

**Bulletin Number:** MSA 11-55

**Distribution:** Pharmacy Providers

**Issued:** December 29, 2011

**Subject:** Documentation Requirement for Electronically Transmitted Prescriptions

**Effective:** February 1, 2012

**Programs Affected:** Medicaid, Children's Special Health Care Services (CSHCS), Maternity Outpatient Medical Services (MOMS), Adult Benefits Waiver (ABW) and Plan First!

Effective for dates of service on or after February 1, 2012, the Michigan Department of Community Health (MDCH) will modify documentation requirements for non-controlled electronically transmitted prescriptions.

If a prescription is created, signed, transmitted and received electronically, all records related to that prescription must be retained electronically. Records must be retained electronically for a period of seven years, or longer if specified by law. Records must be made available within 72 hours or as requested. The electronically transmitted prescription must include all of the following information:

- The name, address, and telephone number of the prescriber;
- The full name of the patient for whom the prescription is issued;
- An electronic signature or other identifier that specifically identifies and authenticates the prescriber;
- The time and date of the transmission;
- The identity of the pharmacy intended to receive the transmission; and
- Any other information required by the federal act or state law.

The electronic equipment or system utilized in the transmission and communication of prescriptions must provide adequate confidentiality safeguards and be maintained to protect patient confidentiality as required under any applicable federal and state law and to ensure against unauthorized access. The electronic transmission of a prescription must be communicated in a retrievable, recognizable form acceptable to the intended recipient. The electronic form utilized in the transmission of a prescription must not include "dispense as written" or "d.a.w." as the default setting.

Prior to dispensing a prescription that is electronically transmitted, the pharmacist must exercise professional judgment regarding the accuracy, validity, and authenticity of the transmitted prescription. An electronically transmitted prescription that meets the above requirements is the original prescription.

## Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

## Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov). When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved

A handwritten signature in cursive script that reads "Stephen Fitton".

Stephen Fitton, Director  
Medical Services Administration