



MINNESOTA
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Minnesota's Requirement for the Electronic Prior Authorization of Prescription Drugs

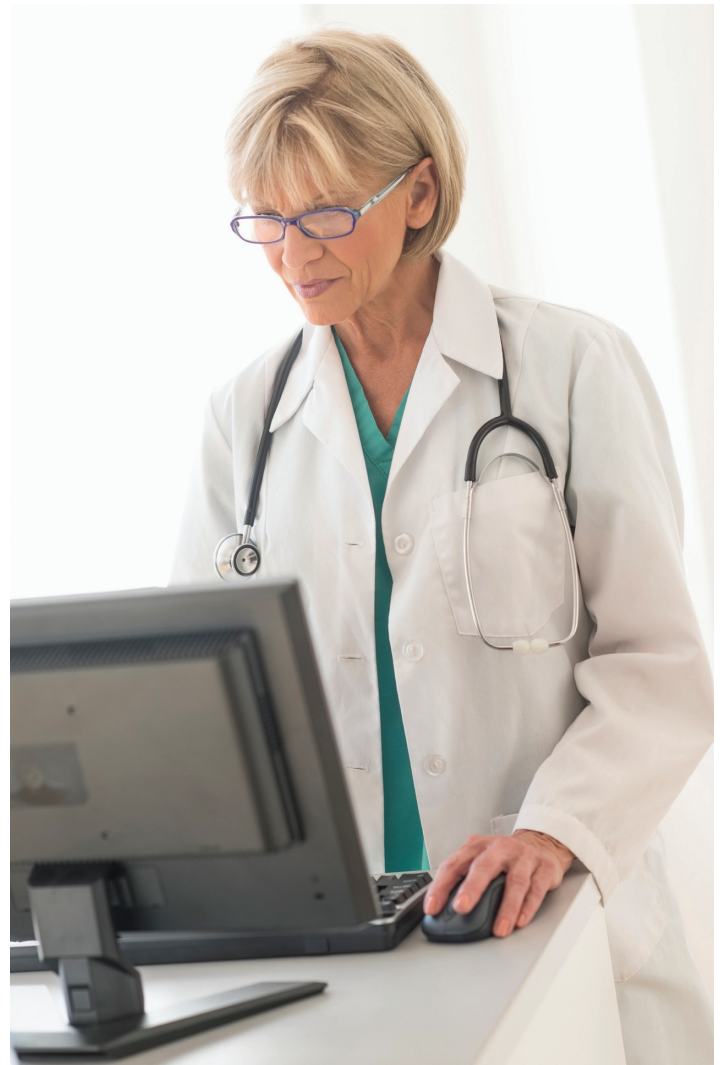
Effective January 1, 2016

Introduction

Today, the medication prior authorization (PA) process is a complex, cumbersome flow of information – often by phone or fax – that can result in delays in treatment and often leaves all parties – patients, physicians, other prescribers, pharmacists, and payers – dissatisfied.

January 2016 Mandate

Effective January 1, 2016, all Minnesota prescribers are required to submit, and payers are required to accept, electronic prior authorization requests for prescription drugs. Electronic prior authorization, or ePA, is an aspect of Minnesota's Electronic Prescription Drug Program law. This requirement is in alignment with other Minnesota initiatives intended to support data interoperability and administrative simplification throughout the health care system.



Requirements

The law requires the use of standard electronic transactions to support prescribing and prior authorization functions. The requirement for e-prescribing took effect on January 1, 2011. The vast majority of prescribers and pharmacies in Minnesota are in compliance with this requirement, although many are still implementing the additional requirements for the electronic prescribing of controlled substances (EPCS). If your practice is not yet sending controlled substance prescriptions electronically, you are encouraged to work with your vendor to understand what is needed to allow that to happen.

Electronic prescription drug prior authorization is expected to improve the authorization process and reduce the turn-around time for response. The new process will replace faxes, phone calls, access to multiple portals, and many of the other inefficient methods in place today.

Minnesota's law requires the use of the NCPDP SCRIPT Standard's ePA transactions. The SCRIPT Standard is what is used today for electronic prescribing so EHR/EMR vendors should be familiar with this technical document.

The ePA Process

Prescribers should already be receiving formulary and benefit information from payers within their e-prescribing systems (required under current law). This formulary and benefit information should include indicators of which drugs are on formulary and which are not, and which require PA. The information is not patient-specific and, as a result, will not indicate whether PA may have previously been obtained. So it is important to validate the need for PA by using the ePA process.

Prescribers will initiate the ePA process by sending a real-time message to the patient's payer (or pharmacy benefits manager/PBM) indicating the patient and desired medication. The payer will respond, also in real-time, with either a set of questions to be answered, or a message saying PA is not required. Once the prescriber sends the answers to the questions, the payer/PBM will send a response indicating if the request was approved. All of this is designed to happen within existing workflow and within a matter of minutes. Your vendor can work with you to ensure that this process is efficiently embedded into your practice and that staff are appropriately trained.

Preparedness

Minnesota is among the first states in the nation to require the use of ePA. Payers and EMR/EHR vendors are preparing for this new process in order to meet the January 1, 2016 deadline. If your practice is not going to meet the January 1, 2016, deadline, you are encouraged to communicate that to the payers you work with so contingency plans can be defined. The state will monitor compliance of providers and payers to ensure that all Minnesota health care providers and payers are able to support ePA, but enforcement action available to the state is limited. Web-based services that electronically manage prescription drug prior authorization may be in compliance with the requirement, but you are encouraged to confirm this with your compliance/legal counsel.

Additional Resources

The complete text of Minnesota's ePA law can be found at: <https://www.revisor.mn.gov/statutes/?id=62j.497>.

The ePA Companion Guide as referenced in the statute: <http://www.health.state.mn.us/auc/guides.htm>

Minnesota Electronic Prescribing Guide: <http://www.health.state.mn.us/e-health/eprescribing/index.html>

Additional resources from MMA and MMGMA can be found here: <http://www.mnmed.org/Advocacy/Prior-Authorization>.



Conclusion

Successful ePA will require change by physicians, payers and PBMs. Change is necessary not only to comply with the law, but also to capitalize on the opportunity of ePA to reduce administrative inefficiencies and to improve timely access to medications for patients.