



2021
National
Progress
Report

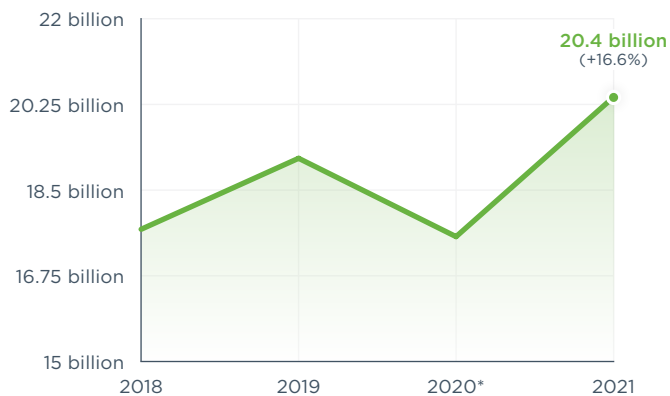
In a world reshaped by COVID-19, the Surescripts Network Alliance® spent the year forging onward—into a new normal marked by daunting challenges, but also by a spirit of determined innovation. Whether they were providing care directly or supporting the front lines from far behind the scenes, American healthcare professionals made use of shared, trusted health intelligence in new ways to make care better, safer and more cost-effective.

Read on to explore the progress we made together in 2021.

Delivering billions of trusted insights to empower healthcare professionals nationwide

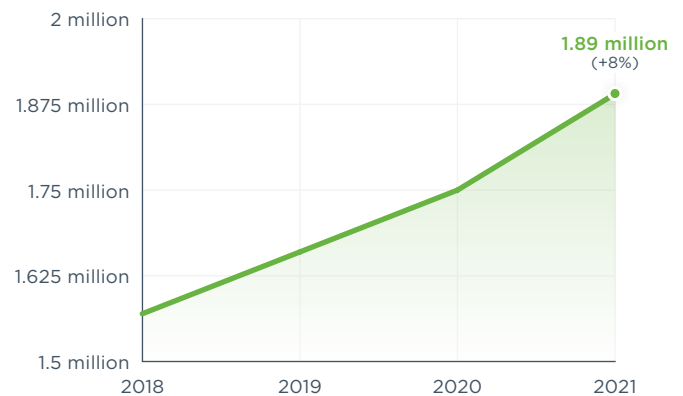
The Surescripts Network Alliance convenes nearly every electronic health records (EHR) vendor, pharmacy benefit manager, pharmacy and clinician in the U.S. We also connect health plans, long-term and post-acute care organizations, and specialty pharmacies and hubs. The Network Alliance continued expanding in 2021, fueling significant growth in health intelligence shared across the Surescripts network.

Network transactions



*Medication History deduplication initiated

Unique healthcare professionals & provider organizations connected



Note: Some individual providers have multiple provider IDs assigned by different states or software vendors. In 2021, our provider directory contained 2.17 million provider IDs.

99.99% network uptime

More than 99% of the U.S. population represented in our master patient index¹

0.03 seconds to return an accurate patient match on average

Optimizing accuracy & performance across the network

In 2021, Surescripts Network Alliance participants could count on access to a fast, far-reaching network that delivered greater accuracy and efficiency throughout the year.

Since 2016, the Critical Performance Improvement program has convened Network Alliance participants to collectively increase prescription accuracy, supported by sophisticated technologies to monitor quality. All electronic prescriptions on the Surescripts network (except those for compounds and supplies) are analyzed by Surescripts Sentinel®, which identifies opportunities for quality improvement.

10% networkwide improvement in Quality Index Score, which measures factors that could impact the prescribing process such as prescription accuracy, directory alignment and adoption of appropriate transactions and data elements such as RxChange, Structured & Codified Sig and National Drug Code (NDC) identifiers

23% of EHRs using the Structured & Codified Sig field, up from 11% in January 2021

40% RxChange response rate networkwide, up from 32% in 2020

Starting in 2020, Surescripts began improving Medication History quality with automated data augmentation and deduplication. This work continued making medication histories more comprehensive and easier to understand in 2021.

