



E-Prescriptions

By Newt Gingrich and John Kerry

In 1799, doctors likely hastened the death of George Washington by draining a third of his blood to treat a bacterial infection. Bleeding was a common practice in those days. It dates back to the Greeks and Romans. But nowadays, if a doctor used bloodletting he would be barred from practicing medicine. In the age of the Internet, is it any less inexcusable that we have yet to modernize and transform our health care system?

We have talked long enough about using technology to cut costs and improve the quality of care. Now is the time to act—and the place to start is preventable medication errors.

According to the Institute of Medicine, Americans average one medication mistake for every day spent in a hospital, accounting for more than 1.5 million injuries each year. Medication errors will kill at least seven thousand Americans this year. Of the more than three billion prescriptions written each year, doctors report nearly one billion require a follow-up between providers and pharmacies for clarification. The cost to our health care system is in the billions.

One reason for this mess is that 95 percent of prescriptions are transmitted using five-thousand-year-old technology: pen and paper.

That is unacceptable. The deaths and inefficiencies of paper prescriptions can be nearly eliminated if we use the same technology that we use in other aspects of our lives. Electronic prescriptions can replace handwritten, misread, and mismatched prescriptions with online, automated, and expert technology.

The benefits are clear and compelling. When a doctor “writes” an electronic prescription, a

computer can warn of potentially dangerous interactions with other medications or allergies and thereby prevent thousands of unnecessary hospitalizations each year. E-prescribing can also let a physician know whether a drug is covered by a patient’s insurance or whether an alternative generic is available at a fraction of the cost. One initiative led by Chrysler, General Motors, and Ford to encourage doctors to write e-prescriptions in the Detroit region has generated more than one million prescription alerts that have saved lives and money.

The benefits of e-prescribing are so important that the Institute of Medicine has called for every doctor and nurse to prescribe electronically by the year 2010. Business and labor leaders, health insurers, and consumer advocates are unanimous in their support of this common-sense initiative.

Doctors also know that e-prescribing is vital for our health care system. One recent study of four hundred physicians found that 85 percent of physicians think e-prescribing is a good idea, 81 percent say it would reduce medication errors, and 65 percent say it would save time. They like a system that reduces their liability and allows them to focus on providing care, not filling out paperwork.

The problem is that very few doctors use the technology. Of those four hundred physicians polled, only 7 percent actually transmit prescriptions

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electronically. And 63 percent say implementing the technology is not a priority. Why? It is not always in their immediate financial interest to do so.

That must change. The federal government can lead by requiring that doctors who do business with Medicare convert to e-prescribing. This can be done by using market forces and the federal government's purchasing power to align financial incentives.

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First, offer bonus payments to Medicare doctors who already prescribe electronically or who adopt the technology. Such payments will help doctors, especially those with small practices without many patients, to pay for startup costs. Private insurers, like WellPoint,

are already using this strategy to drive adoption of e-prescribing.

If a majority of doctors do not e-prescribe a few years down the road, the government should require all doctors to adopt e-prescribing or face financial penalties. E-prescribing should become a condition of doing business with Medicare. This is no different than the requirements other suppliers expect to see when they negotiate with customers.

A new study by the Department of Health and Human Services estimates that if 18 percent of doctors in Medicare adopt e-prescribing, the government will save \$4 billion and nearly three million adverse drug events can be prevented over five years.

This is something Republicans and Democrats can agree on. While we continue to debate how to cover the uninsured, improve quality, and lower costs, there is too little being done to modernize health care. E-prescribing for Medicare is just the beginning of the modernization and digitization our ailing health care system urgently needs. A high-tech, healthier future is within our grasp. We just need creative leadership bold enough to reach for it.