

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2011

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SENATE BILL 768

Short Title: Standards for Electronic Prescriptions. (Public)

Sponsors: Senator Brock.

Referred to: Judiciary I.

April 20, 2011

1 A BILL TO BE ENTITLED
2 AN ACT TO ESTABLISH STANDARDS FOR TRANSMITTING ELECTRONIC
3 PRESCRIPTIONS FOR CONTROLLED SUBSTANCES TO PHARMACIES AND TO
4 ESTABLISH STANDARDS FOR ELECTRONIC PRESCRIBING SOFTWARE AND
5 HARDWARE.

6 The General Assembly of North Carolina enacts:

7 **SECTION 1.** Chapter 90 of the General Statutes is amended by adding a new
8 Article to read:

9 "Article 5G.

10 "Electronic Prescriptions.

11 **§ 90-113.90. Definitions.**

12 The following definitions apply in this Article:

- 13 (1) "Controlled substance" has the same meaning as in G.S. 90-87.
14 (2) "Pharmacy" means a pharmacy licensed pursuant to G.S. 90-85.21.
15 (3) "Practitioner" means any person licensed in this State to administer or
16 prescribe a controlled substance in the course of professional practice.
17 (4) "Prescription" has the same meaning as in G.S. 90-87.

18 **§ 90-113.91. Standards for transmitting electronic prescriptions.**

19 Any practitioner authorized to prescribe a controlled substance for the purpose of providing
20 medical or pharmaceutical care for a patient may electronically transmit a prescription to a
21 pharmacy if all of the following criteria are satisfied:

- 22 (1) The practitioner has a valid medical or pharmaceutical relationship with the
23 patient for whom the prescription is being transmitted.
24 (2) The prescription identifies (i) the transmitter's telephone number, (ii) the
25 time and date of transmission, (iii) the pharmacy that is the intended
26 recipient of the transmission, and (iv) any other information required by
27 federal or State law.
28 (3) The practitioner's electronic or digital signature or key code appears on the
29 electronic prescription order.
30 (4) The prescription is transmitted by the practitioner or the practitioner's
31 designated agent to a pharmacy of the patient's choice. If the pharmacy of
32 the patient's choice is not equipped with the capability to accept an electronic
33 prescription, the practitioner shall provide the patient with a written
34 prescription or transmit the prescription to the pharmacy of the patient's
35 choice verbally by telephone or by facsimile.
36 (5) The prescription is received only by the pharmacy of the patient's choice in a
37 manner that prevents an intervening person or entity from accessing.



1 viewing, reading, manipulating, altering, storing, or deleting the electronic
2 prescription prior to its receipt at the pharmacy.

- 3 (6) The prescription is transmitted directly from the practitioner to the pharmacy
4 of the patient's choice. If the practitioner provides the patient with an
5 electronic prescription for the patient to deliver to a pharmacy of the patient's
6 choice, the practitioner shall include the practitioner's original handwritten
7 signature on the electronic prescription. If the practitioner provides the
8 patient with a hard copy prescription generated from electronic media, the
9 practitioner shall include an electronic or manual signature on the hard copy
10 prescription. Any prescription with an electronic signature must be applied
11 to paper that utilizes security features to ensure the prescription is not subject
12 to any form of copying or alteration.

13 **"§ 90-113.92. Standards for electronic prescribing software and hardware.**

14 (a) Any person authorized to electronically transmit a prescription to a pharmacy under
15 G.S. 90-113.91 may use electronic prescribing software or hardware to complete the electronic
16 transmission if the electronic prescribing software or hardware meets all of the following
17 criteria:

- 18 (1) The electronic prescribing software or hardware supports real-time access to
19 all controlled substances covered by the patient's health insurance plan.
20 (2) All formulary and benefit information for a patient's health insurance plan is
21 available through electronic prescribing software.
22 (3) The electronic prescribing software or hardware does not permit the use of
23 any means of advertising to hinder or attempt to hinder, through economic
24 incentives or otherwise, the prescribing decision of a practitioner at the point
25 of care.
26 (4) The electronic prescribing software or hardware supports access to data
27 necessary for clinical and patient decision making, including adverse events
28 and up-to-date information on formulary, co-pay requirements, and
29 prescription tiers.
30 (5) The electronic prescribing software or hardware facilitates navigation of
31 health plan administration requirements, including a means to initiate
32 exceptions or prior authorization for coverage of restricted drugs to enable
33 the practitioner to have real-time access to information the practitioner is
34 required to provide for approval of exceptions or prior authorization,
35 including criteria for approval and information on how to appeal any denial
36 of the exception or prior authorization request.

37 (b) Nothing in this section shall be construed to prohibit a health insurance plan from
38 imposing other general exclusions, limitations, or requirements pertaining to health plan
39 administration, including quantity limits, prior authorization, step edits, e-messaging about
40 pharmacy benefit coverage, and other utilization management tools."

41 **SECTION 2.** This act becomes effective October 1, 2011.