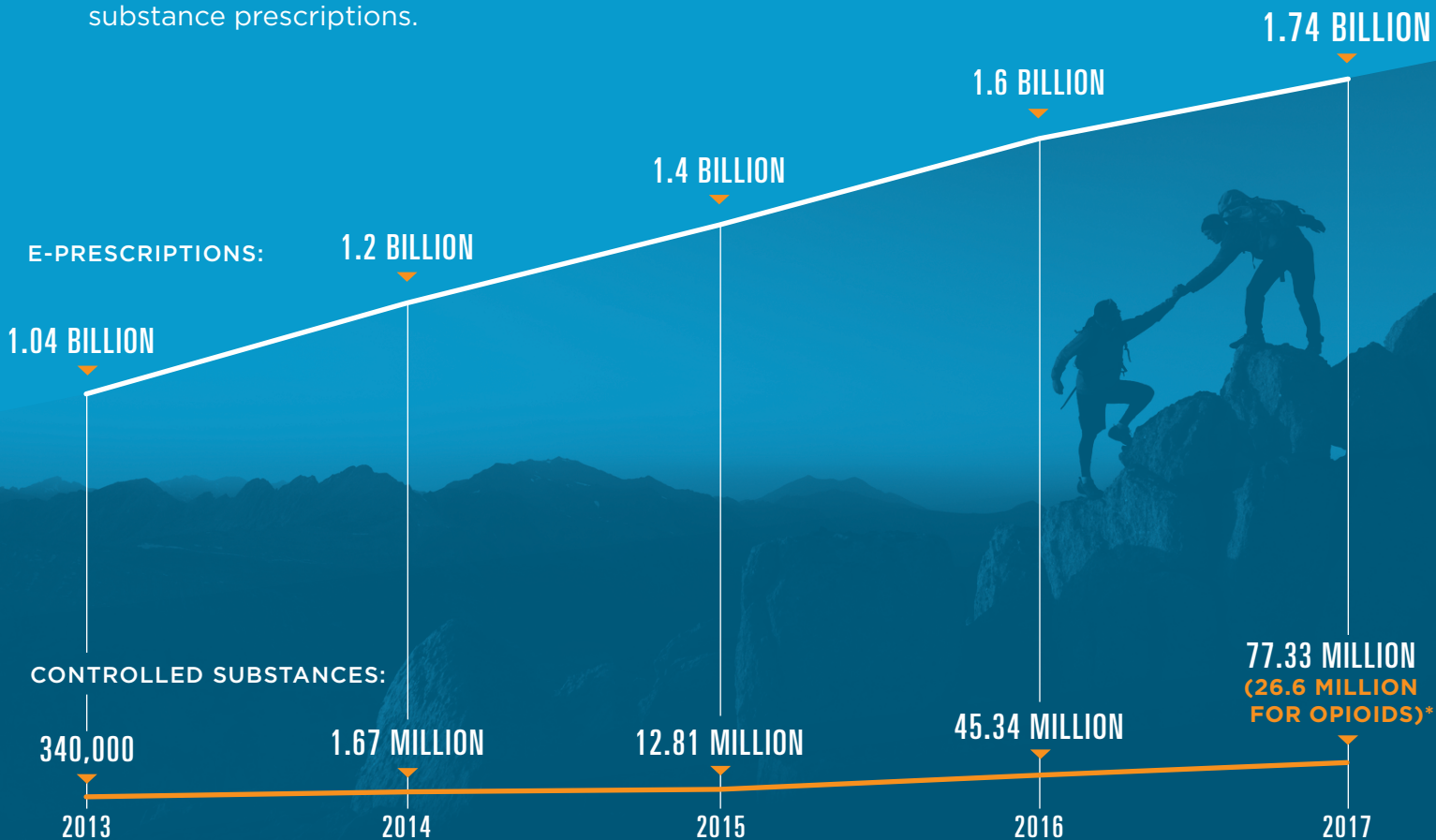
Thanks to these accuracy increases, **as of December 2017 we eliminated 50 million opportunities for error or confusion per month** where a pharmacist would have otherwise had to leave their workflow to clarify prescriber intent.

