American Pharmaceutical Association
FOUNDATION

Quality Center

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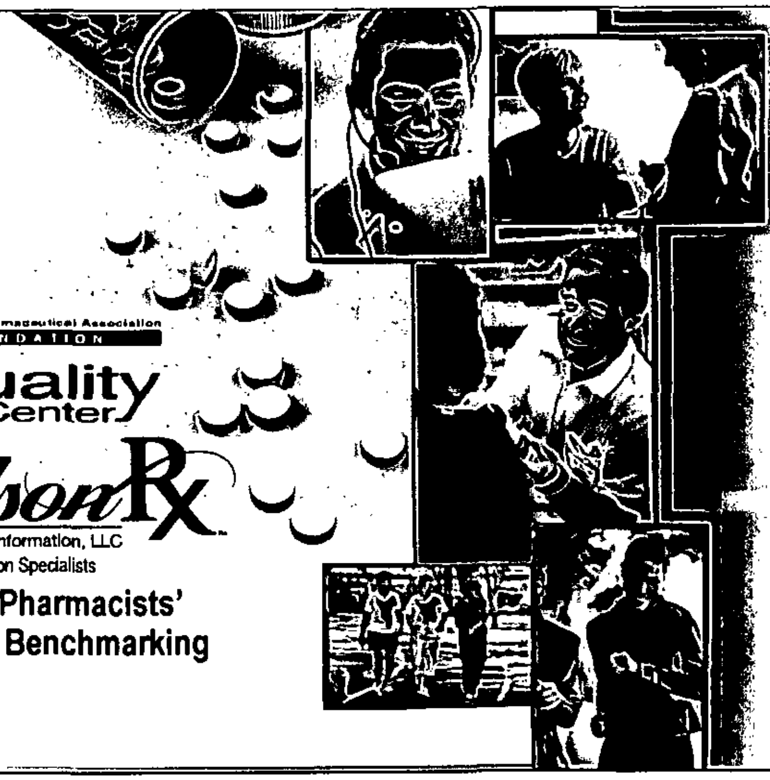
Health Information Specialists



National Pharmacists' Services Benchmarking Study

May 2005

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Background

Objective:	To provide a benchmark that quantifies and publicizes the important value of community pharmacists to the US healthcare system by identifying improved outcomes and reduced costs as a result of pharmacists' preventive actions and everyday interventions in the pharmacy environment
Survey Topics:	Enhanced Pharmacy Services, Prescription-Related Activities, Counseling/Monitoring/Testing Services, Usage of Technical Facilities, Community Perceptions and Attitudes, Pharmacy Security, Demographics and Pharmacist Profile
Methodology:	E-mail invitations sent to APhA's list of more than 16,000 pharmacists to participate in a web survey hosted by APhA and WilsonRx. Data collected between March 23, 2005 and April 17, 2005. A reminder e-mail was sent to respondents who did not complete the study.

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Sampling Methodology

Sample:	468 qualified pharmacists in total, which includes 164 chain, 144 independent, 55 food, 28 mass, 77 other pharmacists
Geographic Coverage:	Nationally representative sample. Number of respondents by US region: 98 East North, 56 Mid-Atlantic, 17 New England, 45 West North, 82 South Atlantic, 36 East South, 45 West South, 28 Mountain, 61 Pacific (includes AK and HI)
Statistical Confidence:	The margin of error associated with the results in total (n=468) is ±4.5% at the 95% level of *confidence and* ±3.8% *at the* 90% *level of* confidence.

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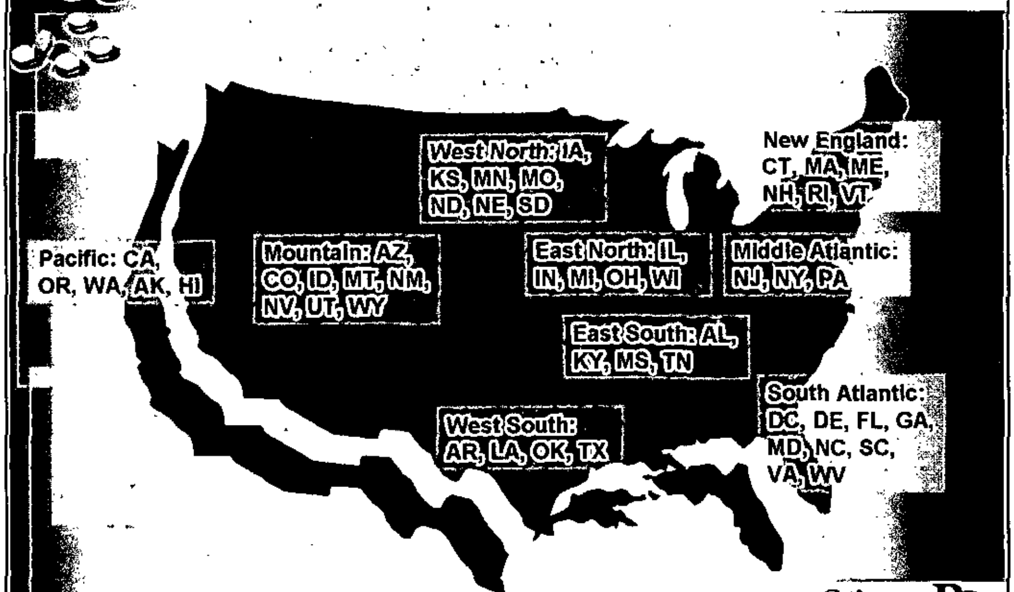
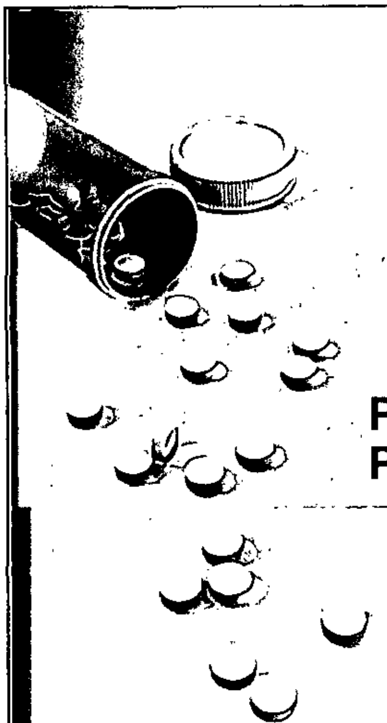
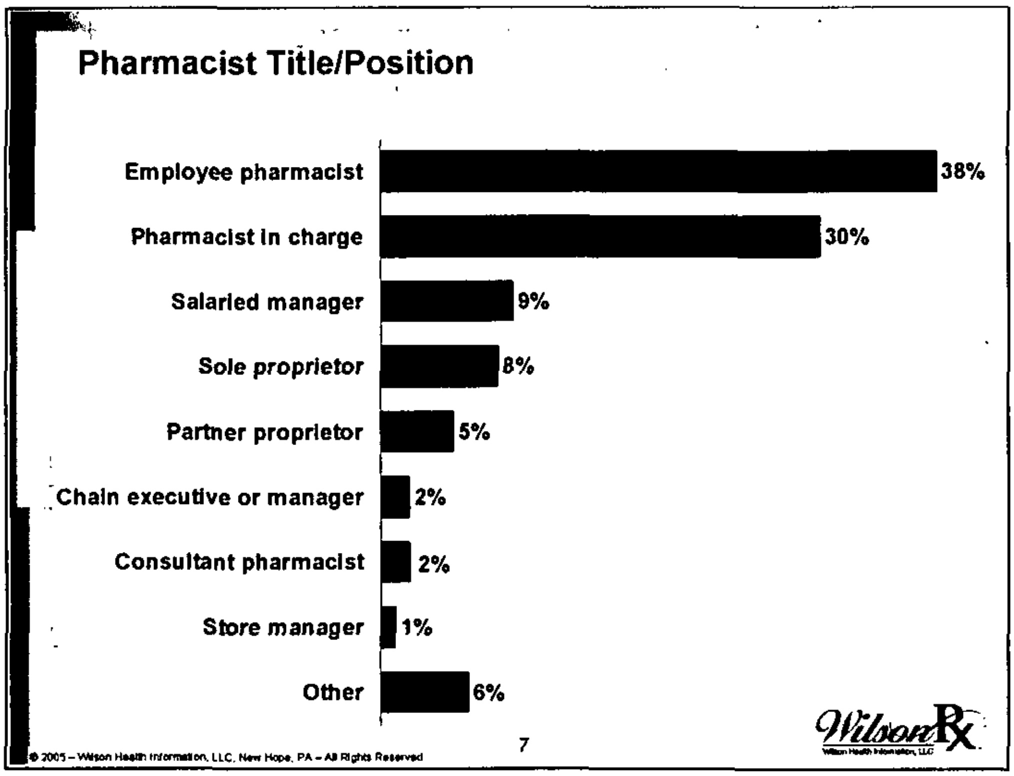
US Regional Definitions





