



## Non-Binding Letter of Interest VIP Health Initiative and E-Prescribe

**New Law.** Congress passed legislation in 2008 that has been enacted into law entitled “Medicare Improvements for Patients and Providers Act of 2008”. Under the Act, physicians who use a qualified e-prescribing method will receive a 2% incentive payment in 2009 and 2010. The incentive percentage will be based upon allowed Medicare charges for covered professional services. Starting in 2012, there will be a financial disincentive for practitioners who do not use a qualified e-prescribing system. Physicians will receive less than the Medicare fee schedule amounts if they do not use a qualified e-prescribing method.

**Benefits of VIP Health Initiative.** Our new program, the *VIP Health Initiative*, provides participating physicians with a secure website for:

- e-prescribing of medications;
- outpatient Rx history and medical management;
- access, sharing, and sorting of outpatient laboratory reports on a patient-centric basis;
- convenience of federated single sign-on for e-prescribe and lab ordering;
- secure messaging;
- administrative efficiencies and marketing capabilities such as coordinated insurance verification and patient registration; and
- sharing of HIPAA-sensitive data, patient records, and tracking of information access.

**Training.** Training on the web and in the classroom will be available at no charge. Offices that desire on-site training will be charged \$75/hour.

**Monthly Rate.** The monthly rate is \$100 per prescriber with a \$100 start-up fee.

The monthly rate is reduced to \$75 month for physicians affiliated with a Sponsor Physician Organization. Scripps Mercy Physician Partners and MPMG are current Sponsor Physician Organizations.

**Non-Binding Request for Subscription Agreement.** Are you interested in participating in the *VIP Health Initiative Program*?

By signing your name and returning this form to 619.260.7287 you will receive a subscription agreement to participate in the *VIP Health Initiative*.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_