Supplied additional data for **86% of medication histories** with augmentation enabled

Removed duplicate medication records from **62% of medication histories** with deduplication enabled

2021 Surescripts White Coat Award

The 2021 Surescripts White Coat Award recognized the pharmacies, health systems, EHR vendors and pharmacy technology vendors across the Surescripts Network Alliance who made inspiring progress in improving e-prescription accuracy and efficiency. We celebrated winners in three categories: Highest Accuracy, RxChange Champion and Structured & Codified Sig Champion.

Winners

athenahealth, Inc.
Bassett Healthcare Network
Epic
Humana Pharmacy
Johns Hopkins Medicine
Lexington Medical Center
MidMichigan Health
NextGen Healthcare
NowRx Pharmacy
ScriptSure DAW Systems, Inc.
Walmart

Beyond e-prescription accuracy, Surescripts convened network participants for two Optimizing Performance workshops at our 2021 Surescripts Network Alliance Forum. These meetings focused on improving Eligibility & Formulary performance and examining critical challenges and opportunities impacting patient safety and workflow efficiency across the network.

Maintaining security & modernizing standards

As in years past, the Surescripts network maintained its certifications with leading security and privacy organizations and standards including **HITRUST, the Electronic Healthcare Network Accreditation Commission (EHNAC), Webtrust and DirectTrust**.

Last year also marked the sunset of Surescripts E-Prescribing and Medication History v.10.6 as part of the industrywide **migration to NCPDP SCRIPT Standard v2017071**. This standard modernizes e-prescribing, improves patient safety and prescription accuracy, and creates workflow efficiencies for healthcare providers and pharmacies. We worked to deliver the benefits of the updated standard to as many providers as possible while limiting disruption and continuing to keep patients safe.



Simplifying intelligence sharing for safer, more affordable prescriptions

Eligibility & Formulary

Eligibility brings clear information about a patient’s prescription benefit coverage into workflows at the prescriber’s office and at the pharmacy, where 90 day prescription pickup rates have found to be 2.7 percentage points higher for prescriptions informed by an Eligibility response.² Formulary delivers plan-level formulary information to prescribers from pharmacy benefit managers. In 2021, this information helped improve prescribing efficiency and medication adherence as part of the foundation for Electronic Prior Authorization, E-Prescribing, Medication History, Real-Time Prescription Benefit and Record Locator & Exchange.

Used by **1.89 million healthcare professionals and organizations** (+8% in 2021)

Informed nearly **4 billion care events**

On-Demand Formulary

Introduced in March 2020, On-Demand Formulary delivers plan-level formulary information to prescribers at the point of care via a request and response transaction—often within milliseconds. With this option, EHRs eliminate the need to download large formulary files every week and can deliver real-time data that is likely to be more accurate.

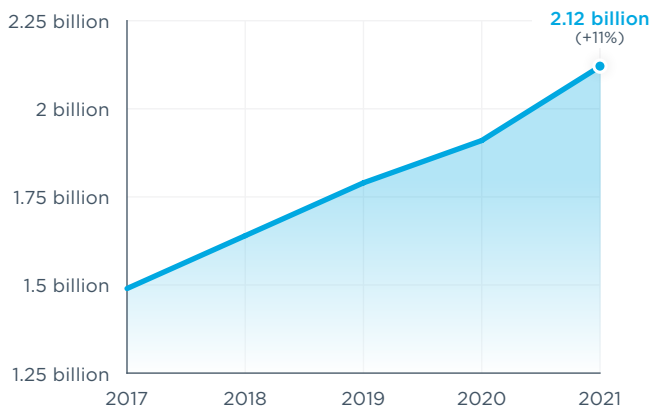
43% increase in users in 2021

\$10,995 monthly savings predicted for an EHR vendor supporting 100 practices (compared to downloading formulary files)⁵

