Prescriptions (Beta)

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Prescriptions Beta covers the updates coming to OfficeEMR prescribing to meet new national e-prescribing standards (NCPDP), released in phases. First, real-time formulary coverage and patient pricing estimates appear while you prescribe. Next, in summer 2027 the prescription messages we exchange with pharmacies move to the new standard, delivered together with a modernized set of prescription screens, starting with the Prescription Queue. Articles are added here, detailing new functionality, as it is released in each phase. Be sure to check back for what's new and how to manage it.

Coverage & Benefit Summary

PRESCRIPTIONS BETA

Coverage and estimated cost, checked for you while you prescribe.

Coverage tells you what the plan allows, before you commit. The benefit check tells you what the patient pays, right before you send.

You can always finish the prescription. If a check is slow or fails, you can still send, queue, batch or print your prescription - no need to wait.

WHEN YOU'LL SEE THIS

These screens turn on for all practices on **Wednesday, December 2, 2026**. No setup is required. Your practice can turn either screen off at any time - see *Prescription Coverage and Benefit Checks*.

Coverage panel in Prescriptions

Payer Formulary Details via Surescripts

Appears when you select a medication.

- Whether the medication is covered, and the copay
- Covered alternatives from the patient's plan
- Therapeutic alternatives
- Coverage limits, such as quantity limits and their date ranges
- Checks several medications on one prescription
- Refresh, or check on demand with **Get Coverage Details**

CoverMyMeds screen

Real-time prescription benefit and ePA

Appears when you send, queue, batch or print.

- Patient's price at the selected pharmacy
- This is the patient's actual estimated cost and is more precise than the plan copay shown earlier
- Flags when prior authorization is required

- Assign the ePA to a user or group; mark it urgent
- Lower-cost options: other pharmacies, quantities or medications
- Alerts from the plan for the provider
- **Send/Queue as Prescribed** is always available

You control it. You don't have to wait for the coverage and benefit details to return - your send prescription controls work just as they always have. We also provide your practice with related Company Setting to control your practice experience. See *Prescription Coverage and Benefit Checks* to learn more.

Reading the Coverage Panel

STEP 1 OF PRESCRIBING

What the plan allows, before you commit.

The Coverage panel appears as soon as you select a medication. This is the cheapest moment to change what you are prescribing.

