



# Florida Health Information Exchange

## Report on Independent Pharmacies Survey

Conducted by the Florida Agency for Health Care Administration

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On July 6, 2010, the Office of the National Coordinator (ONC) issued a Program Information Notice (PIN) to recipients of funding for the State Health Information Exchange (HIE) Cooperative Agreement program. One of the requirements specified in the PIN was for states to identify the percent of pharmacies utilizing electronic prescribing (e-prescribing).

To address the PIN requirement, the Agency for Health Care Administration (Agency) opted to carry out a survey of independent licensed pharmacies in Florida. The Agency mailed out a survey in May 2011, both in English and Spanish, to 1150 licensed independent pharmacies to assess their current use of e-prescribing. By the close of the survey, 47 responses had been received.

The results of the survey will help the Agency to identify market segments and work with professional associations and leadership to better understand barriers to the use of health information technology including the concerns of independent pharmacies. The results of the survey will also help the Agency's HIE team develop a strategy for outreach to independent pharmacies to promote the use of standards for interoperability and to participate in education and technical assistance opportunities with other organizations.

### Summary of Survey Results

#### E-Prescribing Functionality

Ninety-seven percent of responding pharmacies reported that their current software system allowed for e-prescribing functionality. Eighty-one percent of these same pharmacies indicated that they engaged a network vendor in order to receive electronic prescriptions (e-prescriptions).