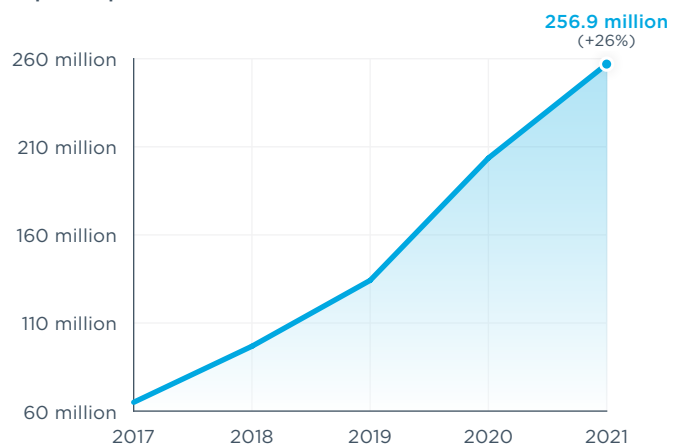
E-Prescribing

E-Prescribing continued raising the bar for safe, clear prescriptions in 2021 with better data quality and more efficient communication between pharmacists and prescribers. With 20% to 26% of U.S. adults using telemedicine per month in 2021, it’s no surprise that E-Prescribing use grew throughout the year.⁴

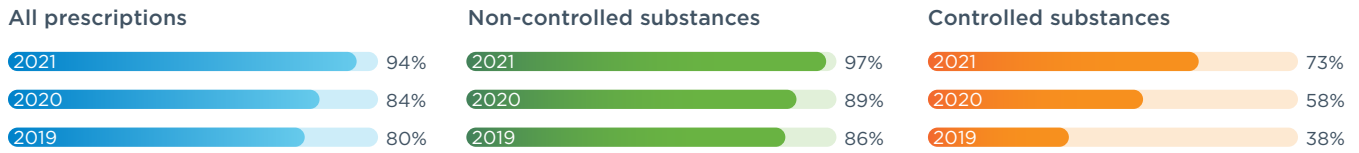
E-prescriptions filled



E-prescriptions for controlled substances filled



How many prescriptions filled are electronic?



Note: Surescripts estimates that 84% of prescriptions written are filled, based on information from the National Association of Chain Drug Stores.

E-Prescribing utilization among prescribers



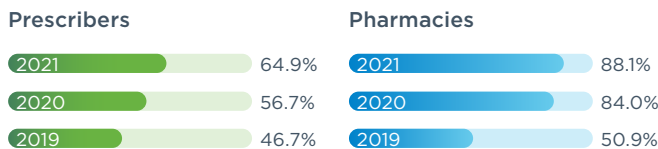
In 2021, approximately 100,000 prescribers added E-Prescribing into their routine, increasing the total number of prescribers using E-Prescribing by 10%. They joined virtually every pharmacy in the U.S. in handling prescriptions electronically.

Note: Surescripts estimates that there are approximately 1.2 million total prescribers in acute and ambulatory settings in the U.S. based on data from sources including Enclarity and Definitive Healthcare.

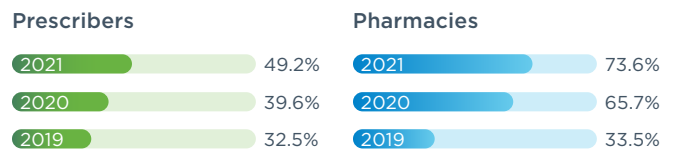
CancelRx & RxChange

The Surescripts Network Alliance made e-prescribing even more efficient in 2021 with significant increases in the use of CancelRx and RxChange. These transactions make it easy to cancel a prescription, suggest an alternative, or request that a prescriber initiate prior authorization.

CancelRx enablement



RxChange enablement



Electronic Prescribing for Controlled Substances (EPCS)

EPCS brings extra safety and security to controlled substance prescriptions—especially important amid an opioid overdose crisis that spiked as the COVID-19 pandemic hit the U.S.⁵ Already used by virtually all pharmacies, EPCS saw an 18% jump in the number of enabled prescribers in 2021.

Percent of e-prescribers enabled for EPCS



Where is e-prescribing required by law?

