

**Request for Approval under the “Fast Track Generic Clearance for the
Collection of Routine Customer Feedback” (OMB Control Number: 0704-0553)**
TITLE OF INFORMATION COLLECTION: Pharmacy Program Satisfaction Survey

PURPOSE:

The National Defense Authorization Act for Fiscal Year 2013 directed that a pharmacy pilot program be conducted requiring TRICARE for Life (TFL) beneficiaries who take certain brand-name medications on a regular basis (i.e., medications for chronic conditions) to fill prescriptions at a military treatment facility (MTF) instead of at a retail pharmacy. In 2018, the Military Health System opened the pharmacy program to all TRICARE beneficiaries. The Defense Health Agency (DHA) is charged with providing the Committees on Armed Services of the Senate and House of Representatives a report on the satisfaction with the transition from retail pharmacies to MTF pharmacies for all TRICARE beneficiaries.

To provide this information, DHA designed an evaluation to assess beneficiaries’ perspectives and experiences with having prescriptions filled at an MTF pharmacy. This includes evaluating satisfaction with the availability of medications, timeliness and accuracy of prescriptions filled, and overall satisfaction with their experience. The survey is fielded every six months to a representative sample of TFL beneficiaries who had a prescription filled at an MTF pharmacy during the past six months.

DESCRIPTION OF RESPONDENTS:

The survey population comprises TRICARE beneficiaries who had a pharmacy claim processed at an MTF instead of a retail pharmacy during the previous six months. This group of people includes: retirees, dependents of retirees, dependents of Active Duty, dependent survivors, dependents of Guard/Reserve on Active Duty, inactive Guard/Reserve, Guard/Reserve, and others.

TYPE OF COLLECTION: (Check one)

- | | |
|---|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> Other: _____ |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Dr. Kimberly Aiyelawo April 6, 2022

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? Yes No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time (minutes)	Burden (hours)
Individuals (public respondents)	340	10	56.67
Annual Totals	340	10	56.67

PUBLIC COST: The estimated annual cost to the public is \$2,178.00

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?
 Yes No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

The study population includes TRICARE beneficiaries who had a pharmacy claim processed at an MTF instead of at a retail pharmacy during the past 6 months. DHA provides a roster of eligible beneficiaries from which a random sample is drawn. DHA posts the roster, which includes the name and phone number of each individual, to a secure File Transfer Protocol (FTP) site and alerts the contractor via email that the roster is ready for download. The contractor accesses the FTP site using a password to download the records. The contractor creates a unique identification number for each sample record and uploads the records to a secure server to manage the data and conduct the survey.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
 - Web-based or other forms of Social Media
 - Telephone
 - In-person
 - Mail
 - Other, Explain
2. Will interviewers or facilitators be used? Yes No