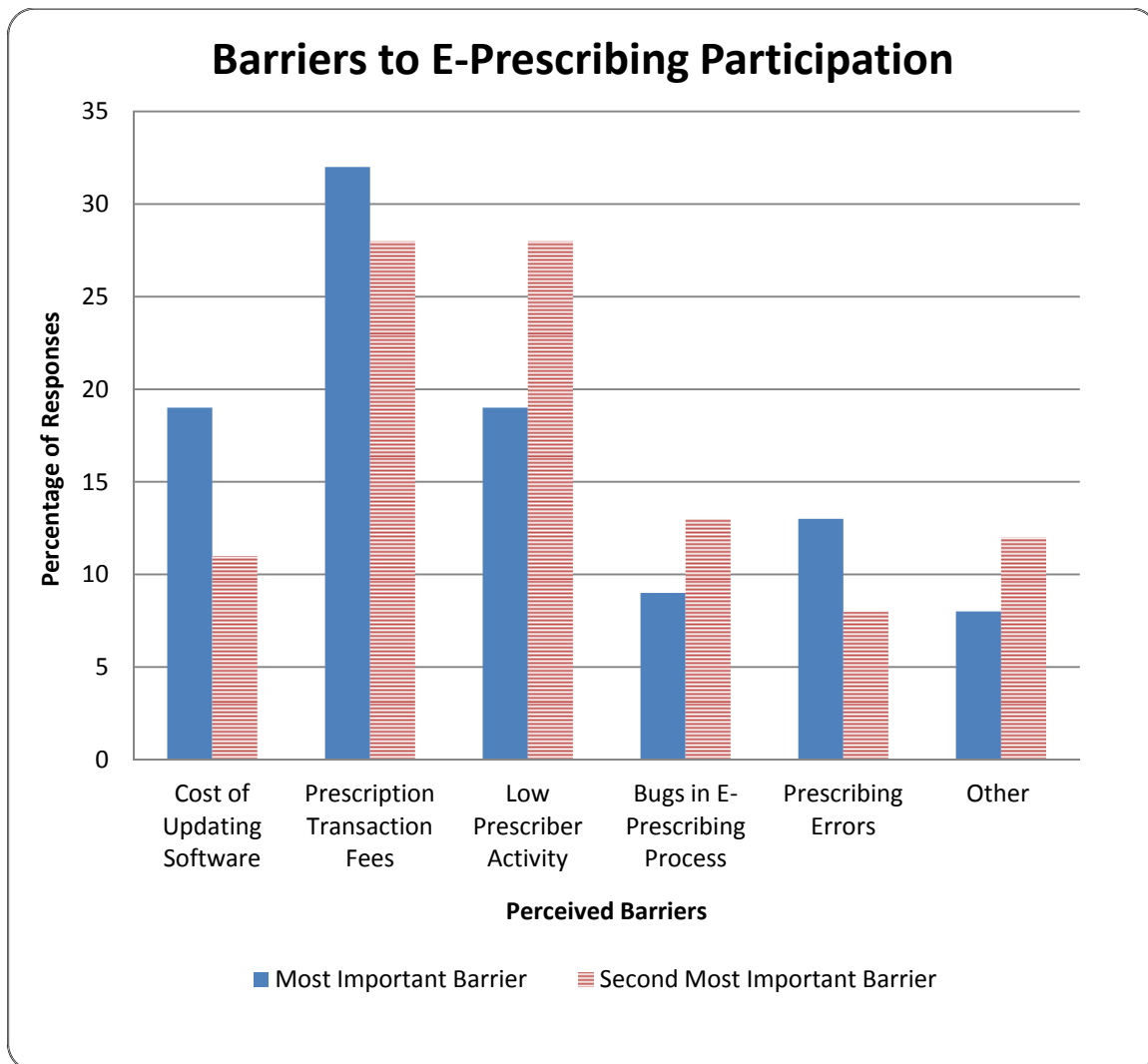
#### E-Prescription Processing and Use

When asked about the number of e-prescriptions received and processed within the previous month, 28% of those pharmacies with e-prescribing capability reported a frequency of more than ten daily, almost 37% indicated a frequency of one-to-ten daily, and another 28% reported a frequency of one-to-six each week. In response to a question regarding the use of e-prescribing by health care professionals, survey participants gauged e-prescribing use in their area (self-defined) as:

- None (4.3%)
- Less than 5% (25.5%)
- 5 – 10% (40.4%)
- More than 10% (29.8%)

### Barriers to Pharmacy Participation in E-Prescribing

Almost one-third of responding pharmacies reported prescription transaction fees as the primary barrier to pharmacy participation in e-prescribing. Approximately 20% indicated the cost of updating software as the primary barrier and another 20% indicated low prescriber activity as the primary barrier. Thirteen percent reported prescribing errors as the primary barrier. The pharmacy responders were also asked to indicate the second most important barrier to pharmacy participation in e-prescribing. Prescription transaction fees again were indicated as an obstacle with 28% of responders selecting this as the second most important barrier. An additional 28% of responders indicated low prescriber activity as the second most important barrier to e-prescribing.