# IN 2017, WE WORKED TOGETHER TO ENHANCE PRESCRIBING

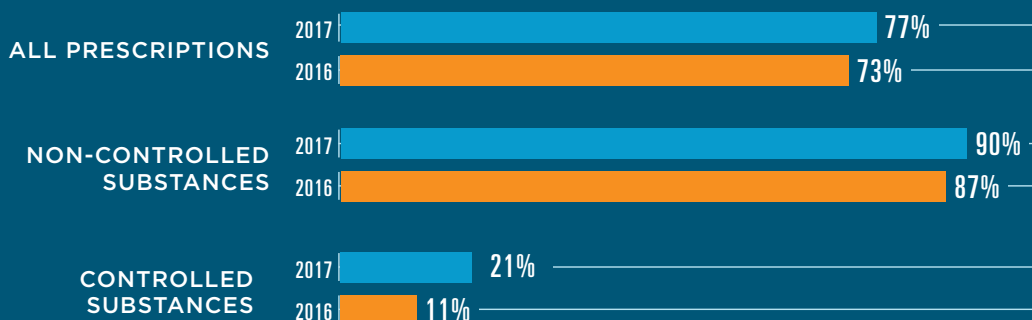
## E-PRESCRIBING

GAINING GROUND ACROSS PRESCRIPTION TYPES

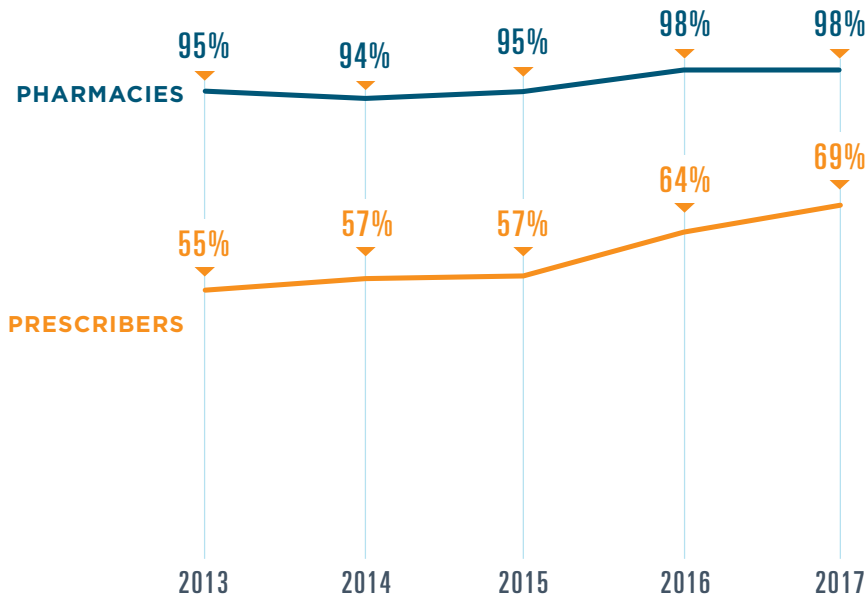
E-Prescribing lets healthcare professionals in all care settings handle prescriptions safely and efficiently, while E-Prescribing for Controlled Substances (EPCS) integrates into existing workflows to offer new dimensions of safety and security for controlled substance prescriptions.



### PERCENT OF PRESCRIPTIONS DELIVERED ELECTRONICALLY\*\*

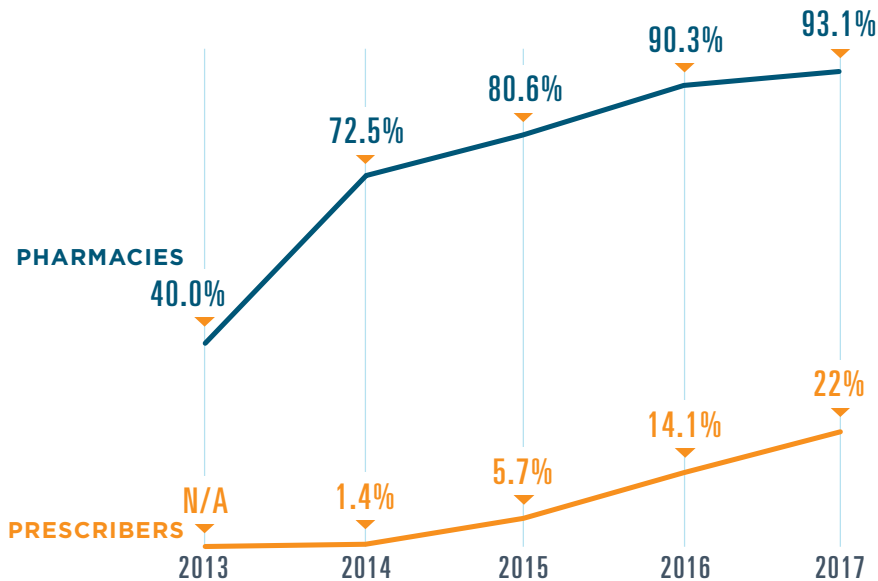


## PERCENT UTILIZING E-PRESCRIBING



The number of prescribers utilizing e-prescribing **increased 8% in 2017.**

## PERCENT ENABLED FOR E-PRESCRIBING FOR CONTROLLED SUBSTANCES (EPCS)



The number of prescribers enabled for EPCS **increased 59% in 2017.**

### TOP 5 SPECIALTIES USING E-PRESCRIBING:

- ONCOLOGISTS **84%**
- SPORTS MEDICINE SPECIALISTS **82%**
- NEPHROLOGISTS **80%**
- CARDIOLOGISTS **80%**
- FAMILY PRACTITIONERS **79%**