A Centers for Medicare & Medicaid Services (CMS) rule requiring that Part D providers use EPCS took effect January 1, 2021 (pursuant to the requirements of the SUPPORT for Patients and Communities Act), and state legislation continued moving forward throughout the year.

3 states passed mandates in 2021.

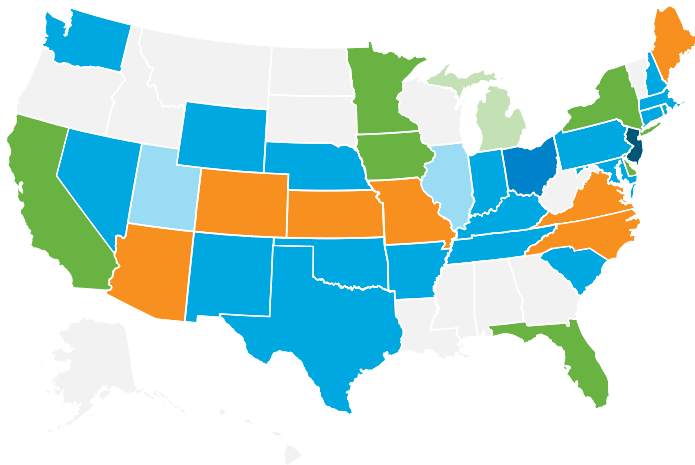
14 states had mandates take effect during 2021.

6 states had mandates take effect on January 1, 2022.

32 states have mandates in effect as of January 2022.

35 total states have now passed e-prescribing mandates.

75% of the U.S. population lives in states with mandates in effect.⁶

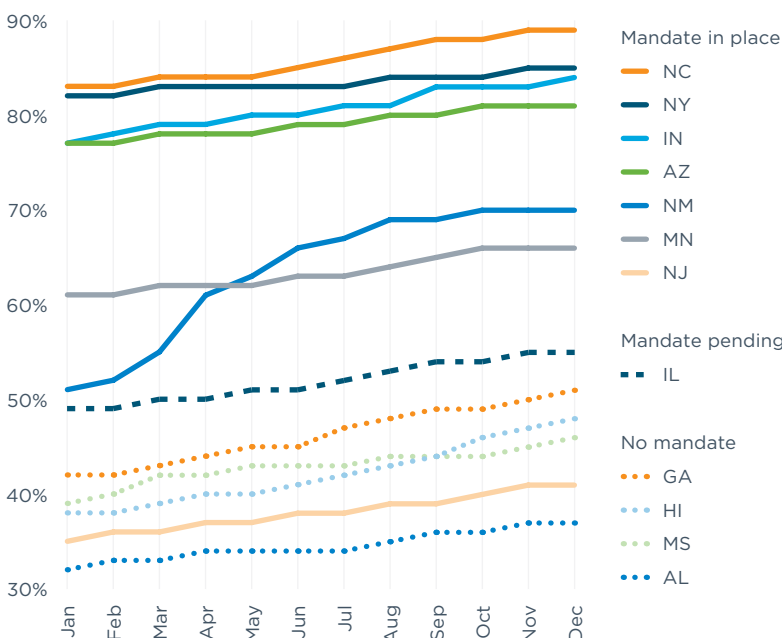


As of January 2022

- Currently required for all prescriptions
- Will be required for all prescriptions
- Currently required for all controlled substances
- Will be required for all controlled substances
- Currently required for some controlled substances (e.g. opioids, or all but Schedule V substances)
- EHR EPCS adoption required
- Legislation in progress

Requirements in Indiana and Washington were postponed to January 1, 2022. Michigan's requirement was postponed to January 1, 2023.

How does legislation impact EPCS prescriber enablement?



North Carolina saw the highest prescriber enablement in the nation in 2021.

Though **Indiana's** mandate was postponed to January 1, 2022, its enablement rate rose from 77% to 84% over the course of 2021.

New Mexico's mandate took effect in April 2021, and prescriber enablement jumped accordingly.