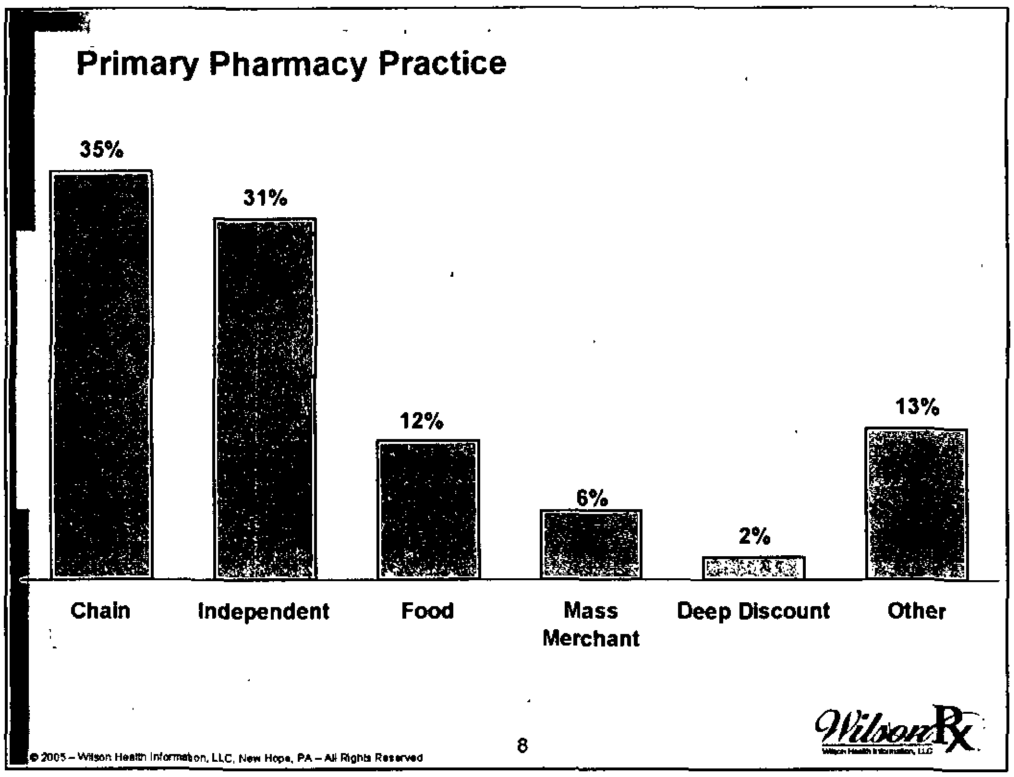
Pharmacist and Pharmacy Profile

6



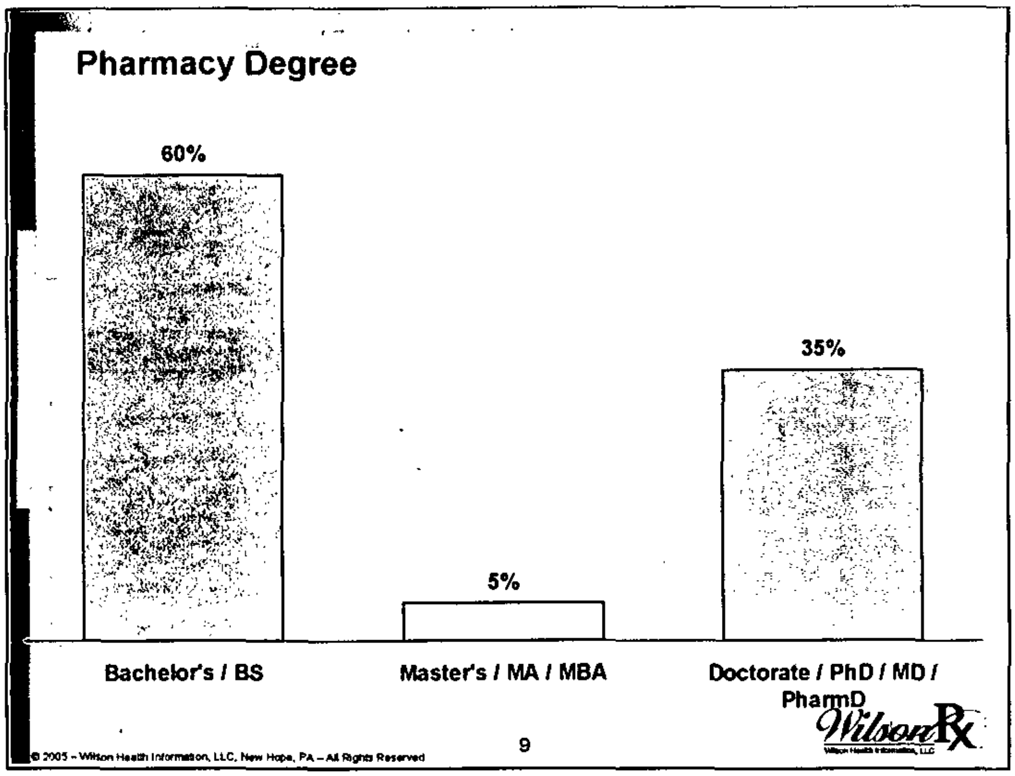
Q.1

Respondents to the study include employee pharmacists (38%), pharmacists in charge (30%), salaried managers (9%), sole proprietors (8%), and partner proprietors (5%).



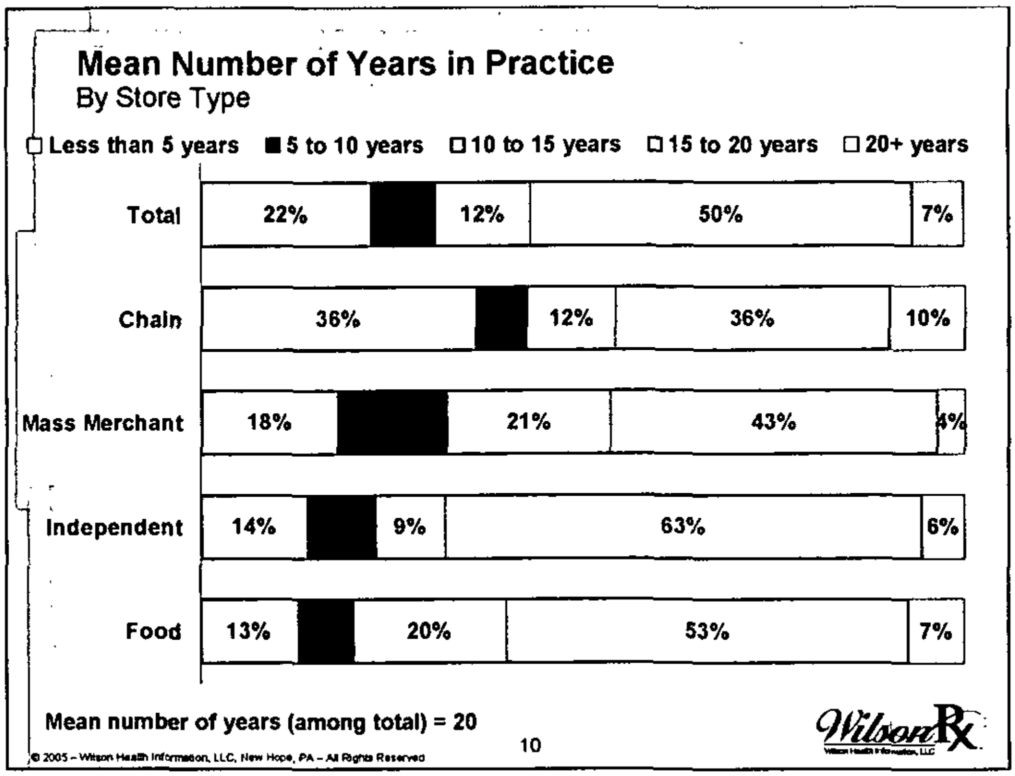
Q.50

Chains (35%) and independent pharmacies (31%) are most commonly represented, followed by food store (12%), and mass merchant pharmacies (6%).



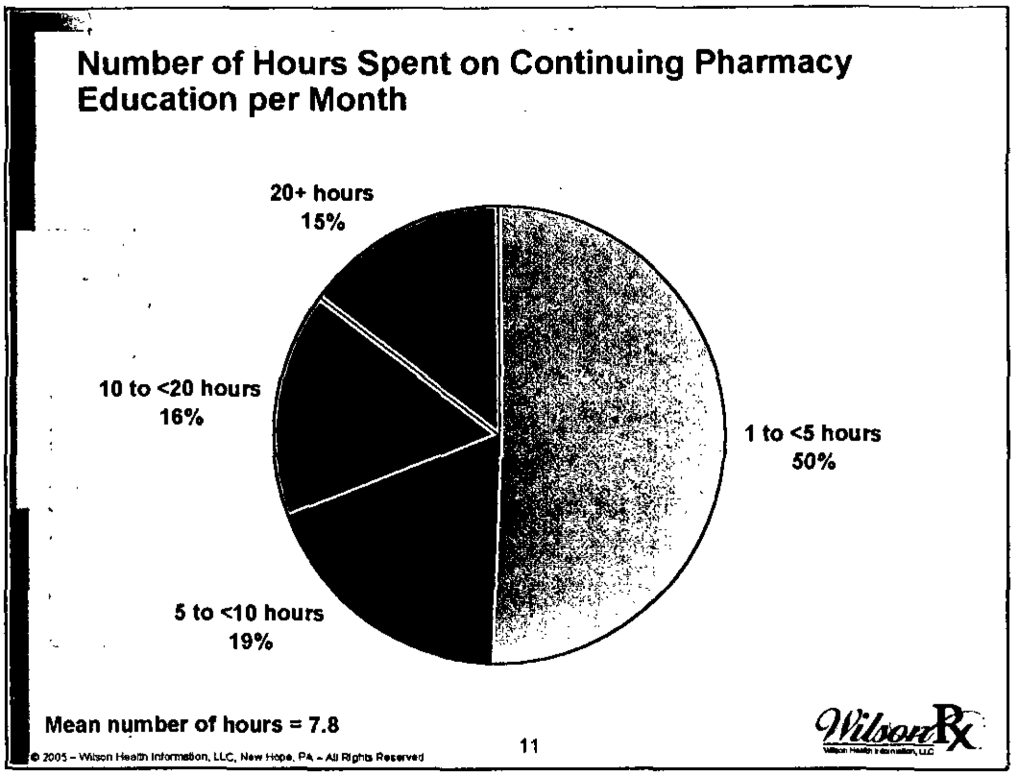
Q.2

One third of respondents have a doctorate, Ph.D., M.D., or PharmD and five percent have a master's/MA/MBA.