### TOP 5 SPECIALTIES USING ELECTRONIC PRESCRIBING FOR CONTROLLED SUBSTANCES (EPCS)

- PAIN MEDICINE SPECIALISTS **25%**
- PSYCHIATRISTS **25%**
- ONCOLOGISTS **24%**
- FAMILY PRACTITIONERS **21%**
- SPORTS MEDICINE SPECIALISTS **20%**

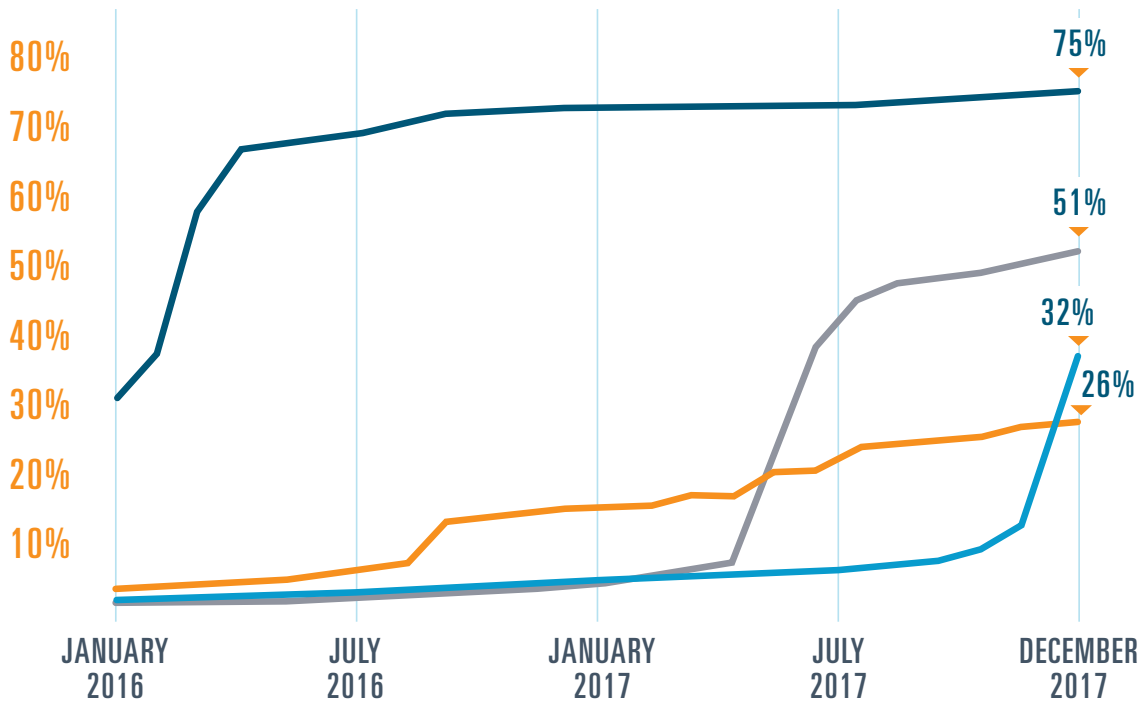
# EPCS

## STATE LEGISLATION DRIVES ADOPTION

By the end of 2017, three states—Minnesota, New York and Maine—had mandated electronic prescribing for controlled substances or opioids. Meanwhile, Connecticut was preparing for a mandate that would take effect on January 1, 2018, and several other states were considering similar legislation. Another five were gearing up for laws set to take effect in 2019 and 2020, including Arizona, North Carolina, Rhode Island, Virginia and New Jersey.

EPCS adoption trends suggest that as these laws move forward, we can expect to see major gains in prescriber enablement and utilization of EPCS.