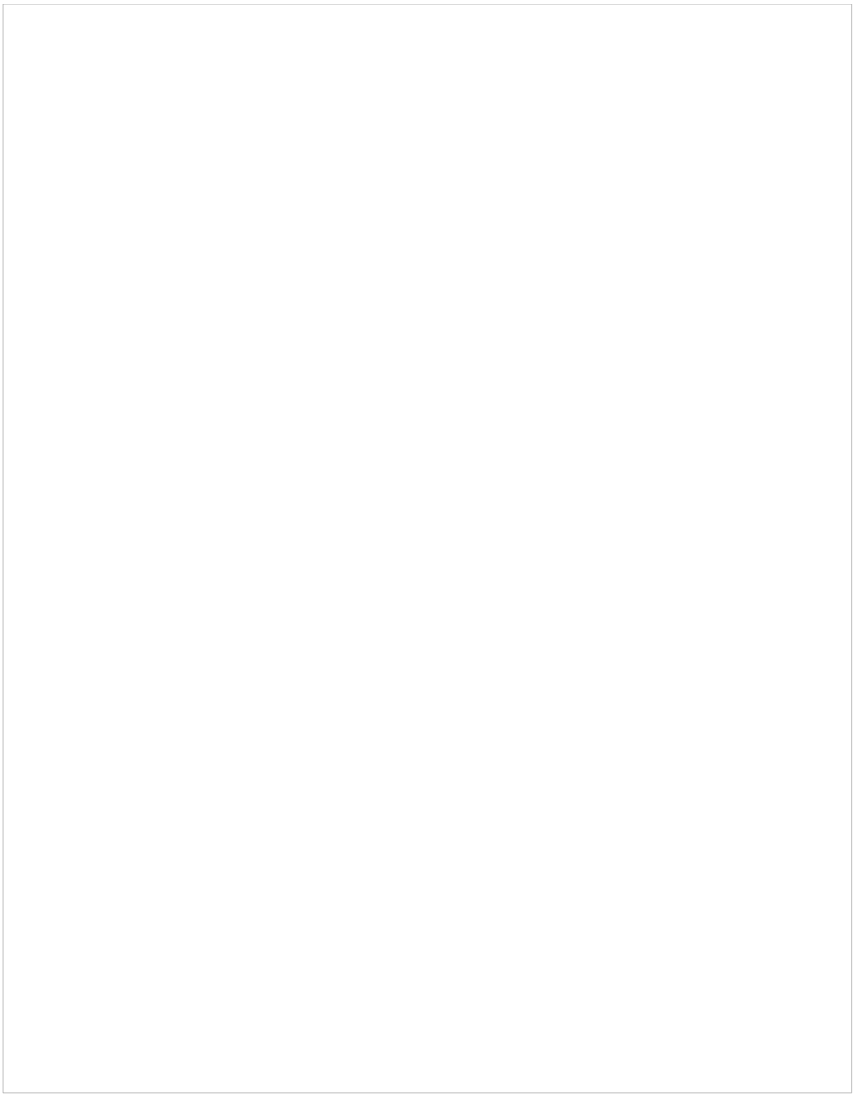
On the left

- **Coverages** - the plan that answered, and when eligibility last ran
- **Prescription Information** - the medication you selected and its formulary status
- **Coverage** - limits the plan applies, such as quantity limits and their date ranges
- **Copay** - what the plan generally charges. The patient's actual cost comes later, on the CoverMyMeds screen

On the right

- **Payer Alternatives** - medications this patient's plan suggests instead, in the order the plan returned them
- **Therapeutic Alternatives** - clinically similar medications from our drug database, not from the plan (similar display to Payer Alternatives)
- **Copay** - appears on an alternative only when the plan returned cost detail for it. No button means the plan did not send one

Each alternative shows its own formulary status, so you can see which ones the plan prefers.



Formulary status, in plain terms

The status comes from the patient's plan and tells you how the plan treats this drug - preferred, on formulary, non-formulary, or not reimbursable. A non-formulary or non-reimbursable drug can still be prescribed; the patient may simply pay more.

Checking again

Coverage runs automatically when you select a medication through Search or Favorites. For a prescription you copied, refilled, or pulled from history, use **Get Coverage Details** to request it for that prescription.

Nothing here stops you prescribing. Whatever the panel shows, or does not show, your send, queue, batch and print controls work exactly as they always have.

Reading the CoverMyMeds Screen

STEP 2 OF PRESCRIBING

What the patient pays, right before you send.

The CoverMyMeds screen opens when you send, queue, batch or print - before the prescription goes anywhere. It covers your prescription pad, so the prescription details are repeated at the bottom for reference.