Illinois passed a mandate that will take effect on January 1, 2023.

New Jersey's mandate requires only EHRs to adopt EPCS—although bills to require e-prescribing for all prescriptions have now been introduced.

With just 37% of prescribers enabled, **Alabama** ended 2021 with the lowest enablement rate in the nation.

Real-Time Prescription Benefit

By the end of 2021, nearly half of U.S. prescribers were using Real-Time Prescription Benefit to access patient-specific benefit information, out-of-pocket costs and more affordable medication alternatives. Significant growth gave even more clinicians the power to address cost concerns and boost adherence at the point of care. The solution also helped Medicare Part D health plans comply with a requirement to enable electronic transmission of eligibility, formulary and benefit information to their members' prescribers that took effect January 1, 2021.⁷

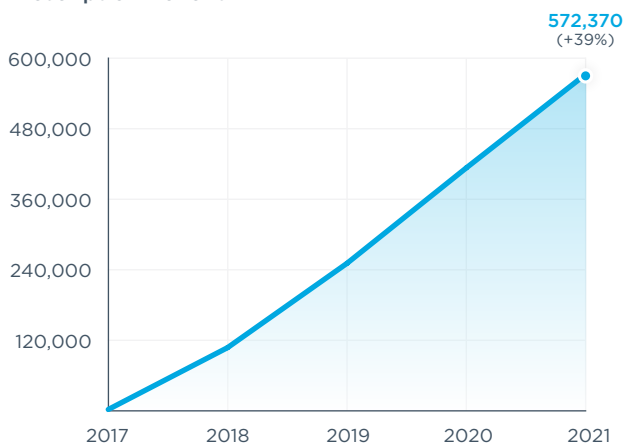
\$36.68 average savings

when used to identify a less costly alternative

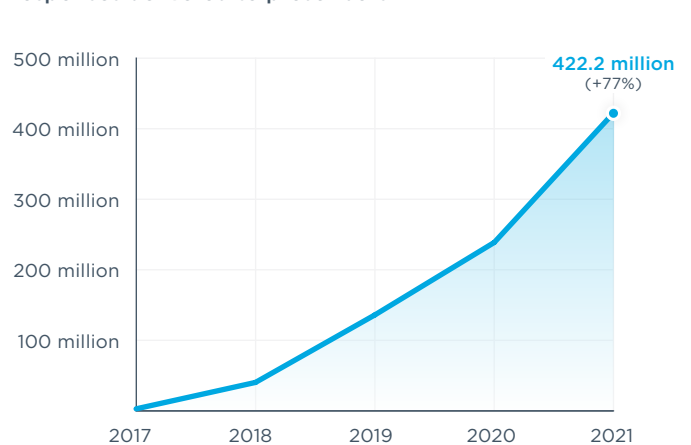
Pharmacy benefit managers and health plans representing **99% of insured patients** are contracted for Real-Time Prescription Benefit.⁸

98% of U.S. prescribers served by contracted EHRs

Prescribers using Real-Time Prescription Benefit



Real-Time Prescription Benefit responses delivered to prescribers



What specialties receive the most Real-Time Prescription Benefit responses?

Rank by volume	Specialty	Average savings per prescription
1	Internal medicine	\$25
2	Family practice	\$22
3	Psychiatry	\$81
4	Cardiology	\$29
5	Ophthalmology	\$40

What medications generate the most Real-Time Prescription Benefit responses?

Rank by volume	Therapeutic class*	Average savings per prescription
1	Antidepressants	\$51
2	Blood-pressure lowering medication (antihypertensive agents)	\$27
3	Lipid-modifying agents	\$32
4	Diabetic therapy	\$116
5	Stomach-acid blocking agents	\$26

*Based on pharmacologic class

Handling prior authorization far faster

In 2021, America's Health Insurance Plans released the results of a study assessing the impact of electronic prior authorization on health plans and providers. They found that implementing this solution:

Reduced the median wait time for a decision by more than two-thirds, **from 18.7 to 5.7 hours**

Improved timeliness of care for **71% of experienced users**

Made it easier to understand if prior authorization was required for **60% of experienced users**¹⁰

Medical practices also shared the time savings they saw from Electronic Prior Authorization with Surescripts.