## PRESCRIBER ENABLEMENT IN STATES WITH EPCS MANDATES



### JANUARY 2011

E-prescribing required for all prescriptions, including controlled substances

(but with no specific penalties for noncompliance)



### MARCH 2016

E-prescribing required for all prescriptions, including controlled substances



### JULY 2017

E-prescribing required for opioids



### JANUARY 2018

E-prescribing required for all controlled substances



# EPCS STATE RANKINGS

2017 Rank	2016 Rank	State	Pharmacy Enablement	Prescriber Enablement	Controlled Substances Prescribed Electronically
1	1	<b>New York</b>	97.8%	74.8%	93.8%
2	2	North Dakota	98.2%	40.9%	57.0%
3	25	<b>Maine</b>	99.3%	51.0%	41.2%
4	3	South Dakota	96.2%	30.2%	37.3%
5	7	Minnesota	95.9%	26.4%	34.2%
6	4	Nebraska	91.1%	29.4%	30.8%
7	14	Wisconsin	95.4%	29.2%	25.5%
8	11	Utah	96.2%	34.1%	16.7%
9	20	New Hampshire	99.2%	25.4%	20.9%
10	10	North Carolina	96.8%	26.7%	21.4%
11	30	<b>Connecticut</b>	99.4%	31.8%	10.7%
12	5	Rhode Island	99.4%	25.7%	17.0%
13	6	Delaware	97.5%	15.1%	31.9%
14	9	Michigan	96.5%	21.1%	21.3%
15	8	Texas	93.9%	19.9%	24.4%
16	13	Indiana	96.8%	19.3%	16.6%
17	16	California	91.7%	17.9%	19.2%
18	12	Oregon	96.2%	19.0%	13.4%
19	15	Vermont	93.1%	14.0%	19.7%
20	17	Massachusetts	96.2%	11.8%	16.9%
21	19	Ohio	95.2%	13.8%	15.0%
22	18	Arizona	96.9%	12.4%	14.2%
23	23	Maryland	95.5%	10.9%	16.5%
24	32	Missouri	95.4%	12.9%	13.1%
25	24	Colorado	97.2%	12.7%	11.4%
26	29	Louisiana	93.8%	15.4%	10.8%
27	22	Wyoming	94.9%	11.2%	15.0%
28	34	Pennsylvania	95.2%	12.6%	11.6%
29	28	Arkansas	97.9%	10.8%	11.3%
30	33	Idaho	96.2%	12.2%	10.7%
31	21	Oklahoma	96.7%	9.4%	12.7%
32	26	Kansas	96.0%	10.7%	11.3%
33	38	Tennessee	91.0%	16.4%	8.6%
34	47	District of Columbia	91.0%	15.9%	8.8%
35	40	Kentucky	94.3%	10.1%	12.9%
36	27	New Jersey	95.7%	8.9%	12.2%
37	41	South Carolina	93.8%	12.1%	9.9%
38	36	New Mexico	95.9%	9.1%	10.0%
39	35	Illinois	92.9%	10.1%	11.2%
40	31	Iowa	94.8%	9.5%	10.1%
41	39	Alaska	92.4%	10.8%	10.7%
42	46	Montana	91.9%	12.0%	6.2%
43	44	Virginia	93.2%	9.7%	7.5%
44	37	Washington	92.4%	7.2%	10.2%
45	43	Nevada	93.6%	8.5%	5.8%
46	42	Georgia	94.5%	5.8%	8.3%
47	48	Florida	88.5%	8.2%	7.8%
48	45	West Virginia	91.7%	7.1%	6.1%
49	49	Alabama	90.5%	6.1%	5.9%
50	50	Mississippi	88.4%	5.7%	6.0%
51	51	Hawaii	89.3%	3.8%	6.3%
52		U.S. Virgin Islands	30.4%	7.0%	0.0%
53		Puerto Rico	29.6%	0.9%	0.0%
Nationwide			93.1%	22.0%	18.8%

## STATE HIGHLIGHTS

### New York:

EPCS is nearly ubiquitous in New York, which maintained the nation’s highest rate of e-prescribing of controlled substances for the third year running.

**Maine:** Thanks in part to a July 2017 mandate, Maine advanced 22 spots to claim the third-highest rate of EPCS adoption in the nation—the largest jump we saw in 2017. Now more than half of all prescribers are enabled and 41% of controlled substances are prescribed electronically.

