

NCPDP Releases Universal Medication Schedule White Paper to Increase Patient Understanding of and Adherence to Medication Instructions

Provides clear and standardized administration instructions for prescribers, pharmacists, patients and caregivers to improve quality of care and health outcomes

SCOTTSDALE, AZ - July 9, 2013 - The [National Council for Prescription Drug Programs \(NCPDP\)](http://www.ncdp.org/) (<http://www.ncdp.org/>) today announced the availability of its "[Universal Medication Schedule White Paper](http://ncdp.org/ind_WP.aspx) (http://ncdp.org/ind_WP.aspx)," which describes the need for the Universal Medication Schedule (UMS) and how it can be implemented using NCPDP's SCRIPT Standard for electronic prescribing to simplify prescription administration directions. Adoption of the UMS implemented through the SCRIPT Standard brings much needed clarity and consistency to prescription administration instructions for prescribers, pharmacists, patients and caregivers, can improve adherence to medication instructions, and creates efficiencies in the prescribing and dispensing of medications.

Today, prescription administration instructions appear on medication labels in an inconsistent manner. For example, a pharmacist may interpret and convey a prescriber's communication of "1 qd" to patients as: take one tablet once daily; take one tablet one time per day; take one tablet each morning; or take one tablet every 24 hours. The inconsistency or lack of standardization in the instructions makes it hard for patients to understand and adhere to their medication regimens, resulting in adverse drug events and/or less than optimum health outcomes.

"Inconsistencies in current prescription administration instructions between prescribers, pharmacists and patients pose quality of care and patient safety risks," said [Lee Ann Stember](http://ncdp.org/leadership_bios.aspx?ID=LCS) (http://ncdp.org/leadership_bios.aspx?ID=LCS), president of NCPDP. "Compounding the problem is the state of health literacy in the U.S. which, several studies have found, contributes to greater use of emergency departments, increased hospitalizations and more complications and deaths from chronic conditions."

Added Stember, "Given that the percentage of Americans taking five or more prescriptions has almost doubled over the past decade and that about 40 percent of older adults use at least five medications, it is imperative that the industry act quickly to implement the UMS into their operations and practices to make it easier for patients to take medications appropriately, safely and as directed."

NCPDP's white paper recommends that stakeholders establish four standard time intervals – morning, noon, evening, bedtime - when prescribing and dispensing medications. For example, the instruction to "take one pill in the morning and take one pill in the evening" is more clear and easier to understand than "take twice a day."

NCPDP's [SCRIPT Standard](http://www.ncdp.org/standards_listing.aspx) (http://www.ncdp.org/standards_listing.aspx) already supports the transmission of UMS when prescribers send electronic prescription to pharmacies.

"A best practice based on standard timing intervals will enhance quality, safety and outcomes, and can help patients become more involved in managing their health," Stember stated.

Download the [Universal Medication Schedule White Paper](http://ncdp.org/ind_WP.aspx) at http://ncdp.org/ind_WP.aspx.

About NCPDP

Founded in 1977, NCPDP is a not-for-profit, ANSI-accredited, Standards Development Organization with over 1,600 members representing virtually every sector of the pharmacy services industry. Our diverse membership provides leadership and healthcare business solutions through education and standards, created using the consensus building process. NCPDP has been named in federal legislation, including HIPAA, MMA, and HITECH. NCPDP members have created standards such as the Telecommunication Standard and Batch Standard, the SCRIPT Standard for e-Prescribing, the Manufacturers Rebate Standard and more to improve communication within the pharmacy industry. Our data products include dataQ®, a robust database of information on more than 76,000 pharmacies, and HCidea®, a database of continually updated information on more than 2.3 million prescribers. NCPDP's RxReconn® is a legislative tracking product for real-time monitoring of pharmacy-related state and national legislative and regulatory activity. For more information about NCPDP Standards, Data Services, Products, Educational Programs and Work Group meetings, go online at www.ncdp.org or call (480) 477-1000.

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