

Pharmacy Participants' Corner

Pharmacy FAQs

- 1. Why should pharmacies participate?
- 2. How are pharmacies chosen for the MEPS Pharmacy Component?
- 3. Why didn't you get all of the information needed from the customer? Why collect information from the pharmacies?
- 4. What specific information is needed from the pharmacies?
- 5. What if not all of the requested information is available?
- 6. How long does it take a pharmacy to supply the information that you need?
- 7. Will pharmacies be compensated for providing this information?
- 8. Will a pharmacy be contacted more than once?



1. Why should pharmacies participate?

Your participation contributes to an important effort to develop an accurate and comprehensive picture of health care expenditures in the United States. Prescription medicines are a major and increasing component of total health care costs. MEPS data indicate, for example, that total prescription drug expenditures rose more than 130 percent between 1996 and 2002. For private planning as well as public policy decisions, we all benefit from having accurate information available to inform our deliberations. By signing the MEPS Authorization Form, your customers have asked you to share their data with the study.





2. How are pharmacies chosen for the MEPS Pharmacy Component?

Pharmacies are identified by participants in the MEPS Household Component as sources of prescribed drugs. These household participants signed HIPAA-compliant authorization forms authorizing and requesting each of their pharmacies to release the information sought by the study.





3. Why didn't you get all of the information needed from the customer? Why collect information from the pharmacies?

It is often difficult for people to provide complete information about their prescriptions. Most do not know the NDC numbers for their prescriptions and some have difficulty giving the full name of a medicine or its strength. Many do not know the amounts paid on their behalf by third parties. We contact pharmacies for information that supplements and verifies what the household participants have reported.





4. What specific information is needed from the pharmacies?

The study collects information about all the prescriptions that a customer had filled or refilled during a specified calendar year. For each prescription, we ask for the NDC, date filled or refilled, quantity dispensed, the amount paid by the patient, and the amount paid by any third party payers. We also ask for the types of third party payers, if they are available.





5. What if not all of the requested information is available?

We have found that most providers have in their records the data items that we are requesting. However, MEPS has been designed to contend with missing data items and the study will utilize as much of the requested data as you can provide.





6. How long does it take a pharmacy to supply the information that you need?

For each pharmacy, the time depends on the number of customers who participate in MEPS and the number of prescriptions they obtained. We work with the pharmacy staff to find the most time effective way to gather the data. Many pharmacies print out the customer profiles and fax them to us. If a pharmacy has one or two customers who participate in MEPS, it can be faster and easier to give the information over the telephone. For pharmacies with many customers who participate in MEPS, we can provide a customer list in electronic format and accept data returned in electronic format as well. On average, it usually takes about 5 minutes per patient.





7. Will pharmacies be compensated for providing this information?

Although we do not routinely provide compensation to participants, we will reimburse reasonable charges for staff time spent responding to our request or for copying and/or mailing costs.





8. Will a pharmacy be contacted more than once?

It is possible that a pharmacy will be contacted more than once to clarify a response and/or to ask about other customers. Because MEPS is a continuous on-going survey, a pharmacy may also be contacted again in future years if it is identified as a source of prescribed drugs by other MEPS household participants.