**Connecticut:** Connecticut also made impressive progress in 2017, rising 19 spots higher than in 2016.

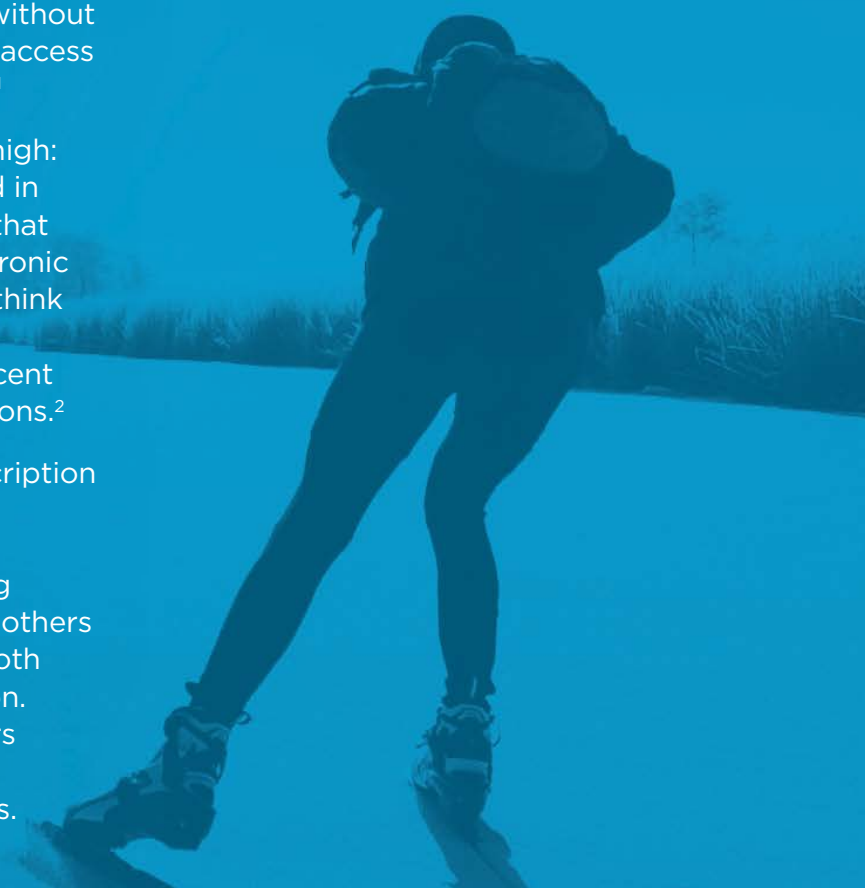
# PRICE TRANSPARENCY

REDUCING FRICTION FOR PRESCRIBERS, PHARMACISTS AND PATIENTS

We heard over and over in 2017 that today's prescribers consider price and benefit information essential to a fully informed medication decision—and with good reason. Considering that a \$10 copay increase makes a prescription 10% more likely to be abandoned, prescribing without the certainty that a patient can afford and access their medication is a big risk to adherence.<sup>1</sup>

U.S. physicians understand the stakes are high: In October, a Surescripts survey performed in partnership with ORC International found that 56 percent of physicians highly value electronic access to out-of-pocket costs, 74 percent think it's important to consider patients' benefit information before prescribing and 59 percent want to review the cost of similar medications.<sup>2</sup>

In 2017, we introduced our Real-Time Prescription Benefit and expanded Electronic Prior Authorization solutions, revolutionizing the e-prescribing process. Thanks to strong partnerships with PBMs, EHR vendors and others across the Surescripts Network Alliance, both solutions saw rapid expansion and adoption. And that means more and more prescribers are getting the insight they need to create a shorter, clearer path to treatment success.



*"It's a much better experience for the patient, much more efficient for the physician and, most importantly, gets that patient on a therapy that they know they can afford and is aligned with their benefit right from the start."*

**—Dr. Lynne Nowak, Chief Physician Experience Officer at Express Scripts, on providing price transparency at the point of care**

1. Louise Pilote et al., "The Effects of Cost-Sharing on Essential Drug Prescriptions, Utilization of Medical Care and Outcomes After Acute Myocardial Infarction in Elderly Patients," Canadian Medical Association Journal, no. 167(3) (August 2002): 246-252.

2. Surescripts, "Data Brief: Physician Perspectives on Access to Patient Data," April 2018, [http://surescripts.com/docs/default-source/intelligence-in-action/1785\\_databrief\\_providersurvey\\_graphics\\_final3\\_web.pdf](http://surescripts.com/docs/default-source/intelligence-in-action/1785_databrief_providersurvey_graphics_final3_web.pdf).

## BENEFIT OPTIMIZATION

### REAL-TIME PRESCRIPTION BENEFIT

---

**Real-Time Prescription Benefit** delivers patient-specific drug benefit and cost information directly from PBMs to the e-prescribing workflow at the point of care, including up to five therapeutic alternatives. In 2017, Real-Time Prescription Benefit pilot participants validated the functionality and market demand for this solution, setting the stage for a significant increase in adoption in 2018.