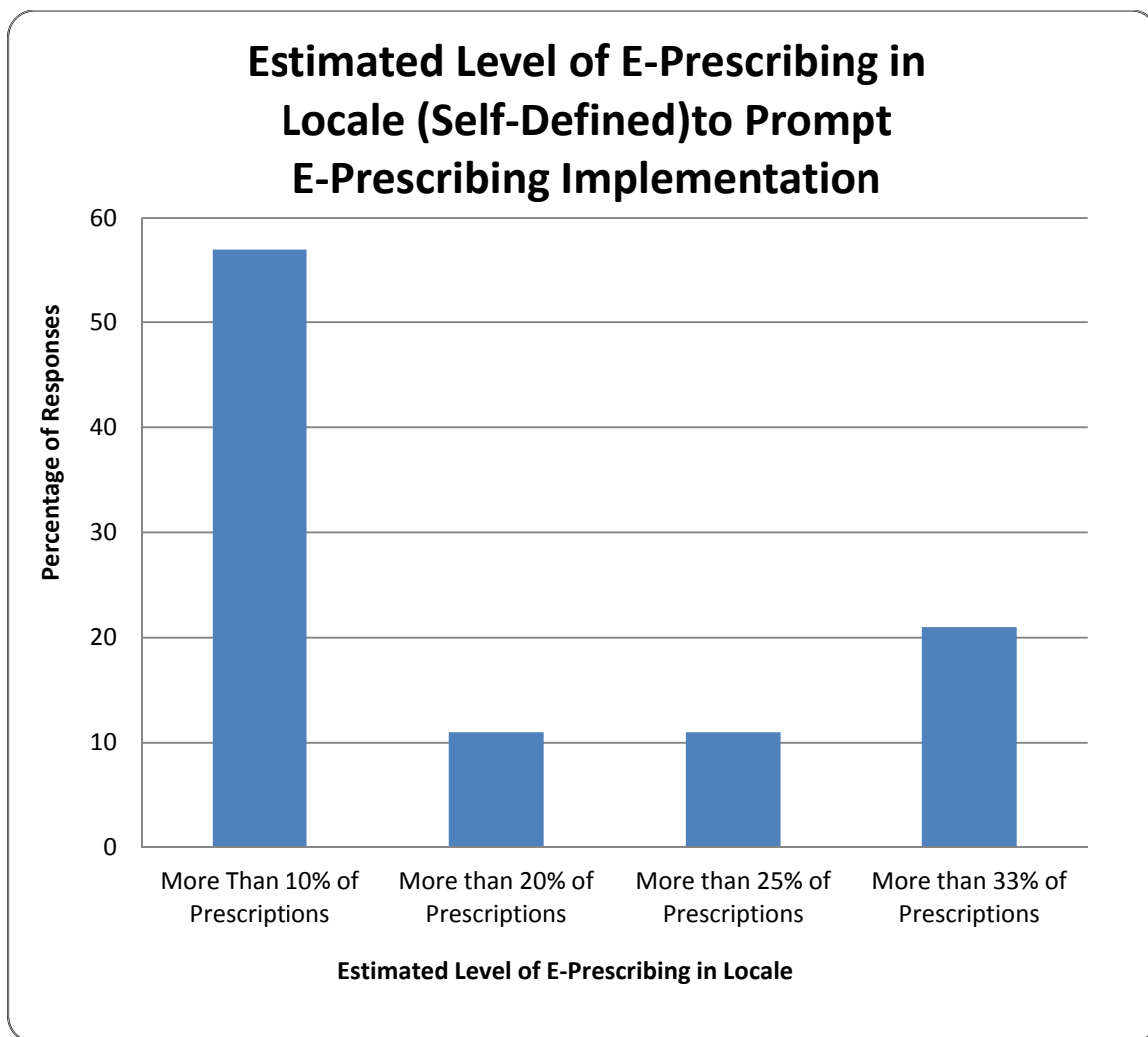


### Ways E-Prescribing Improves the Pharmacist's Ability to Serve a Patient's Needs

The independent pharmacy responders were queried about the way in which e-prescribing improves the pharmacist's ability to serve a patient's needs. Over sixty percent of survey responders indicated that e-prescribing reduced the chance of medication errors and 55% reported that e-prescribing allowed for faster service due to the e-prescription process. Another 26% indicated e-prescribing allowed for faster service due to the ability to check eligibility in advance. Twenty-eight percent of the responders listed access to more information in order to prevent drug interactions as a benefit of e-prescribing and 19% listed access to more information in order to monitor compliance as a benefit.

### Level of E-Prescribing Activity in Locale to Prompt Implementation of E-Prescribing

Fifty-seven percent of responding pharmacies indicated that a level of e-prescribing activity between 10 - 20% of prescriptions in their area (as defined by the respondent) would prompt them to implement e-prescribing. Twenty-two percent reported that an activity level of more than 33% would be needed to prompt them to implement e-prescribing.



### Access to Patient Medication Histories

Ninety-eight percent of responding pharmacies indicated that they do not have access to patient medication histories filled by other pharmacies and 93% of these same pharmacies reported that having electronic access to complete patient medication histories would be beneficial in the professional services that they provide. The pharmacies were split regarding their concerns about sharing patient medication history; 51% indicated that they did have concerns about allowing other pharmacies to have access to patient medication histories in order to provide a more complete patient medication history and 49% indicated that they did not have concerns. The most frequently mentioned concern was the fear that the information would be used to solicit customers away from their current pharmacy provider. Patient privacy and proprietary price information concerns were also listed.

### Medicaid Health Information Network (Medicaid HIN)

In 2008, the Florida Agency for Health Care Administration initiated a project to use Medicaid claims data to give clinicians access to patient specific Medicaid claims information at the point of care. The Agency selected Availity, LLC, to implement the project and demonstrate the value of the approach under a no cost contract. In November of 2009, the Florida Medicaid Health Information Network was launched, and it is now available for Medicaid treating providers.