“We have been able to cut down on time for prior authorizations after implementing Surescripts Electronic Prior Authorization. **We are finishing 10 electronic prior authorizations in the time it takes to finish one to two manually.**

—Candace Minter

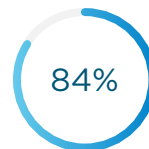
Pharm.D., Pharmacy Operations Manager, Sentara Medical Group

Electronic Prior Authorization

Electronic Prior Authorization lets healthcare professionals easily obtain prior authorizations in real time at the point of care. With nearly every pharmacy benefit manager in the U.S. now connected, more prescribers and patients benefited from streamlined workflows and less wait time. State legislatures across the nation also saw the value: By the end of 2021, 24 states had proposed or enacted legislation allowing or requiring electronic prior authorization.



Pharmacy benefit managers and health plans representing **98% of insured patients** are contracted for Electronic Prior Authorization.⁹



of U.S. prescribers served by contracted EHRs

66% more prior authorizations processed electronically in 2021

25% increase in daily average number of prescribers using Electronic Prior Authorization in Q4 of 2021, compared to Q4 of 2020

Specialty Patient Enrollment

With Specialty Patient Enrollment automating the specialty prescribing process for more clinicians in 2021, prescribers could share enrollment information with specialty pharmacies more easily, pharmacists got the clinical information they needed alongside the electronic prescription, and hubs could initiate patient support services sooner.

38% increase in prescribers

enabled for Specialty Patient Enrollment in 2021

120 new specialty medications supported by Specialty Patient Enrollment, bringing the total to 282




Unique disease states supported by Specialty Patient Enrollment

Prescribers can use Specialty Patient Enrollment for any specialty medication. However, some disease states require additional clinical information, such as lab values, for the pharmacist to dispense the prescription. In 2021, Surescripts added support for these unique requirements for 14 additional disease states.

Anemia	Hyperparathyroidism
Asthma/allergies	Infertility
Crohn's disease	Migraine
Cryopyrin-associated periodic syndrome	Multiple sclerosis
Enzyme replacement	Neutropenia
Growth hormone	Ophthalmic disease
Hepatitis B	Osteoporosis
Hepatitis C	Psoriasis
Hereditary angioedema	Pulmonary arterial hypertension
HIV/AIDS	Rheumatoid arthritis
Hyperammonemia	Transplant therapy
Hypercholesterolemia	New in 2021

A smarter, swifter specialty medication experience

In addition to Specialty Patient Enrollment, pharmacists and prescribers used many Surescripts solutions to inform and accelerate the specialty medication journey in 2021.

-  Pharmacies used **E-Prescribing** to fill **more than 18 million specialty prescriptions** across 4,385 NDC identifiers.
-  Prescribers used **Real-Time Prescription Benefit** to find more affordable options for **1.55 million specialty prescriptions** (+67% in 2021), **saving patients an average of \$264** per prescription.
-  Used by pharmacies to access clinical information needed to fill prescriptions, **Specialty Medications Gateway** transactions more than tripled in 2021. Through automation, we supported them by gathering information from **22 million clinical documents**.

Cutting specialty prescription turnaround time by two days

Surescripts and Point-of-Care Partners conducted surveys and observations to assess the impact of Surescripts Specialty Medications solutions at Accredo, a major specialty pharmacy, and three provider practices. Results published in 2021 showed that the prescribing and fulfillment process picked up speed at several points of the specialty medication journey. Through implementing Surescripts solutions, they:

- Cut average prescription turnaround time by **two days**
- Reduced calls to prescribers' offices for missing clinical data by **44%**
- Increased dispense rate by **14%**
- Saved **one to two hours per week** for practices through reductions in administrative tasks involving phone calls, faxes and paperwork.¹¹

“We all want the same thing: clear communication of the patient history that helps get patients started on therapy in a safe and timely manner. Clear communication ultimately improves adherence and leads to better patient outcomes.