**3.1 MILLION**

Real-Time Prescription Benefit transactions

**.81 SECONDS**

median transaction time

**POWERED BY PBMs AND EHRs**

representing >50% of U.S. patients  
and 58% of e-prescribers

## PRIOR AUTHORIZATION

### TACKLING TREATMENT DELAYS

---

**Electronic Prior Authorization** integrates directly with electronic health records, enabling healthcare professionals to easily obtain prior authorizations in real time at the point of care.

**350% INCREASE**

in prior authorization transactions  
since 2016

**62.45% OF APPROVALS**

returned within 60 seconds

**POWERED BY PBMs**

representing 85% of patients in  
the Surescripts Master Patient Index

**ENABLED FOR MORE THAN 100,000 PRESCRIBERS**

and nearly 7,000 care locations nationwide

PERCENT OF PRIOR AUTHORIZATION REQUESTS  
SENT ELECTRONICALLY: **TOP 5 SPECIALTIES**

**FAMILY PRACTICE 19%**

**INTERNAL MEDICINE 16%**

**PSYCHIATRY 13%**

**PEDIATRICS 6%**

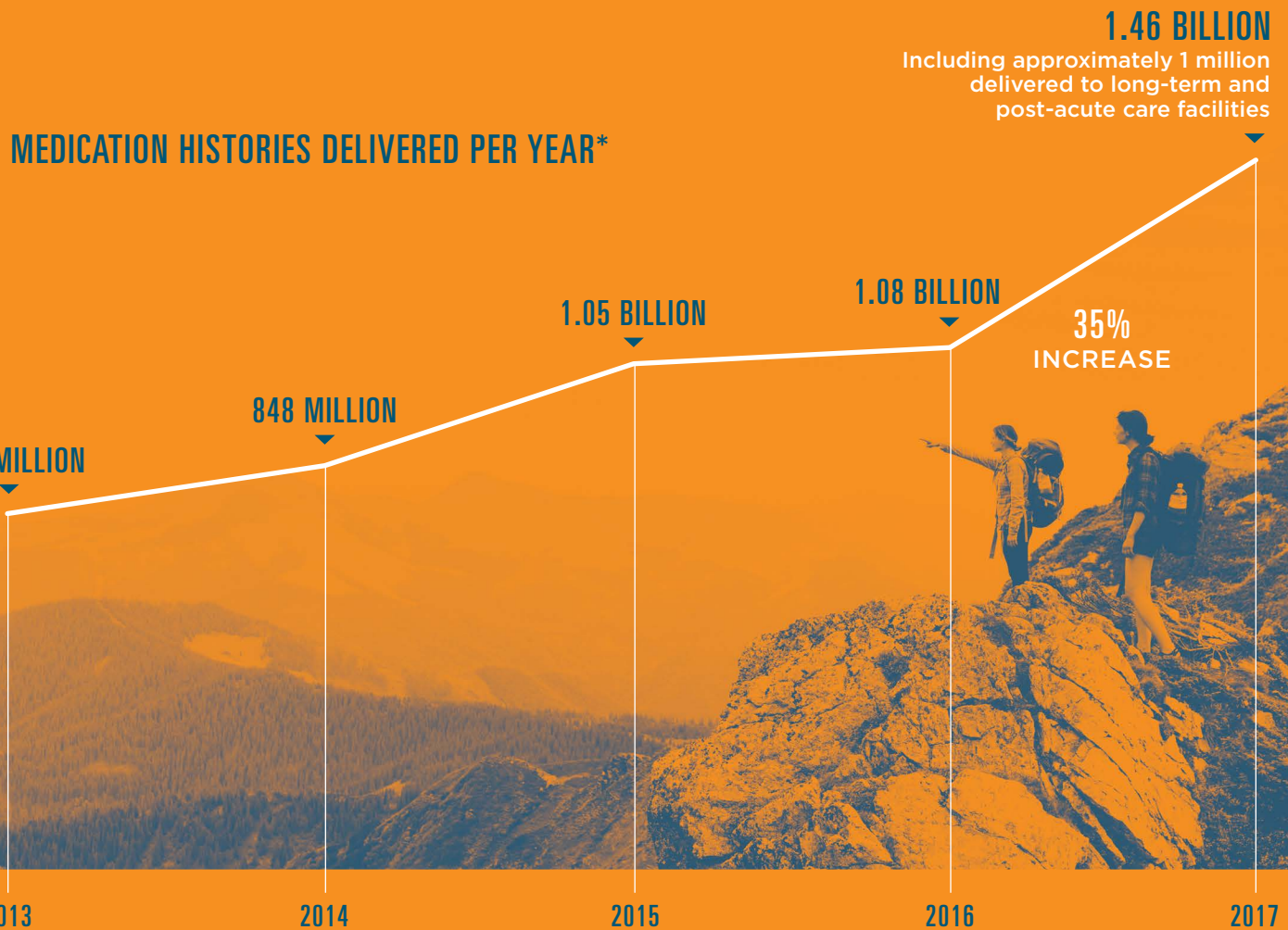