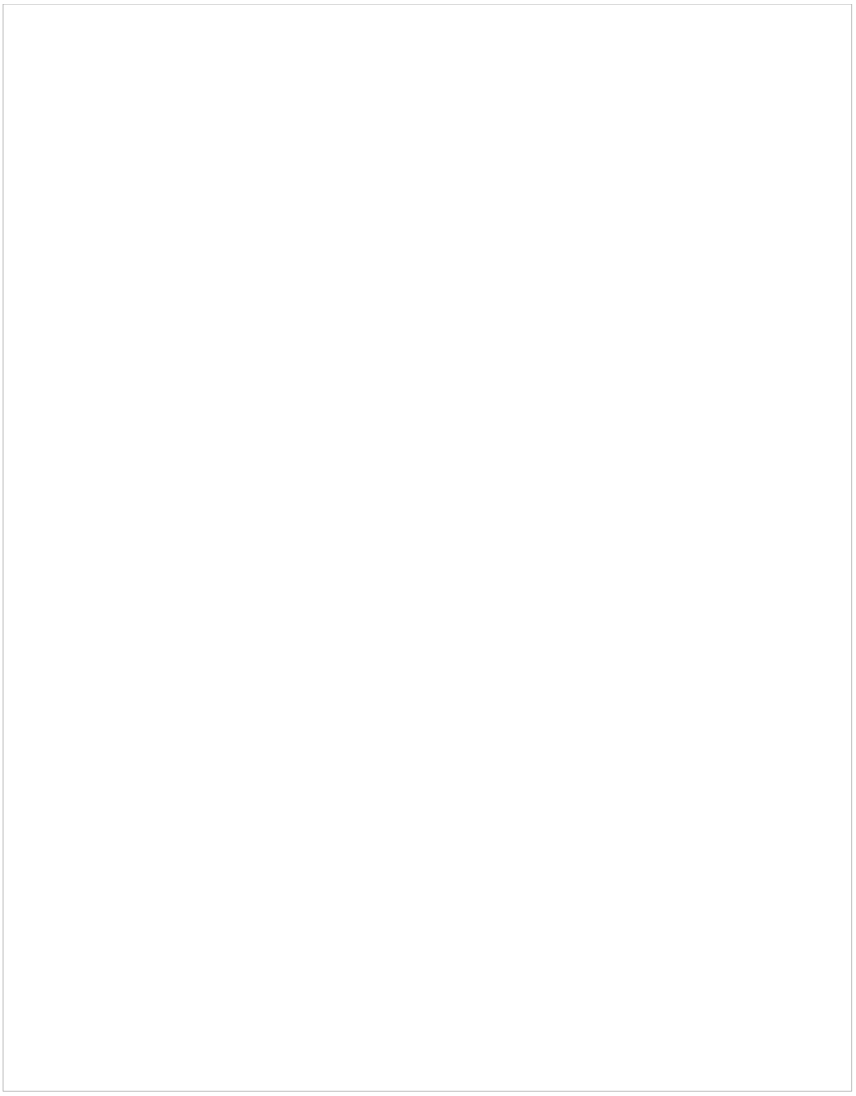
On the left

- **Electronic prior authorization** - whether the plan requires one, and what happens next. See *Prior Authorization on the CoverMyMeds Screen*
- **Prescription and pricing** - the medication as written, the estimated patient cost, and what makes up that amount.
- **Pharmacy** - the pharmacy currently on the prescription
- **Plan and eligibility** - the plan that answered and when eligibility last ran
- **Plan messages** - notices the plan sent along with the price. Information only

On the right

- **Pharmacies** - the medication you prescribed, priced at other pharmacies and quantities
- **Medications** - different medications the plan suggests, each with its own pharmacy options

Both lists come from CoverMyMeds and appear in the order they sent them.



The estimate, in plain terms

This is the patient's estimated cost for this medication, at this pharmacy, on this plan. It is more precise than the plan copay you saw on the Coverage panel, so the two numbers will often differ.

Beneath it you may see what makes up that amount - copay, coinsurance, amount applied to the deductible - along with how much deductible remains. The plan does not always send this detail.

Our process is using limited test data which limits what we can present. Your experience will vary across all areas of data returned.

Comparing the options

Each row shows its own quantity and days supply, and these often differ between rows. A larger price may simply be a longer supply, so read the days supply alongside the amount rather than comparing the figures on their own.

If you want a different option

Choosing **Select as replacement** on any row returns you to the prescription with the change applied, so the check can run again against the new choice. See *Switching to a Different Drug or Pharmacy* .

Some of these pharmacies may not be in your practice's pharmacy list. If you choose one that is not, you will be prompted to search for it and add it before the prescription can use that pharmacy. Adding a pharmacy has not

changed, you can use this link to review how to add a pharmacy.

You are never stuck here. The button at the bottom repeats whatever you chose on the prescription - send, queue, batch or print - and works regardless of what the screen returned. Cancel takes you back to the prescription with nothing sent.

Switching to a Different Drug or Pharmacy

BOTH SCREENS

Changing your mind, wherever you are.