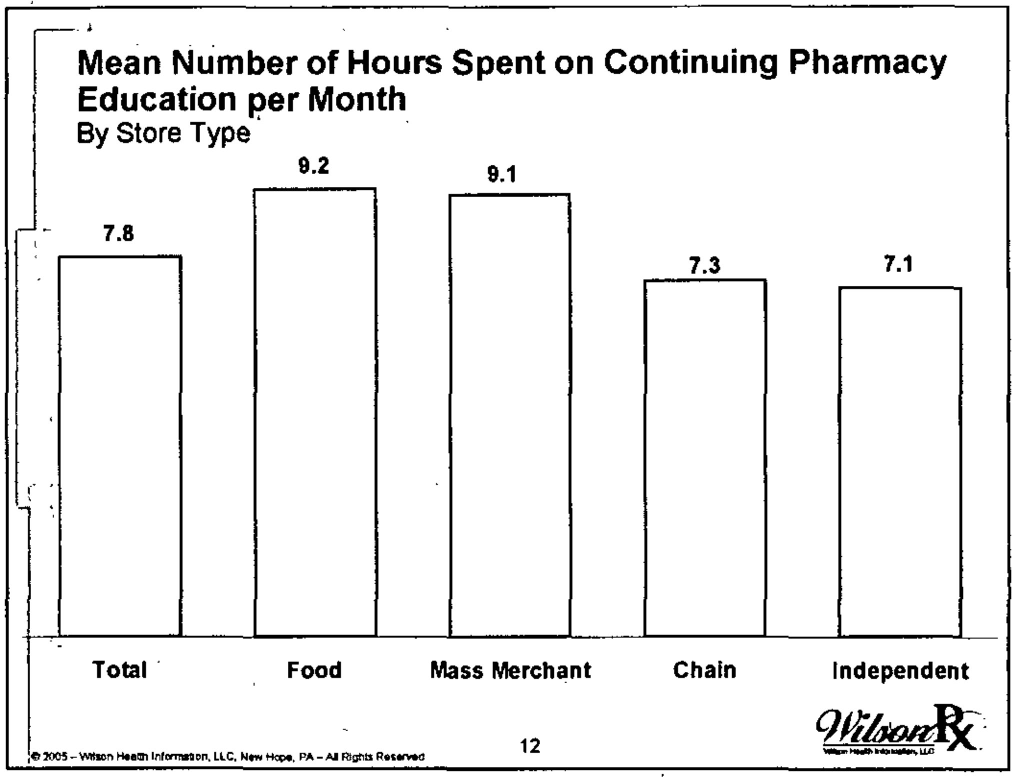
Q.4

On average, respondents indicate that they have been in practice for 20 years. Pharmacists who work for food store and independent pharmacies most commonly have 10+ years in practice, while chain pharmacists typically have the least number of years in practice.



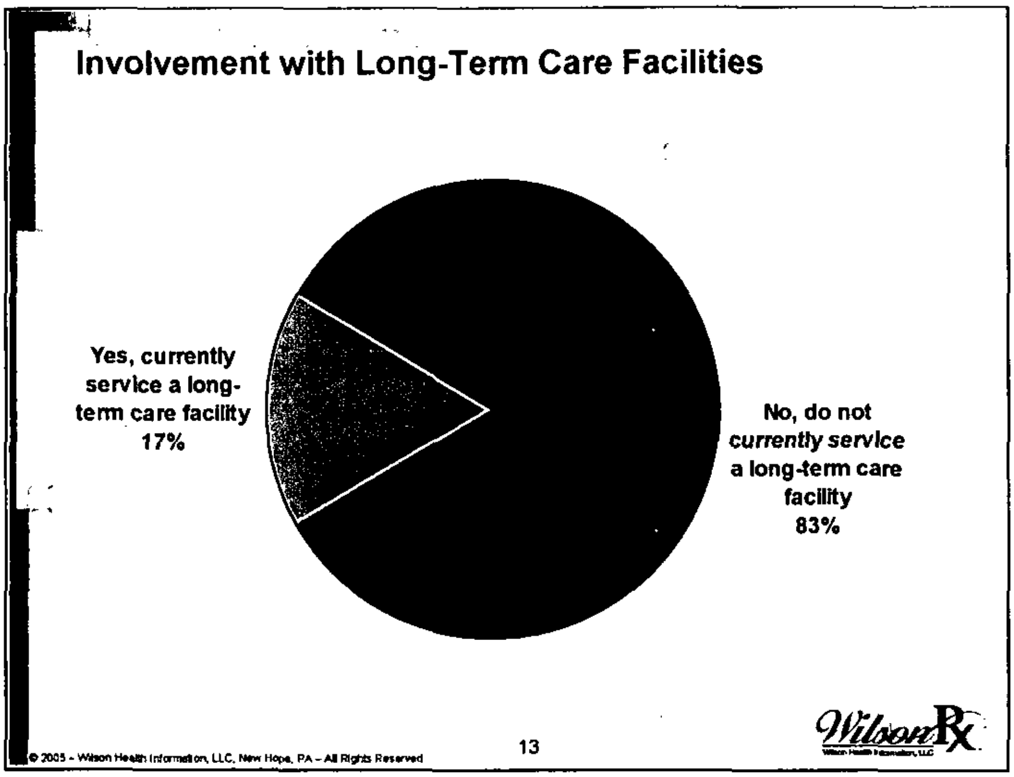
Q.3

On average, respondents spend about 8 hours per month on continuing pharmacy education.



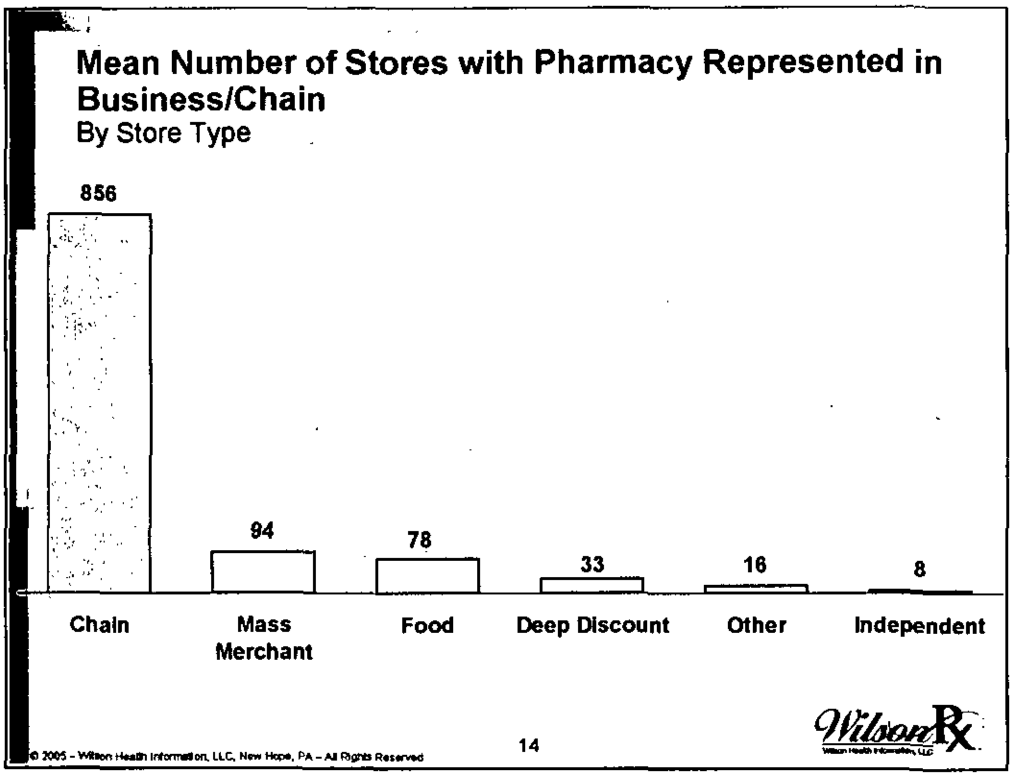
Q.3

Pharmacists who work in food store and mass merchant pharmacies tend to spend more time on continuing pharmacy education than pharmacists who work in chain and independent pharmacies.



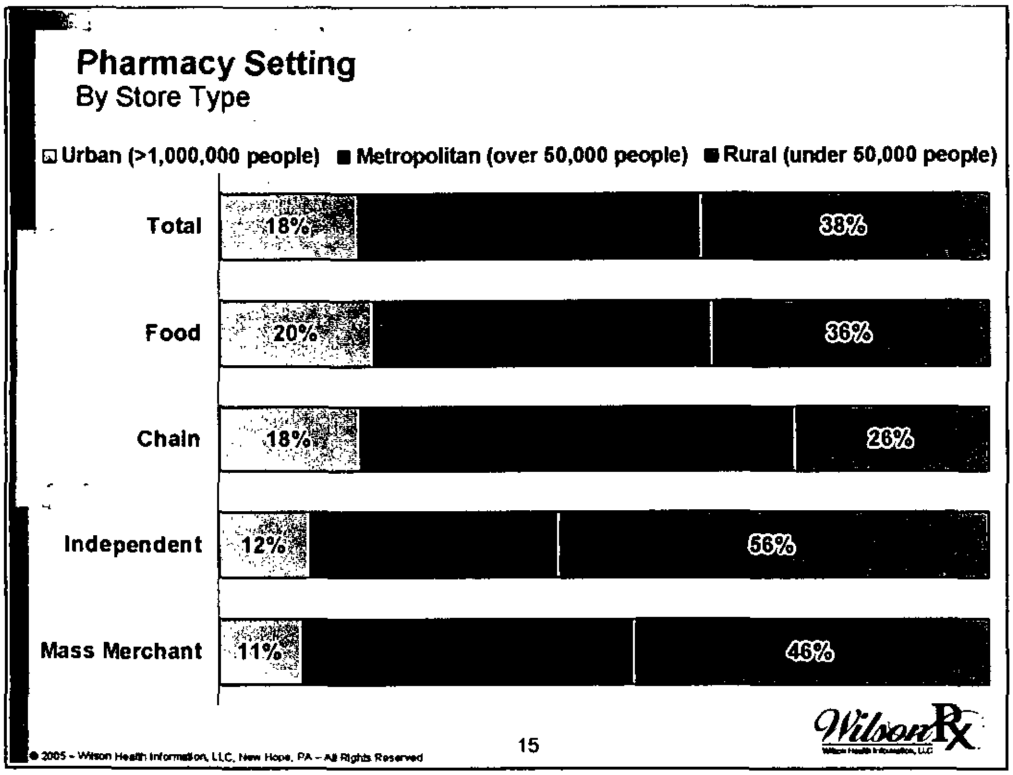
Q.49

Only 17% of respondents indicate that they currently service a long-term care facility.