**RHEUMATOLOGY 2%**

# IN 2017, WE WORKED TOGETHER TO INFORM CARE DECISIONS

## MEDICATION HISTORY

TELLING THE FULL STORY OF PATIENTS' PRESCRIPTIONS

Surescripts **Medication History solutions for ambulatory care, reconciliation and population health** give a more complete and accurate picture of a patient's medication history by providing access to PBM claims and pharmacy fill data.



**355,000 MEDICATION HISTORIES**  
delivered for populations

# CLINICAL HISTORY

## RECORD LOCATOR & EXCHANGE

**Record Locator & Exchange** allows healthcare providers to quickly see where patients have received care and locate and exchange records from across all 50 states and Washington, D.C., regardless of care setting or EHR.

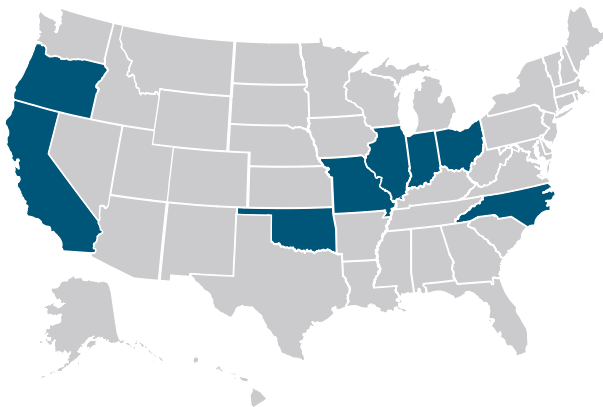
**16 MILLION**  
clinical documents exchanged annually\*

**USED BY 51,888 CLINICIANS**  
representing 3,130 organizations  
across 48 states and Washington, D.C.

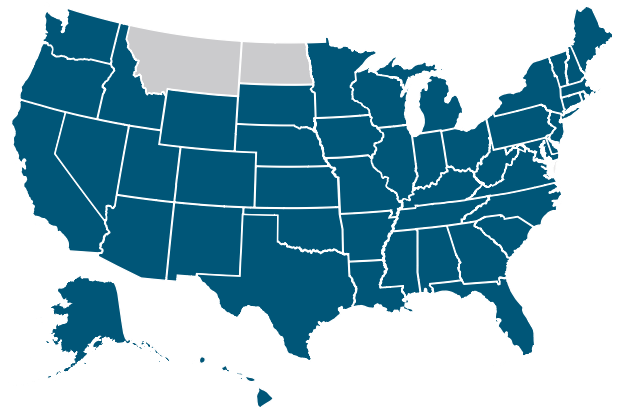
**65 MILLION**  
documents listing patients' previous  
care locations exchanged annually\*