Both the Coverage panel and the CoverMyMeds screen offer **Select as replacement**. What happens next depends on which screen you are on.

From the Coverage panel

While you are still choosing

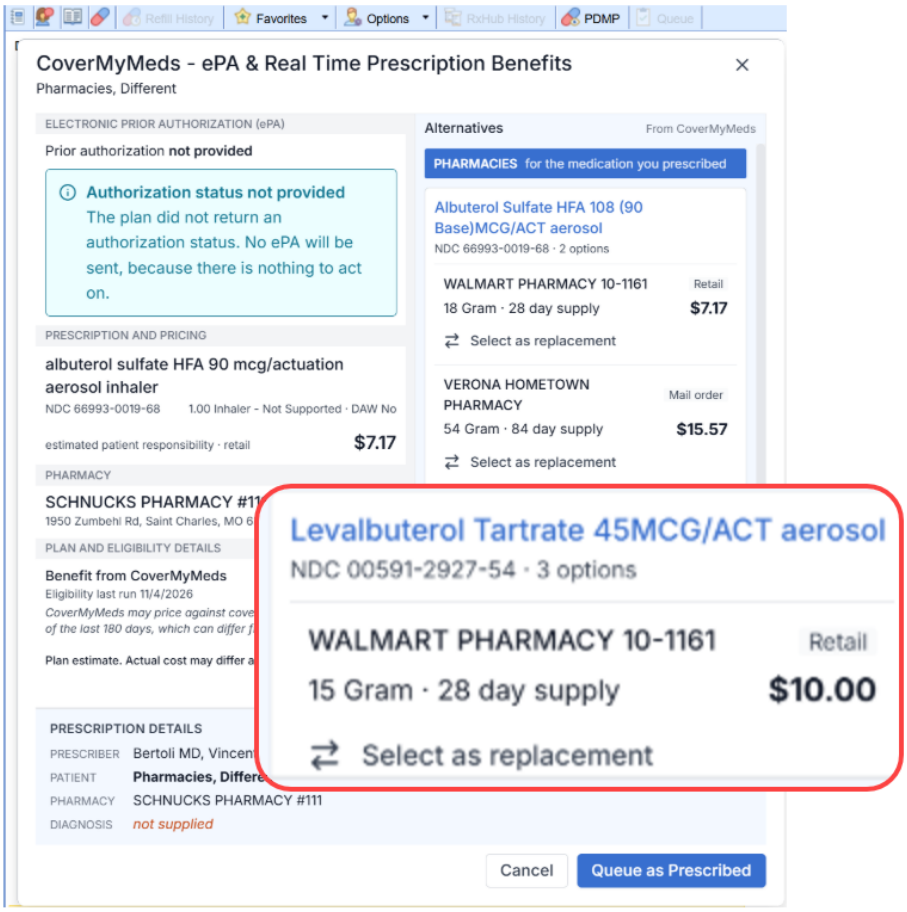
The medication on your prescription is replaced and the panel checks coverage for the new choice. You stay where you are.