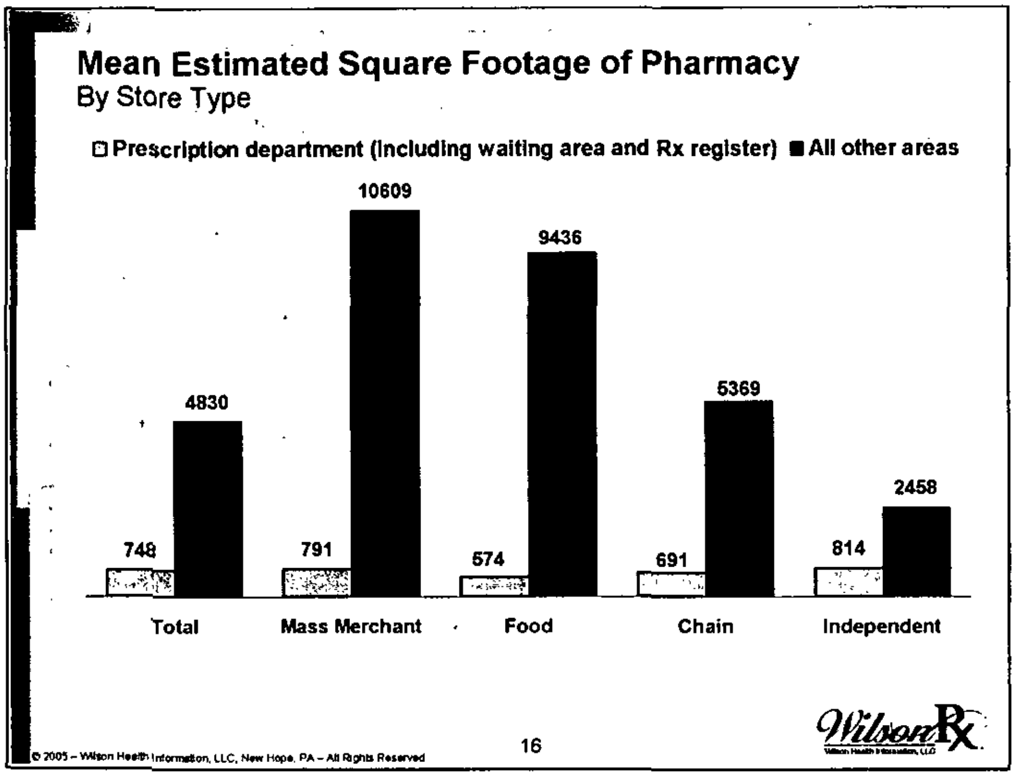
Q.51

As might be expected, chain pharmacies have the most pharmacies represented in their business, followed by mass merchant and food store pharmacies.



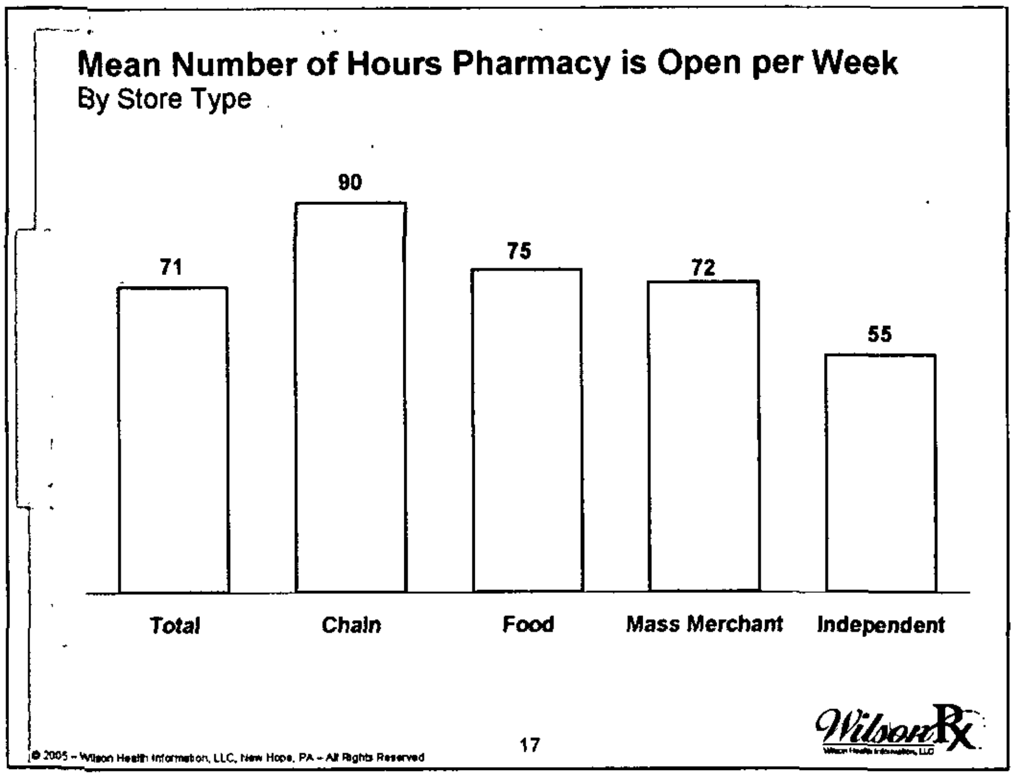
Q.43

Independent pharmacies are the most likely to be located in rural areas (under 50,000 people), while chains are the most likely to be in metropolitan areas (over 50,000 people), and food stores are the most likely to be in urban areas (over 1,000,000 people).



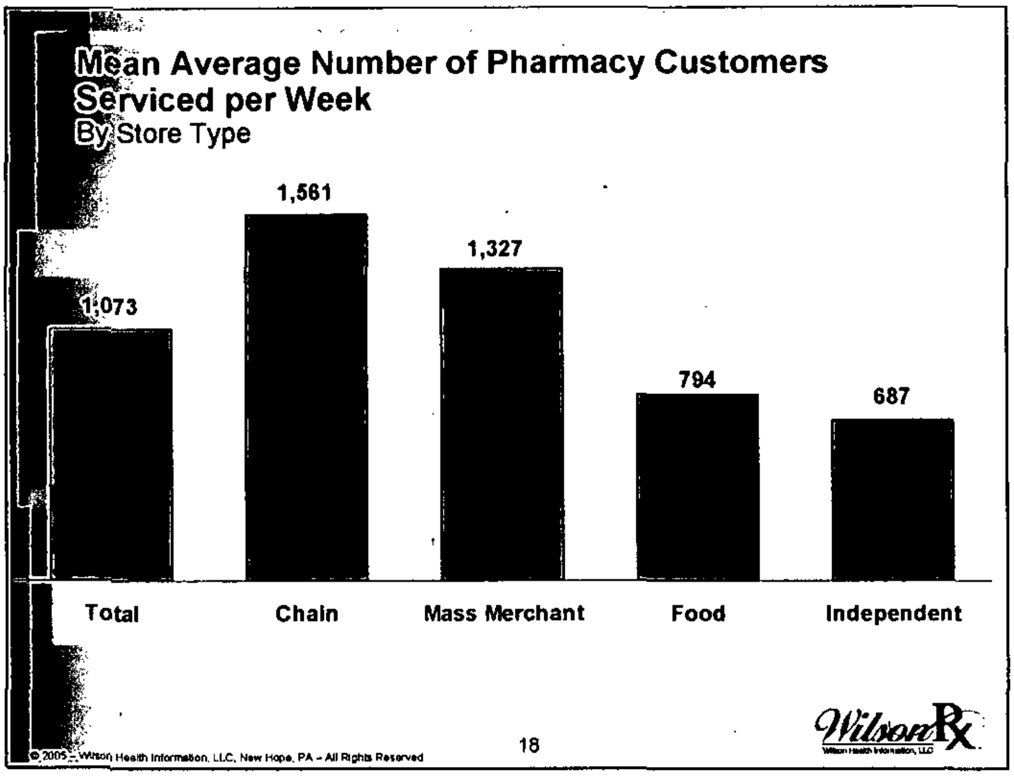
Q.41

Independent pharmacies typically have the largest prescription departments in terms of square footage, followed by mass merchant pharmacies. Mass merchant pharmacies have the largest stores overall (in terms of square footage), followed by food store and chain pharmacies.