### WHERE ARE CLINICIANS USING RECORD LOCATOR & EXCHANGE?

DECEMBER 2016



DECEMBER 2017

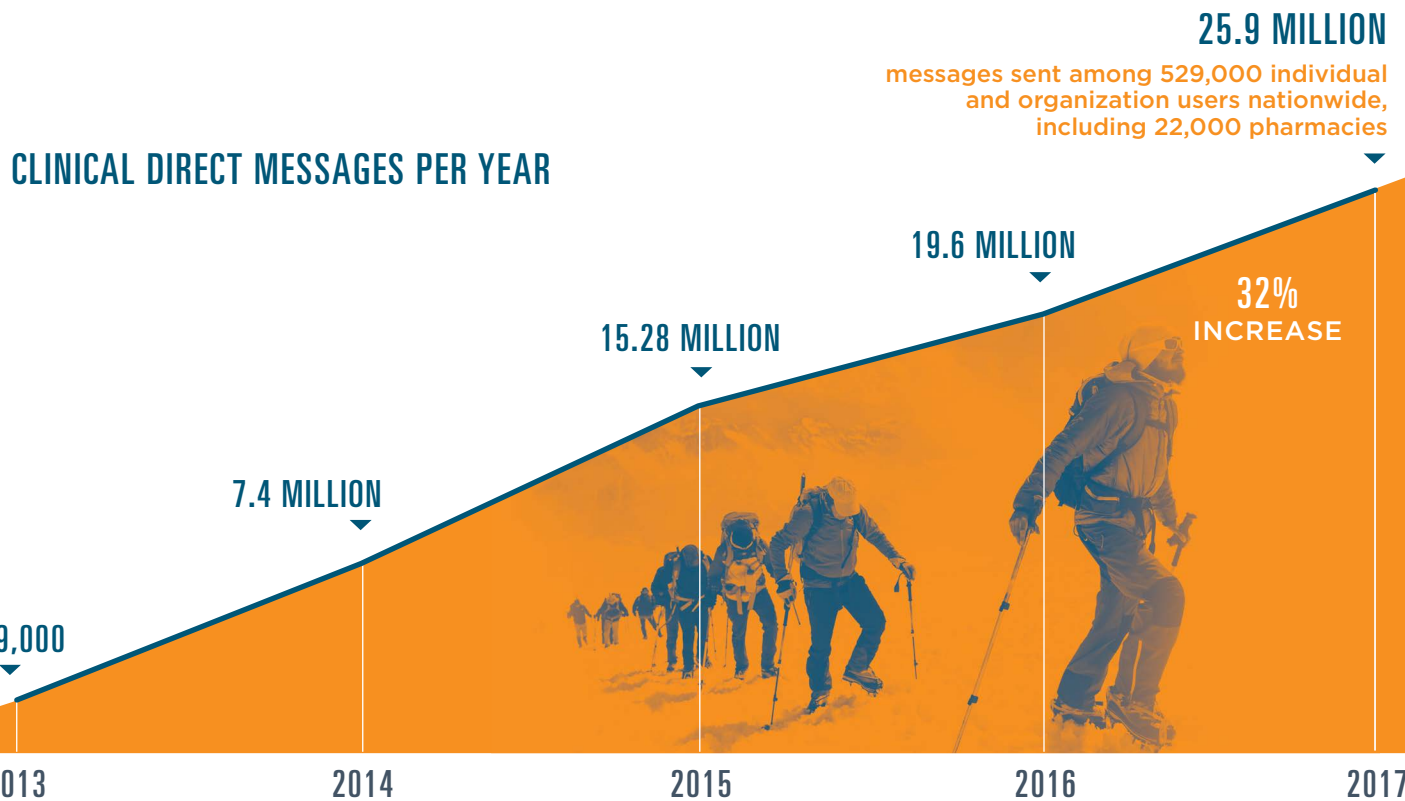


\*Annualized rate as of December 2017

# CLINICAL DIRECT MESSAGING

MAKING CARE COORDINATION SWIFTER AND SIMPLER

**Clinical Direct Messaging** lets pharmacists and clinicians seamlessly send and receive information across multiple care collaboration scenarios.



# INSIGHTS & ALERTS

INSIGHTS FOR MEDICATION ADHERENCE

**Insights for Medication Adherence** highlights adherence issues and gaps in care with medication summaries and real-time messages, sent straight from PBMs and health plans to the point of care.

**197,000 INSIGHTS FOR MEDICATION ADHERENCE**  
alerts sent to the point of care



## IN 2017, WE WORKED TOGETHER TO **CONVENE THE INDUSTRY AND ADVANCE HEALTHCARE**

Year after year, we continue to make progress with the help of every participant in the Surescripts Network Alliance. In 2017, we convened experts and workgroups from across the alliance and partnered with leading industry organizations and standards bodies to advance healthcare through research, analysis, education and advocacy.

Together, we applied our experience and energy to some of the biggest challenges facing healthcare on the national level. We gathered top healthcare leaders to help make price transparency a reality for prescribers and their patients. We collaborated on interoperability standards and initiatives with organizations including HL7, Carequality and DirectTrust.

We continued to work with our Critical Performance Improvement program to improve prescription accuracy by addressing e-prescribing's pain points. And we took action against the opioid epidemic on many fronts, wielding a combination of technology, education and public policy.

These issues are complex, and none will be solved overnight. But our results from 2017 show that together, we're making advances that matter to the lives of patients and healthcare professionals nationwide.



Our purpose is to serve the nation with the single most trusted and capable health information network, built to increase patient safety, lower costs and ensure quality care. Since 2001, Surescripts has led the movement to turn data into actionable intelligence and convened network participants to enhance e-prescribing, inform care decisions and advance healthcare. Visit us at [surescripts.com](https://www.surescripts.com) and follow us at [twitter.com/surescripts](https://twitter.com/surescripts).