Using the secure network portal, providers can access patient specific claims-based data. The data includes prescription history, lab event history, hospital visits, diagnoses, and any other paid Medicaid claims information retroactive 18 months. To access the data, providers must have explicit authorization from the patient, except in a medical emergency where the patient or family is unable or unavailable to consent.

### Next Steps

The Agency is exploring the feasibility of enabling pharmacy access to the Medicaid HIN. This will give the pharmacist information about the medication history of Medicaid patients without access to pharmacy identifiers or pricing. For those pharmacies that responded to the survey and indicated an interest in receiving more information via email about the Agency's initiative to promote health information exchange, further information about Regional Extension Centers was provided and all were included in the Agency's interested party listing for follow-up should the Medicaid HIN become available.

## Independent Community Pharmacy Questionnaire - English

Please provide the following information for your pharmacy

Name of Pharmacy

Street Address:

City:

County:

Zip code:

License #:

Name of contact person:

Email for contact person:

Phone for contact person:

Fax for contact person:

Please answer the following questions as completely as possible.

1. Does your current software system allow for e-prescribing functionality?
  - a) Yes
  - b) No
  
2. Have you engaged a network vendor in order to receive e-prescriptions?
  - a) Yes
  - b) No
  
3. About how many e-prescriptions have you received and processed within the last month?
  - a) None
  - b) One to six each week
  - c) One to ten daily
  - b) More than ten daily
  
4. How would you gauge the use of e-prescribing by health care professionals in your area?
  - a) None
  - b) Less than 5%
  - c) 5-10%
  - d) More than 10%

5. Which of the following is the most important barrier to pharmacy participation in e-prescribing?
- a) Cost of updating software
  - b) Prescription transaction fees
  - c) Low prescriber activity
  - d) Poor network connections in this area and/or network costs
  - e) Bugs in e-prescribing process (e.g. poor software design, vendor support, downtime)
  - f) Other \_\_\_\_\_
6. Which is the second most important barrier to pharmacy participation in e-prescribing?
- a) Cost of updating software
  - b) Prescription transaction fees
  - c) Low prescriber activity
  - d) Poor network connections in this area and/or network costs
  - e) Bugs in e-prescribing process (e.g. poor software design, vendor support, downtime)
  - f) Other \_\_\_\_\_
7. In what ways does e-prescribing improve the pharmacist's ability to serve a patient's needs? Please check all that apply.
- a) Faster service due to e-prescription process
  - b) Faster service because physician checks eligibility in advance
  - c) Less chance of medication errors (e.g. due to poor handwriting)
  - d) Pharmacist has access to more information to prevent drug interactions
  - e) Pharmacist has access to more information to monitor compliance
  - f) None
  - g) Other \_\_\_\_\_
8. What estimated level of e-prescribing activity in your area would prompt you to take steps to implement e-prescribing?
- a) More than 10%
  - b) More than 20%
  - c) More than 25%
  - d) More than 33%
  - e) Will accept only written prescriptions or call-in prescriptions
9. Do you have any electronic access to patient medication histories filled by other pharmacies?
- a) Yes
  - b) No

10. Do you think that having electronic access to complete patient medication histories would be beneficial in the professional services you provide?

- a) Yes
- b) No

11. Do you have any concerns about allowing other pharmacists to have this access in order to have a more complete patient medication history?

- a) Yes
- b) No

Please describe concerns: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Are you interested in participating in local health information exchange activities in your community?

- a) Yes
- b) No

13. Please indicate if you would be interested in receiving more information about the Agency's initiative to promote health information exchange via e-mail. You will be notified of public meetings and project developments. See [www.FHIN.net](http://www.FHIN.net) for more information.

- a) Yes
- b) No

## Independent Community Pharmacy Questionnaire – Spanish

La Agencia busca un mejor entendimiento de las limitaciones y barreras que enfrentan los farmacéuticos independientes que puedan reducir su participación en la prescripción electrónica. La Agencia también le solicita sugerencias sobre cómo los farmacéuticos puedan desempeñar una función mayor en la administración de medicamentos a través del intercambio de información de salud.