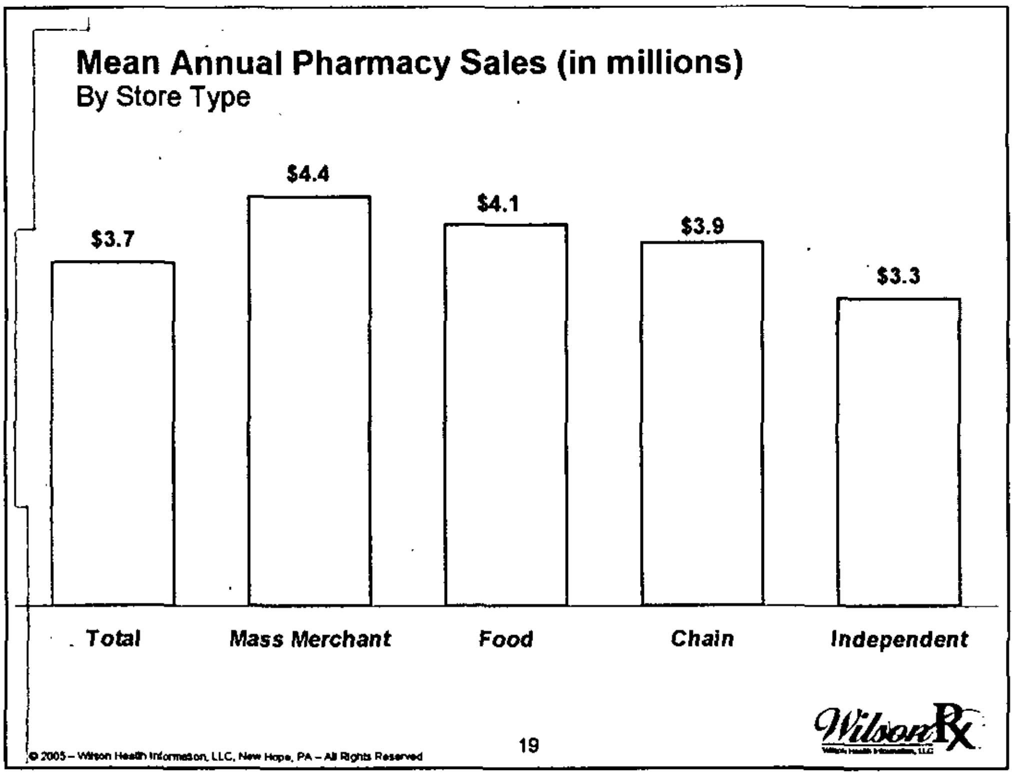
Q.42

The average pharmacy is open 71 hours per week. Chain pharmacies are open the most hours, an average of 90 hours, followed by food store (75) and mass merchant pharmacies (72). Independent pharmacies are open the least number of hours per week (55).



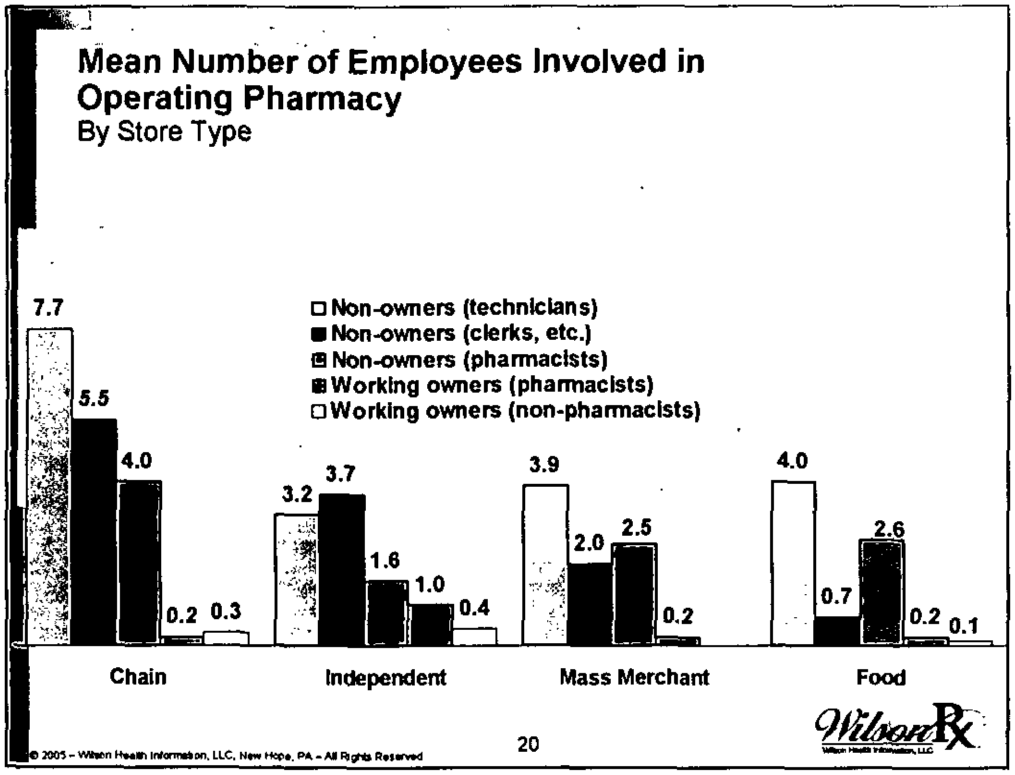
Q.53

The average pharmacy services 1,073 customers per week. Chain pharmacies typically service the most customers per week (1,561), followed by mass merchant pharmacies (1,327). Independent pharmacies service the least number of pharmacies per week (687).



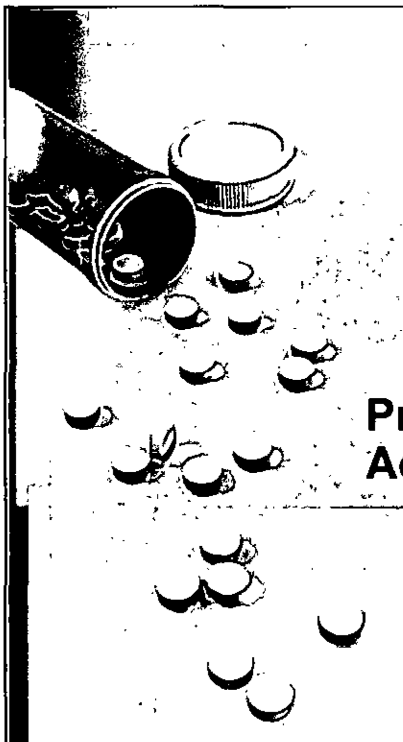
Q.54

Mass merchants ($4.4M) report the highest annual pharmacy sales, followed by food store ($4.1M) and chain pharmacies ($3.9M). Independents ($3.3M) report the lowest annual pharmacy sales.



Q.52

Chains typically employ more people in their pharmacy than other types of pharmacies.



Prescription-Related Activities

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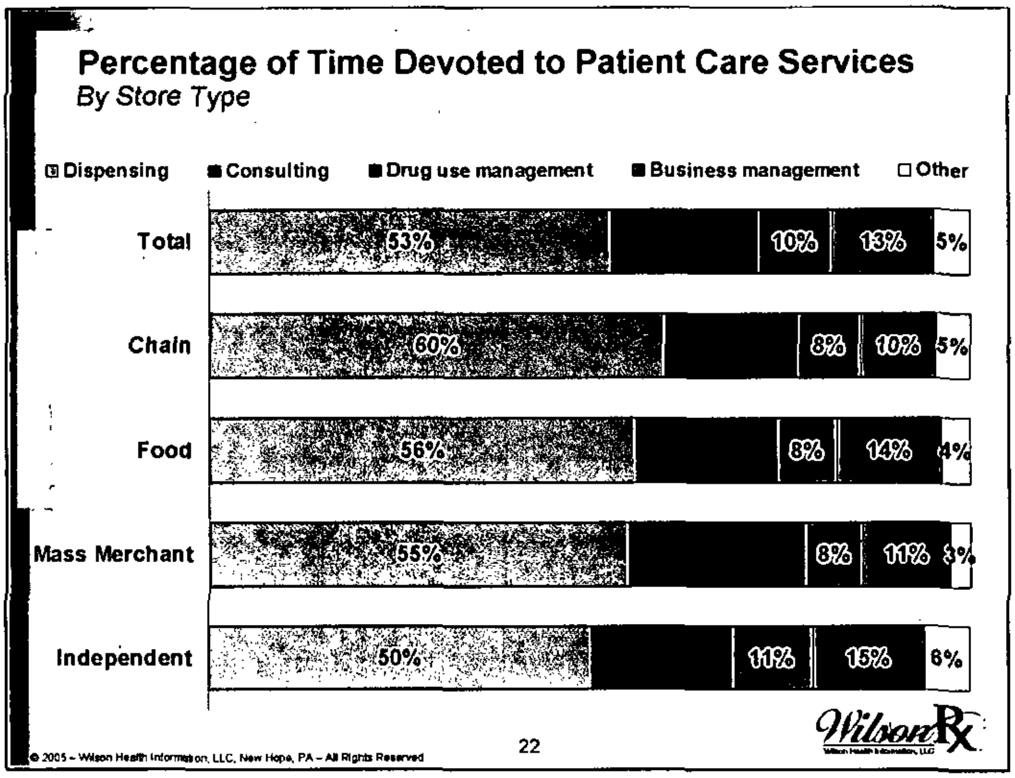
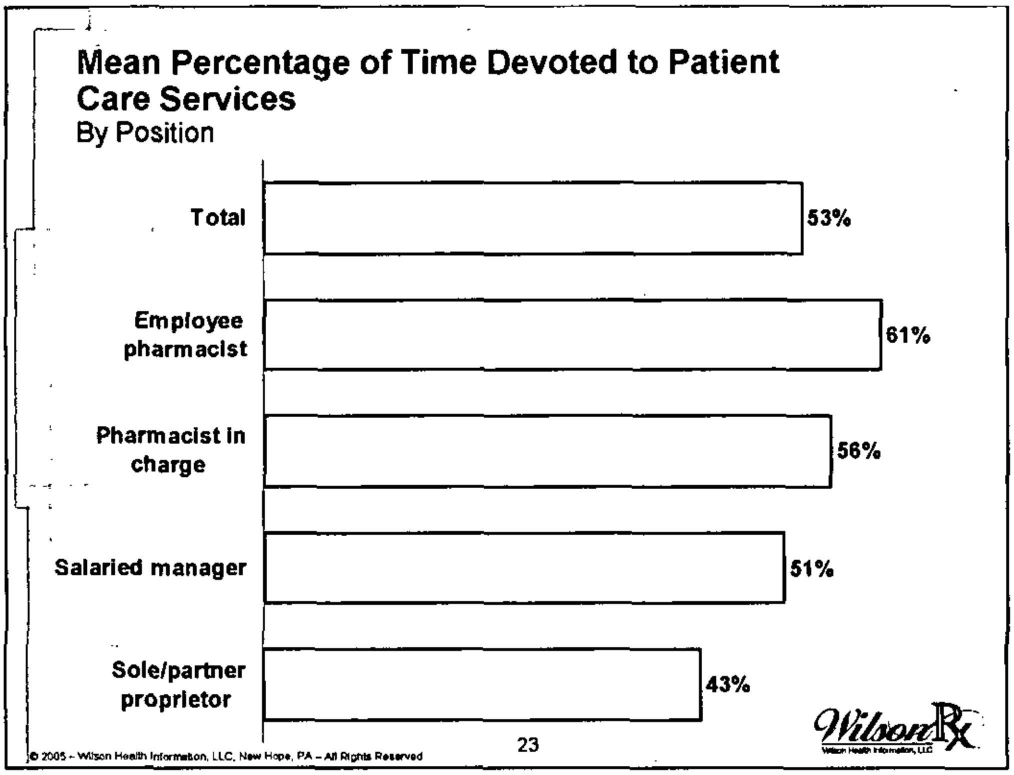


