Attachment B5: Interview Protocol 5 – Pharmacy IT Vendor Representative

INTRODUCTION

Thank you for agreeing to speak with us today. As you know, we are calling from the Center for Studying Health System Change (HSC), a non-partisan health policy research organization in Washington, DC. *(If respondent has participated in previous studies acknowledge participation.)*

HSC is conducting this study with funding from the Agency for Healthcare Research and Quality (AHRQ) exploring the effective use of electronic prescribing ("e-prescribing") in pharmacies and physician practices. We would like to explore several topics in-depth including:
- The capabilities of your e-prescribing software;
- How e-prescribing software is being used by pharmacies; and,
- How e-prescribing affects communication between pharmacies and physician practices.

We have 60 minutes scheduled for this call. Does that still work with your schedule?

We plan to publish the results of the study and will be happy to send you a copy of the study when it is released.

Before beginning, we would like to remind you about how we will use the information you provide. We will not reveal your name or your organization's name or share copies of interview notes with anyone outside of our research team. We may include respondent comments in reports and publications but will not attribute the comments to specific individuals or organizations. We also have a system to mark specific comments as off-limits for public reports. If any of the information we cover today falls into this category, please let us know and we will mark the information as off-limits in our notes. Your participation in this study is voluntary. If at any time you do not feel comfortable answering a question, or do not know the answer, please let us know and we will move on.

Do you have any questions before we begin?

Q.AEX.K.   Background on Vendors

Q.AEX.K.01. Please list the names of the pharmacy IT systems that your company sells that support e-prescribing functionality such as the receipt and processing of electronic prescriptions (e.g. pharmacy management system, other)?

Q.AEX.K.05. Which of these products and versions are certified by Surescripts?

Q.AEX.K.06. Who are your largest competitors?

Q.AEX.K.07. Approximately what proportion of the pharmacies that use your product have enabled the e-prescribing features?

> Q.AEX.I.01.e.   What fees, if any, do pharmacies pay for enabling and using e-prescribing features?

> Q.AEX.I.01.c.   What are the reasons some pharmacies are not accepting prescriptions electronically via electronic data interchange?

Q.AEX.H.   Understanding How E-Prescribing System Features Are Used in Pharmacies

Q.AEX.H.01. Could you briefly walk us through how pharmacy staff would receive new prescriptions generated from physician e-prescribing systems, enter them into the work queue and fill them? Please indicate the ways in which computer generated prescriptions are handled differently from non-computer generated prescriptions.

We would like to ask you some more detailed questions about certain features of e-prescribing systems:

Q.AEX.H.02.d. How do the Federal Drug Enforcement Agency's restrictions on the electronic transmission of prescriptions for controlled substances affect the method by which your product receives prescriptions generated by physician e-prescribing systems (e.g. if one of a patient's prescriptions is for a controlled substance)?

Q.AEX.H.03. Does your product give pharmacies the ability to send electronic renewal authorization requests to practices with electronic prescribing?

> Q.AEX.H.03.a.   *If yes:* How would pharmacy staff use this feature?

> Q.AEX.H.03.b.   *If yes:* Approximately what proportion of all renewal requests to physician practices with e-prescribing are sent electronically via electronic data interchange? Approximately what proportion of responses to those electronic renewal requests is sent back electronically via electronic data interchange from those physician practices to the pharmacy?

Q.AEX.H.04. Do pharmacies typically send other types of electronic messages besides renewal authorization requests to practices with e-prescribing (e.g. delivery confirmation, change requests)?

> Q.AEX.H.04.a. *If yes:* How would pharmacy staff use this feature?

> Q.AEX.H.04.b. *If yes:* How frequently is this feature used?

> Q.AEX.I.01.d. What are the reasons some pharmacies that accept prescriptions electronically via electronic data interchange do not send renewal requests or other communications electronically?

Q.AEX.C.F.03. What are the most common reasons physicians and pharmacists communicate about prescriptions that are computer-generated, whether sent electronically via electronic data interchange or by other means? [For physicians and vendors, probe on how these reasons differ for retail and mail-order pharmacies.]

> Q.AEX.C.F.03.a. How do reasons for communications about computer generated prescriptions differ from non-computer generated prescriptions?

> Q.AEX.C.F.03.b. When a prescription that has been sent electronically via electronic data interchange is not received at the pharmacy, what, if any, procedure is used to identify and resolve the transmission problem? [Probe on whether the pharmacy communicates with the e-prescribing system vendor and with the electronic e-prescription routing service provider such as Surescripts (e.g. via the Surescripts website link they provide to report problems).]

> Q.AEX.H.01.a. How does the process for handling prescriptions generated from physician e-prescribing systems vary for renewals?

> Q.AEX.H.01.b. How does staff, including temporary workers and floaters, learn how to receive and process electronic prescriptions?

Q.AEX.H.06. What are the major factors, if any, facilitating the receipt and processing of electronic prescriptions?

Q.AEX.H.07. What are the major challenges, if any, to receiving and processing electronic prescriptions? [Probe on how, if at all, the pharmacy and staff [in this site] addressed these challenges.]

Q.AEX.C.F.06. What, if anything, do you hear from pharmacists about the benefits or challenges of electronic prescribing?

Q.AEX.H.10. What, if any, changes to your products' e-prescribing functionality are planned for the next two years? Are there any changes customers would like to see?

Q.AEX.D. Impact of E-prescribing Feature Use

Q.AEX.D.02. What have been the perceived effects of using electronic prescribing on pharmacy operations and patient care? Probe if necessary on:

Q.AEX.D.02.a.   Overall pharmacy efficiency?

Q.AEX.D.02.b.   Pharmacist and technician efficiency?

Q.AEX.D.02.c.   Volume and type of phone communications with physician practices about new prescriptions and renewals?

Q.AEX.D.02.d.   Physician prescribing behavior including prescribing of generics and medications on formulary?

Q.AEX.D.02.e.   Prescribing safety and quality?

Q.AEX.D.02.f.   Patient satisfaction and medication use?

Q.AEX.E.   Impact of Policy Initiatives on E-prescribing Implementation and Use

Q.AEX.E.02. How, if at all, do federal and state policies and private sector initiatives related to e-prescribing affect the ability of pharmacies and physician practices in [site] to effectively implement electronic prescribing?

Q.AEX.L.   Wrap Up

Q.AEX.L.01. Are there any other issues you would like to discuss?

Q.AEX.L.02. If needed: Can you suggest other physician practices and/or pharmacies in your community using electronic prescribing that we could speak with?