—Katie Reeves

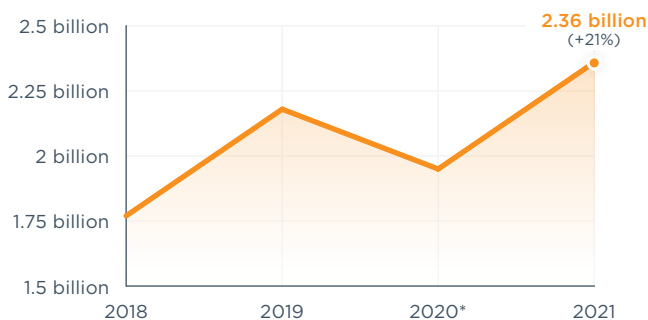
Senior Product Manager, Accredo

Arming healthcare professionals with patient intelligence

Medication History

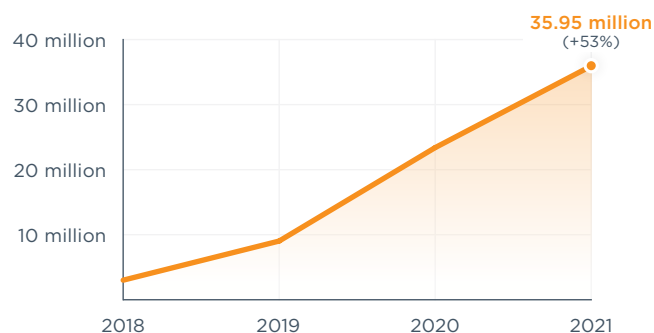
Medication History provided a cleaner, more complete and intelligently enhanced picture of medications prescribed and dispensed in 2021, helping users avoid adverse drug events and readmissions. A new patient notifications feature for Medication History for Populations alerted clinicians and care managers to important medication activities such as a missed refill or a prescription from a new provider, letting them reach out to address adherence issues or safety risks in between patient visits.

Medication histories delivered



*Deduplication initiated

Medication histories for populations delivered



Care Event Notifications

In 2021, Surescripts added another way for clinicians and care managers to receive timely patient intelligence. With Care Event Notifications, providers and care managers stay informed when their patients experience significant care events, such as going to a doctor, presenting at a hospital and being admitted or discharged. Care Event Notifications helps hospitals meet a CMS requirement to send electronic patient event notifications of a patient's admission, discharge, or transfer to another healthcare facility, community provider or practitioner, which took effect on May 1, 2021.¹⁵

Improving adherence for populations nearly 60%

Mount Sinai Health System's population health team partnered with Surescripts to give care navigators proactive insight into medication adherence for thousands of patients with diabetes, hypertension and high cholesterol by alerting them to medication-related events, including missed fills. Five months after implementation, their overall **proportion of days covered (PDC) score had gone up nearly 60%**.¹²

“Our goals are to improve medication adherence and related patient outcomes as well as reduce readmissions and unnecessary medication spend on the part of value-based plans and patients.

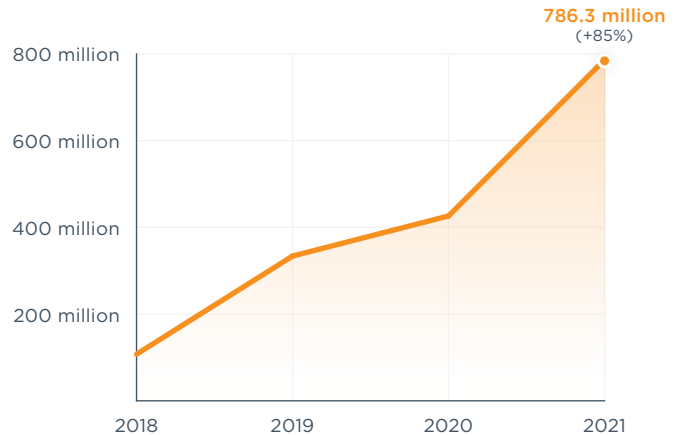
—Ruchi Tiwari

Pharm.D., Executive Director
of Ambulatory Pharmacy
and Population Health,
Mount Sinai Health System

Record Locator & Exchange

In 2021, more than 197,000 clinicians used Record Locator & Exchange to quickly see where patients had received care and locate medical records from different care settings and EHRs, a 44% increase from 2020. Users hailed from 26,781 organizations across all 50 states and Washington, D.C. Together, they accessed 786.3 million links to clinical document sources.