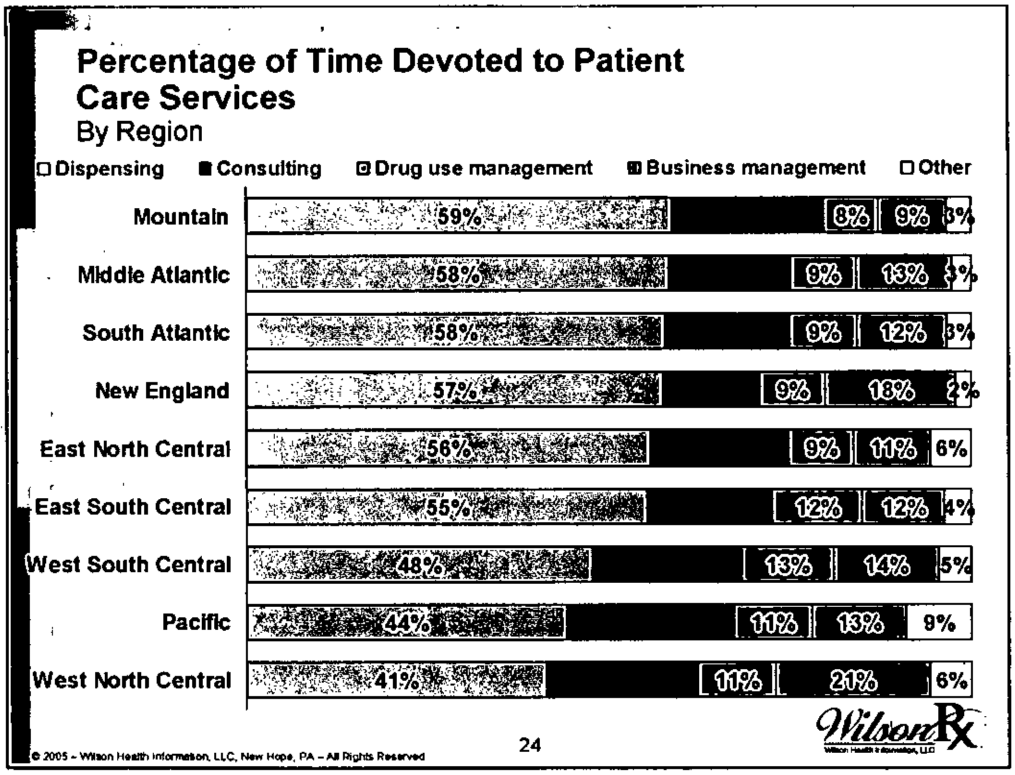
Q.5

Pharmacists indicate that they spend a little over half their time on dispensing (53%), nine-teen percent on consulting, thirteen percent on business management, and ten percent on drug use management. Chain pharmacists spend the most time dispensing (60%), mass merchant pharmacists the most time on consulting (23%), and independents spend the most on business management (15%) and drug use management (11%).



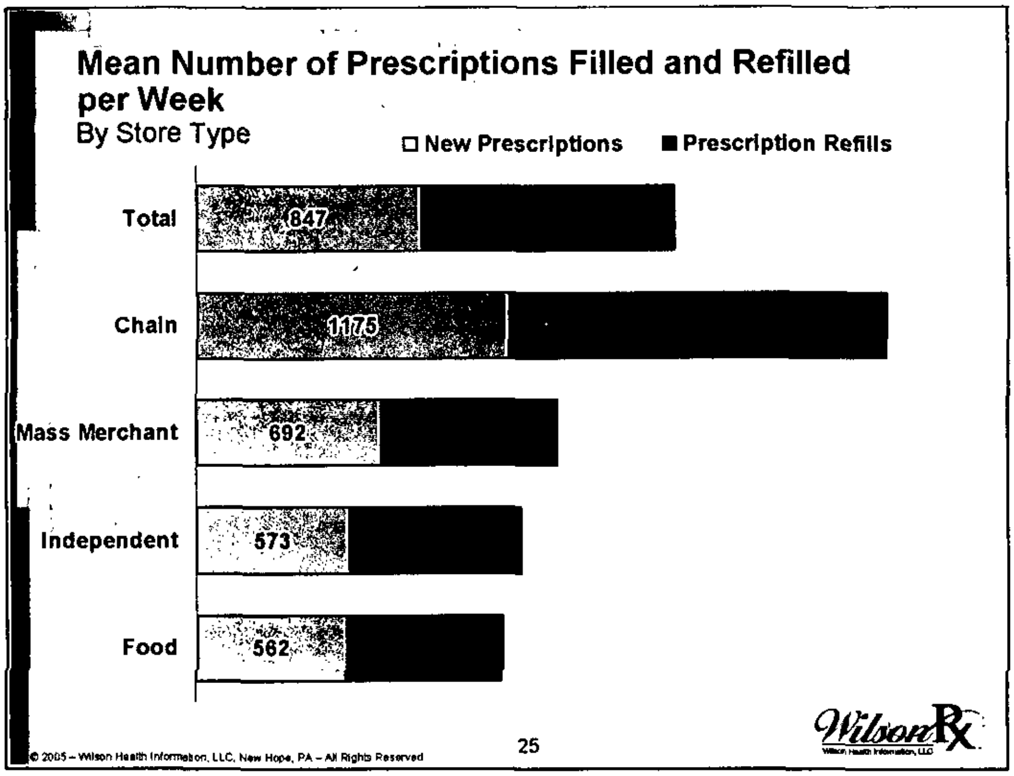
Q.5

The amount of time devoted to patient care services varies by position within the pharmacy. Employee pharmacists spend the most time on patient care services (61%), while sole/partner proprietors spend the least (43%).



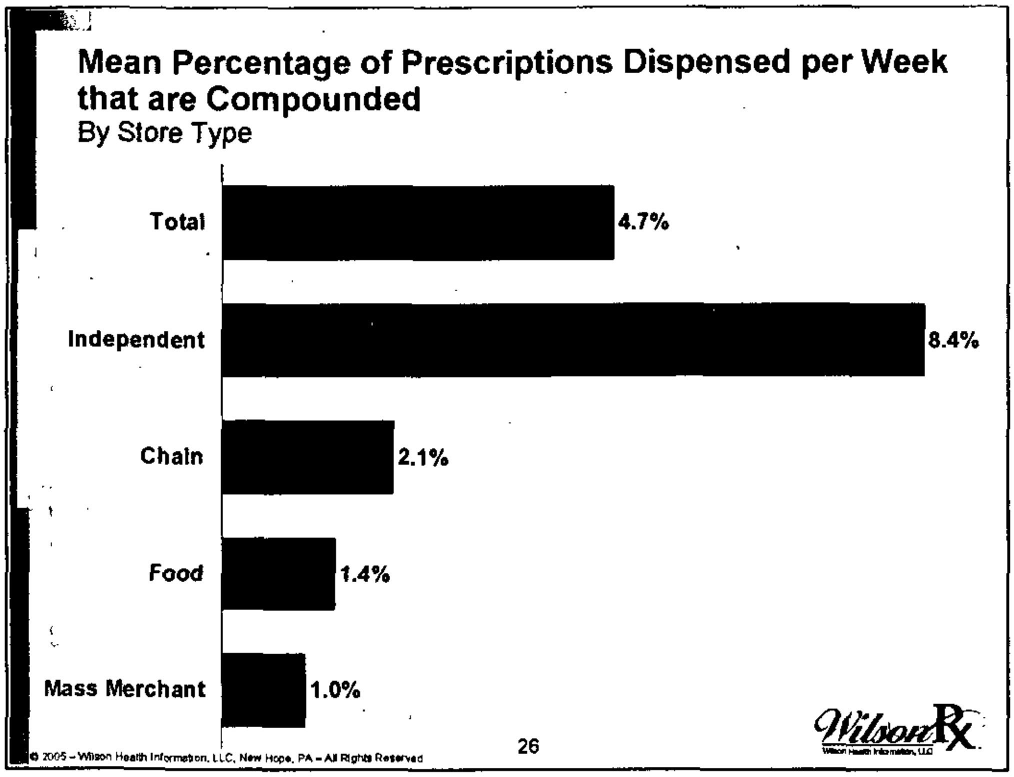
Q.14-1

The percentage of time devoted to patient care services varies by geographic region.



