

VIA EMAIL: OIRA_submission@omb.eop.gov; ATTN: AHRQ's Desk Officer

October 1, 2009

Carolyn M. Clancy, M.D.
Director, Agency for Healthcare Research and Quality
540 Gaither Road
Rockville, MD 20850

ATTN: AHRQ's Desk Officer

Dear Dr. Clancy:

The National Association of Chain Drug Stores (NACDS) thanks you for the opportunity to comment on the proposed information collection project: "Health IT Community Tracking Study 2009." NACDS represents traditional drug stores, supermarkets, and mass merchants with pharmacies. Its more than 170 chain member companies include regional chains with a minimum of four stores to national companies. NACDS members also include more than 1,000 suppliers of pharmacy and front-end products, and nearly 90 international members representing 29 countries. Chains operate more than 39,000 pharmacies, and employ a total of more than 2.5 million employees, including 118,000 pharmacists. They fill more than 2.5 billion prescriptions yearly, and have annual sales of over \$750 billion. For more information about NACDS, visit www.NACDS.org.

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We appreciate that AHRQ seeks to conduct research about how e-prescribing is being implemented and used by physicians and pharmacies to help provide a more complete picture of e-prescribing implementation. As AHRQ recognizes, physician adoption of e-prescribing has been the focus of most policy efforts. It would be helpful to further foster the adoption of this technology, as AHRQ recognizes, by identifying and shaping strategies that would promote more effective implementation of e-prescribing in retail pharmacies.

We applaud you for this proposal, and urge you to consider our recommendations as you move forward. It is clearly stated in the supporting statements for this proposed study that it will be a qualitative research study of a small number of e-prescribing stakeholders that have been purposively chosen for participation, and "therefore study findings cannot be statistically generalized to the respondent universe." We appreciate the fact that AHRQ has acknowledged this limitation. However, we are concerned that when the results of this proposed study are published, there will be insufficient recognition and acknowledgement of the limitations of the study, and thus there will be considerable misunderstanding within the HIT industry with respect to the limitations and applicability of the results. We strongly encourage AHRQ to ensure that the qualitative nature of this study is emphasized both in any research reports that might issue from the study as well as any and all publicity documents and public interviews of researchers that might follow.

With respect to interview protocols, we believe that interviewing the "Pharmacist-In-Charge" would not provide the most helpful information in response to the questions you plan to ask. For chain pharmacies, we recommend that you interview a person at the corporate headquarters who has oversight and responsibility for electronic prescribing operations. This would provide you

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with a more informed response with respect to questions concerning policies and strategies. NACDS would be pleased to serve as a liaison to help identify the proper individuals within our membership to be interviewed.

On a similar note, to ensure the validity of results obtained from state pharmacy association representatives in this survey, we ask you to endeavor to survey state pharmacy association representatives that have direct knowledge of e-prescribing gained through extensive, hands-on experience using e-prescribing applications, or state pharmacy association representatives that have extensive knowledge of e-prescribing that has been gained through a systematic collection and analysis of data from a representative sample of their member pharmacists who are users of e-prescribing.

Many of the functionalities that AHRQ proposes to include in the interview protocols have not yet been implemented by pharmacies. Including these functionalities in the interview would be confusing and/or misleading to the interviewee and of questionable value to the study. The specific questions to which we refer are listed below. We recommend these questions be deleted:

- Q.AEX.H.04. Do you 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 does pharmacy staff use this feature?
- Q.AEX.H.04.b. *If yes:* How frequently is this feature used?

We ask that you delete the following question because it is a general pharmacy regulatory issue and not directly pertinent to electronic prescribing. Thus, it is not relevant to the purposes of the survey:

Q.AEX.H.05. If a prescription is written for a brand-name medication when therapeutically-equivalent generic medications are available and “Dispense As Written” is not indicated, does the pharmacy typically make a generic substitution or consult the prescribing physician about the possibility of a substitution?

We thank you again for proposing this information collection, and for the opportunity to provide our perspectives on its design. Please do not hesitate to contact me if we can provide further assistance. I can be reached at knicholson@nacds.org or 703-837-4183.

Sincerely,



Kevin N. Nicholson, R.Ph., J.D.
Vice President, Pharmacy Advisor
Government Affairs and Public Policy