Por favor provea la siguiente información de su farmacia:

Nombre de persona de contacto:

Nombre de la farmacia:

Dirección de calle:

Ciudad:

Estado: (seleccione)

Código Postal:

E-mail de Persona de contacto:

Teléfono de Persona de contacto:

Por favor conteste las siguientes preguntas de la forma más completa posible:

1. ¿Permite su sistema actual de software la función de prescripciones electrónicas?  
Sí / No
  
2. ¿Ha contratado a un proveedor de red (“network vendor”) para poder recibir las prescripciones electrónicas?  
Sí / No
  
3. ¿Aproximadamente cuántas prescripciones electrónicas ha recibido y procesado durante el pasado mes?  
 Ninguna  
 1-6 semanalmente  
 1-10 diariamente  
 Más de 10 a diario
  
4. ¿Cómo indicaría el uso de prescripciones electrónicas por los profesionales de cuidado de salud en su zona?  
 Ninguna  
 Menos de 5%  
 5-10%  
 Más de 10%

5. Cuál de los siguientes es la barrera más importante que afecta la participación de las farmacias en la prescripción electrónica?
- El costo de actualización del software
  - Las tarifas (fees) de transacción por la prescripción
  - Bajo volumen o actividad para prescribir de parte de médicos
  - Malas conexiones en la red/network en esta zona y/o costos de la red/network
  - Problemas con el procedimiento de prescripciones electrónicas (por ejemplo: mal diseño del software, asistencia técnica, tiempos de inactividad)
  - Otra razón: (por favor especifique)
6. ¿Cuál es la segunda barrera de mayor importancia que afecta la participación de las farmacias en las prescripciones electrónicas?
- El costo de actualización del software
  - Las tarifas (fees) de transacción por la prescripción
  - Bajo volumen o actividad para prescribir de parte de médicos
  - Malas conexiones en la red/network en esta zona y/o costos de la red/network
  - Problemas con el procedimiento de prescripciones electrónicas (por ejemplo: mal diseño del software, asistencia técnica, tiempos de inactividad)
  - Otra razón: (por favor especifique)
7. ¿En qué formas la prescripción electrónica mejora la habilidad del farmacéutico para servir las necesidades del paciente? Por favor seleccione todas las que apliquen.
- Servicio más rápido gracias al proceso de prescripciones electrónicas
  - Servicio más rápido porque el médico puede verificar la elegibilidad anticipadamente
  - Menos oportunidades en errores de medicamento (por ejemplo, por no poder leer el manuscrito)
  - El farmacéutico puede encontrar mayor información a fin de prevenir interacciones de drogas
  - El farmacéutico puede encontrar mayor información a fin de monitorear el cumplimiento con la prescripción
  - Ninguna
  - Otra razón: (Por favor especifique.)
8. ¿Cuál es el nivel de actividad de prescripciones electrónicas en su área que le llevaría a adoptar medidas para implementar la prescripción electrónica?
- Más de 10% de prescripciones
  - Más de 20% de prescripciones
  - Más de 25% de prescripciones
  - Más de 33% de prescripciones
  - Sólo aceptaré las prescripciones escritas, o por teléfono

9. ¿Tiene usted acceso electrónico a los historiales de medicamentos de los pacientes proveídos por otras farmacias?

Sí

No

10. ¿Cree usted que tener acceso electrónico a historiales completos de medicamentos de los pacientes sería de beneficio para los servicios profesionales que usted provee?

Sí

No

11. ¿Tiene usted alguna preocupación en permitir a otras farmacias que tengan este acceso a fin de tener un historial más completo de los medicamentos de los pacientes?

Sí

No

Favor de describir las preocupaciones:

12. ¿Está usted interesado/a en participar en actividades locales de su comunidad sobre el intercambio de información de salud?

Sí

No

13. Favor de indicar si le interesa recibir mayor información por correo electrónico sobre la iniciativa de la Agencia de promover el intercambio de información de salud. Usted será notificado de conferencias públicas y sobre la evolución del proyecto. Véase [www.FHIN.net](http://www.FHIN.net) para mayor información.

Sí

No