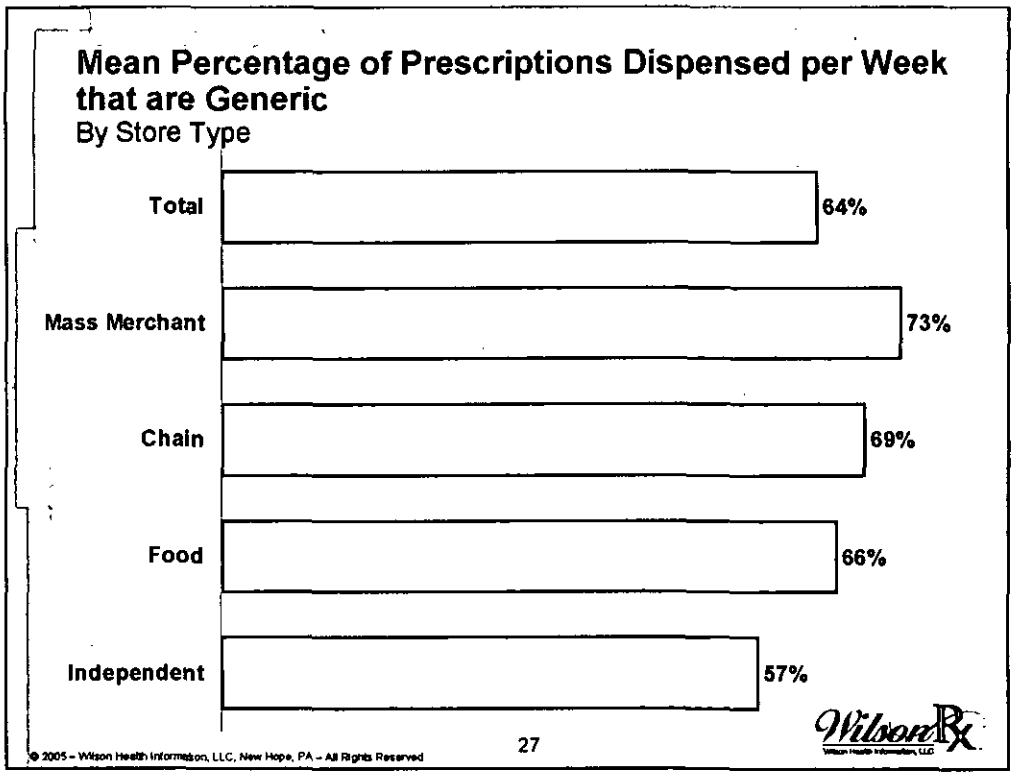
Q.12

As might be expected, chain pharmacies fill the most new (1,175) and refilled prescriptions (1,427) per week, which is almost twice as many prescriptions as any other type of pharmacy. Food store pharmacies fill the least number of prescriptions per week (562; 594).



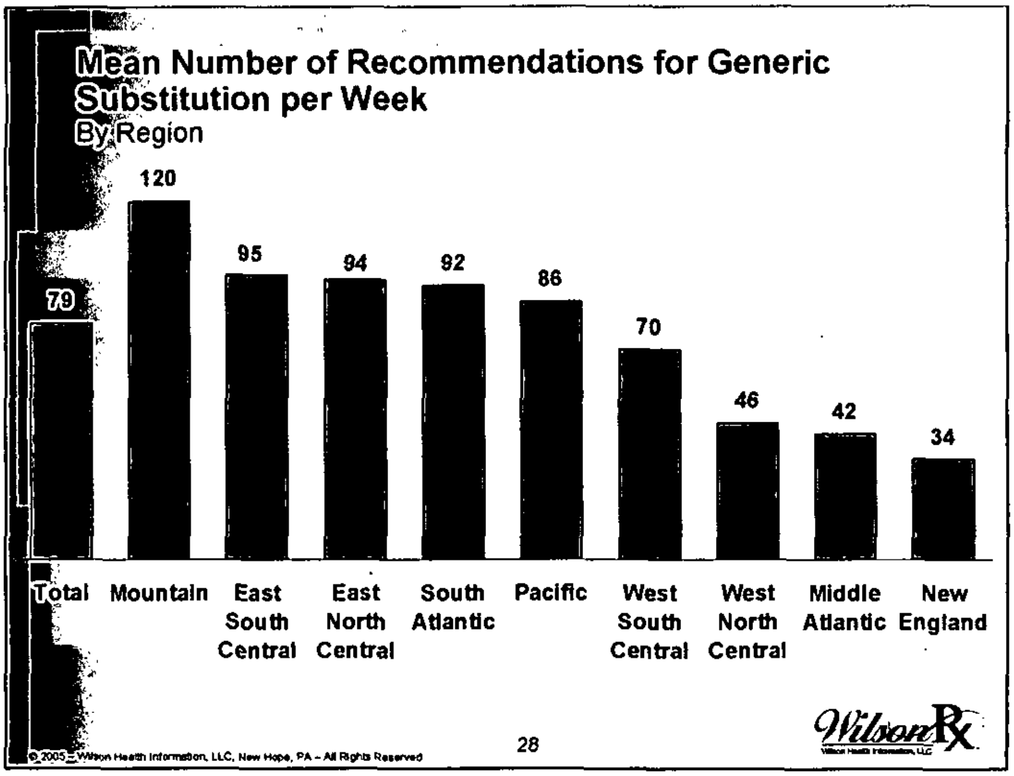
Q.13

Approximately five percent of prescriptions dispensed per week are compounded. Independent pharmacists fill the highest proportion of compounded prescriptions (8%).



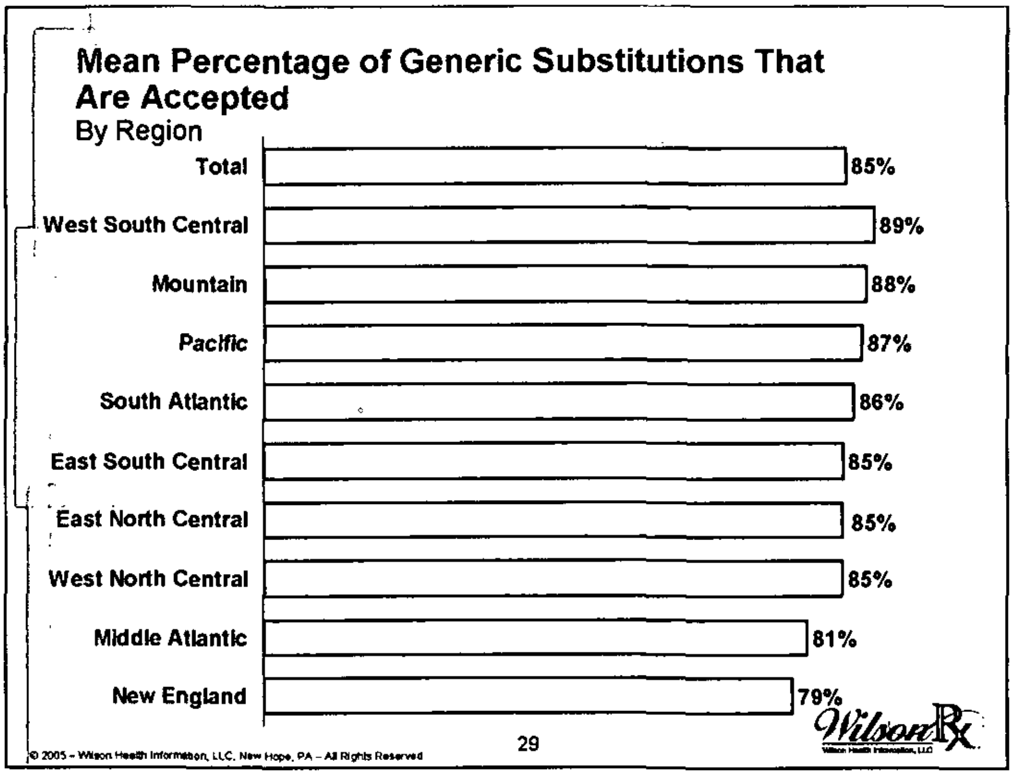
Q.13

Sixty-four percent of prescriptions dispensed per week are generic. The percentage of generics dispensed is highest among mass merchants (73%) and lowest among independents 957%).