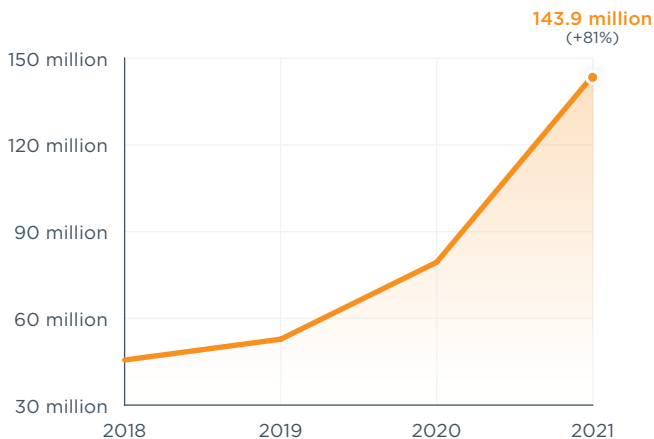
Links to clinical document sources exchanged



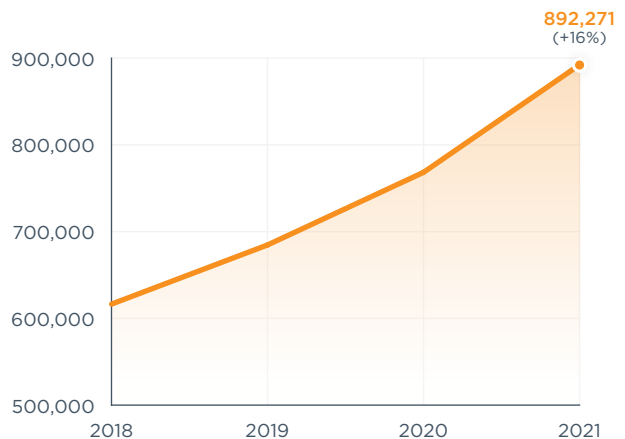
Clinical Direct Messaging

Nearly 900,000 individuals and organizations—including more than 23,000 pharmacies—used Clinical Direct Messaging for secure, HIPAA-compliant exchange of protected health information in 2021.

Clinical Direct Messaging transactions



Individuals & organizations using Clinical Direct Messaging



Keeping health systems, pharmacies & public health agencies connected during COVID-19

When the COVID-19 pandemic hit, the Surescripts Network Alliance mobilized to use an existing tool—Clinical Direct Messaging—to meet the new demands of sharing information about case reports and immunizations. This solution continued to help keep public health agencies and primary care providers informed in 2021.

51 healthcare organizations enabled to send electronic case reports for COVID-19 diagnoses to public health agencies nationwide

17.8 million COVID-19 case reports (+200%) sent to 66 public health jurisdictions

21 million vaccine notifications delivered to primary care providers, including 16 million for COVID-19 vaccinations

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13. Centers for Medicare & Medicaid Services, "Interoperability and Patient Access Fact Sheet," March 9, 2020, <https://www.cms.gov/newsroom/fact-sheets/interoperability-and-patient-access-fact-sheet>.



Our purpose is to serve the nation through simpler, trusted health intelligence sharing, in order to increase patient safety, lower costs and improve the quality of care. At Surescripts, we align healthcare organizations across the nation and give healthcare professionals the trusted insights they need to serve patients. We convene the **Surescripts Network Alliance** to enhance prescribing, better inform care decisions and advance healthcare as a whole. Visit us at surescripts.com and follow us at twitter.com/surescripts.