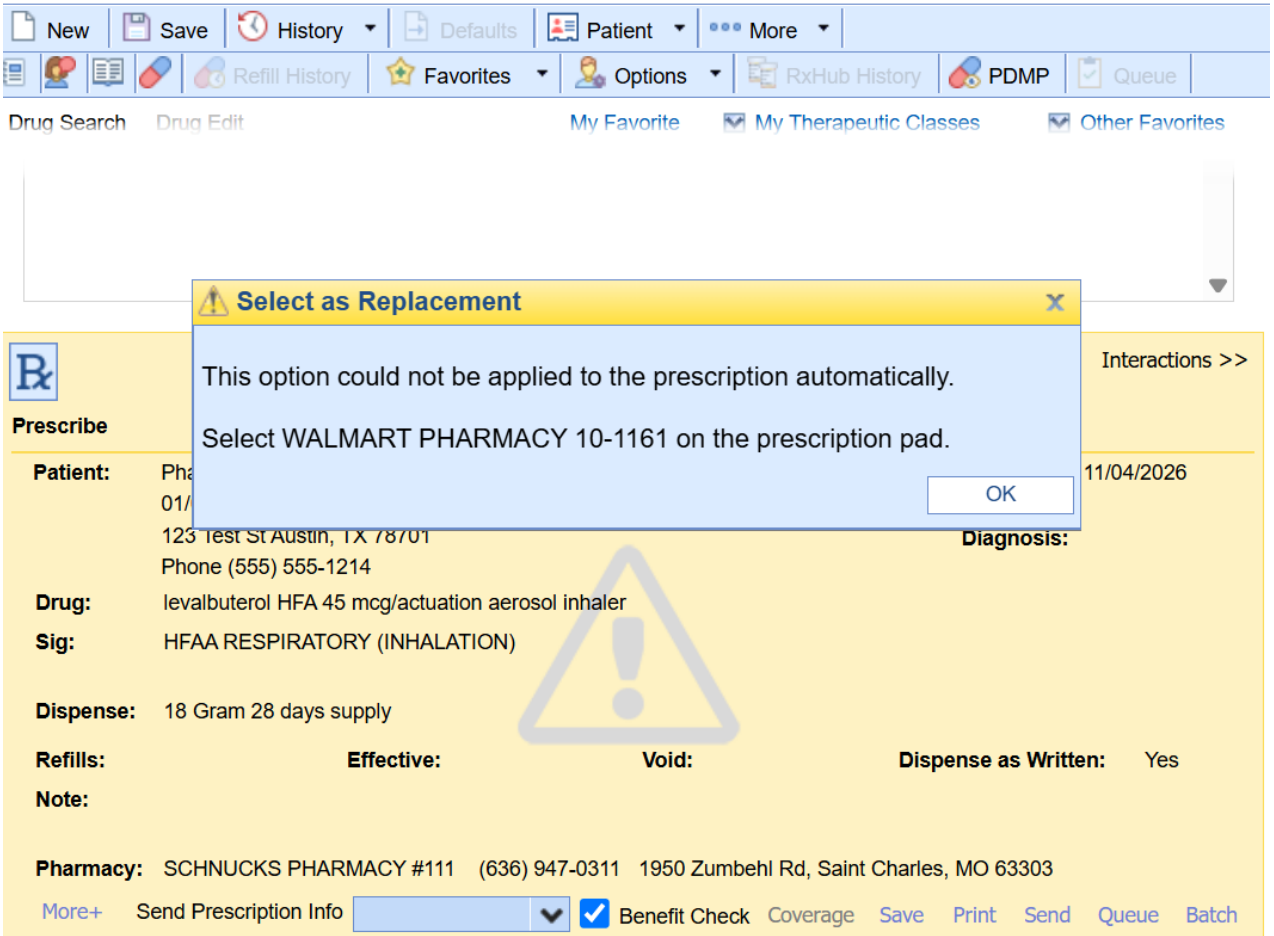
From the CoverMyMeds screen

After you have clicked send

The screen closes and you are returned to your prescription with the change applied. Send again when you are ready, and the benefit check runs against the new choice.

Choosing a pharmacy that is not in your list: the medication change is applied, and a message names the pharmacy to select on the prescription.





Why it takes you back

A benefit check is specific to the medication, quantity and pharmacy on the prescription. Changing any of those means the prescription has to be updated first, and the check run again, so the price you see belongs to what you are actually sending.

If the pharmacy is not in your list

CoverMyMeds prices against pharmacies in their network, and some of those will not be in your practice's pharmacy list. When that happens, the medication change is still applied to your prescription, and a message names the pharmacy you need to select on the prescription pad.

To use that pharmacy, add it to your practice list through the usual pharmacy search - nothing about that process has changed. See Search for a Pharmacy.

Once it is in the practice list it is available to everyone in the practice, and can be saved as a favorite - see Add a Pharmacy as a Favorite. Who can add a pharmacy varies by user; if you cannot, your system administrator can.

You never have to switch. These are options, not instructions. If what you wrote is what you want, send it.