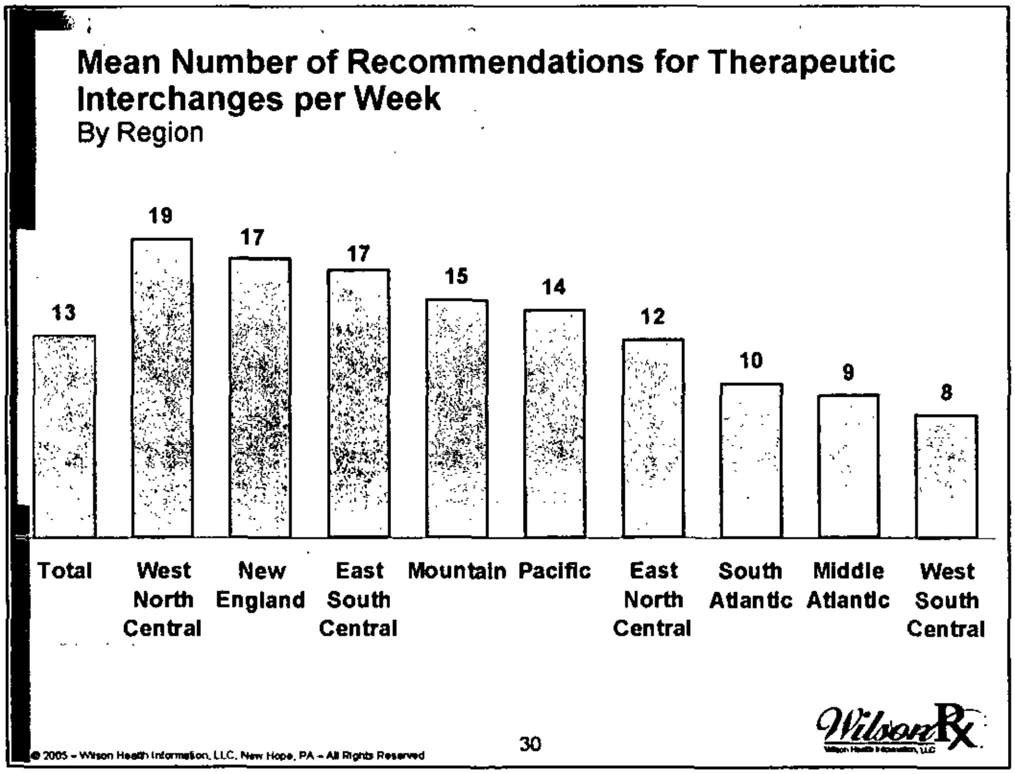
Q.19

On average, pharmacists make seventy-nine recommendations for generic substitutions per week.



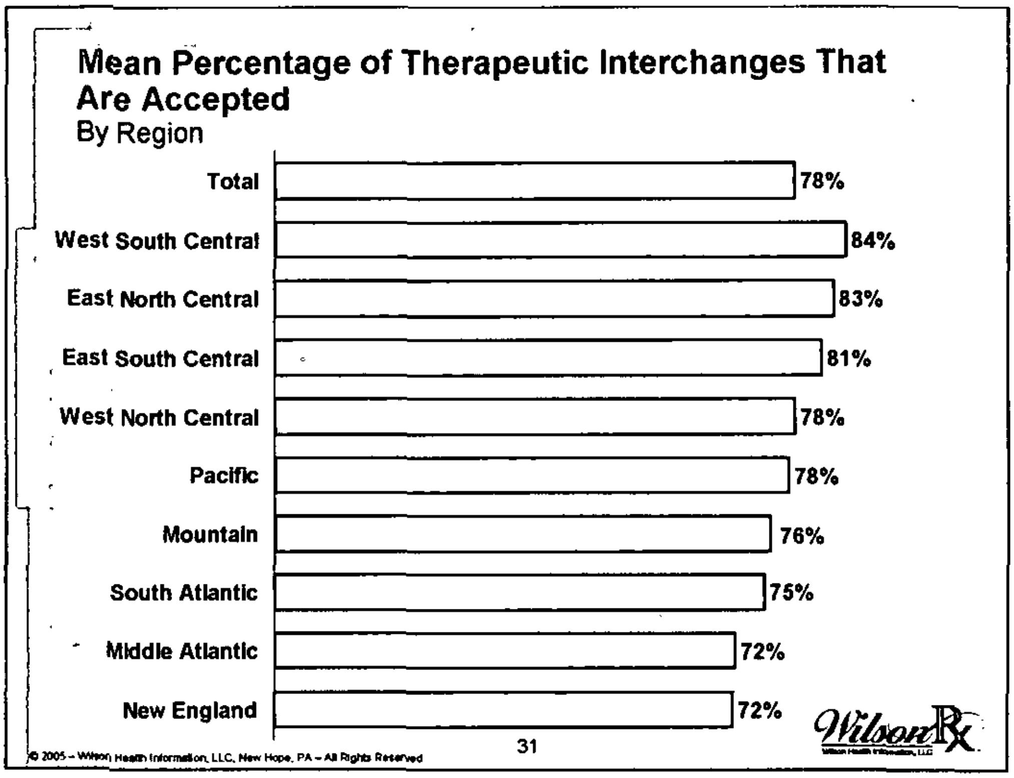
Q.20

Most generic substitutions (85%) are accepted.



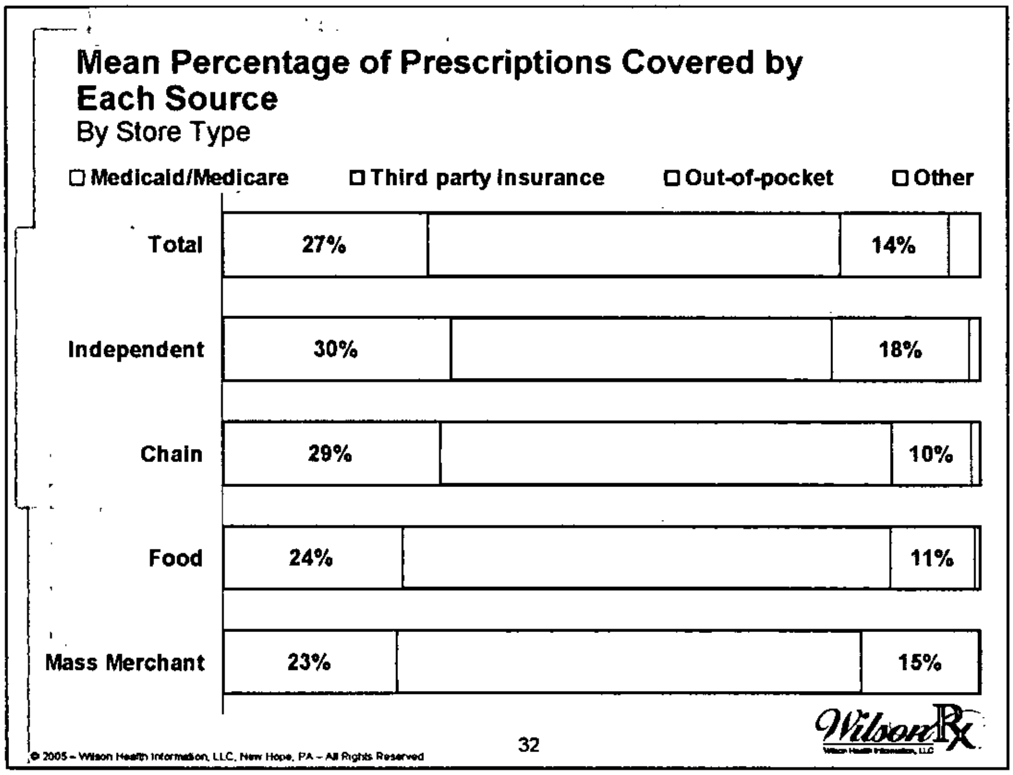
Q.21

Pharmacists make an average of 13 recommendations for therapeutic interchanges per week.



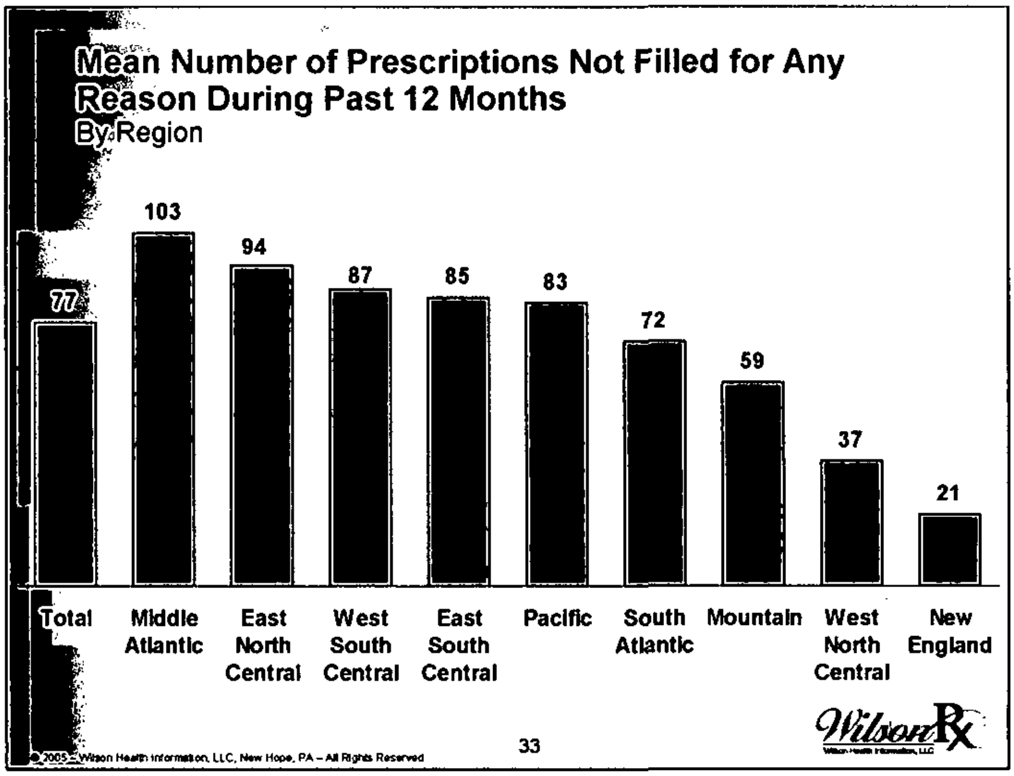
Q.22

More than three out of four therapeutic interchanges are accepted.



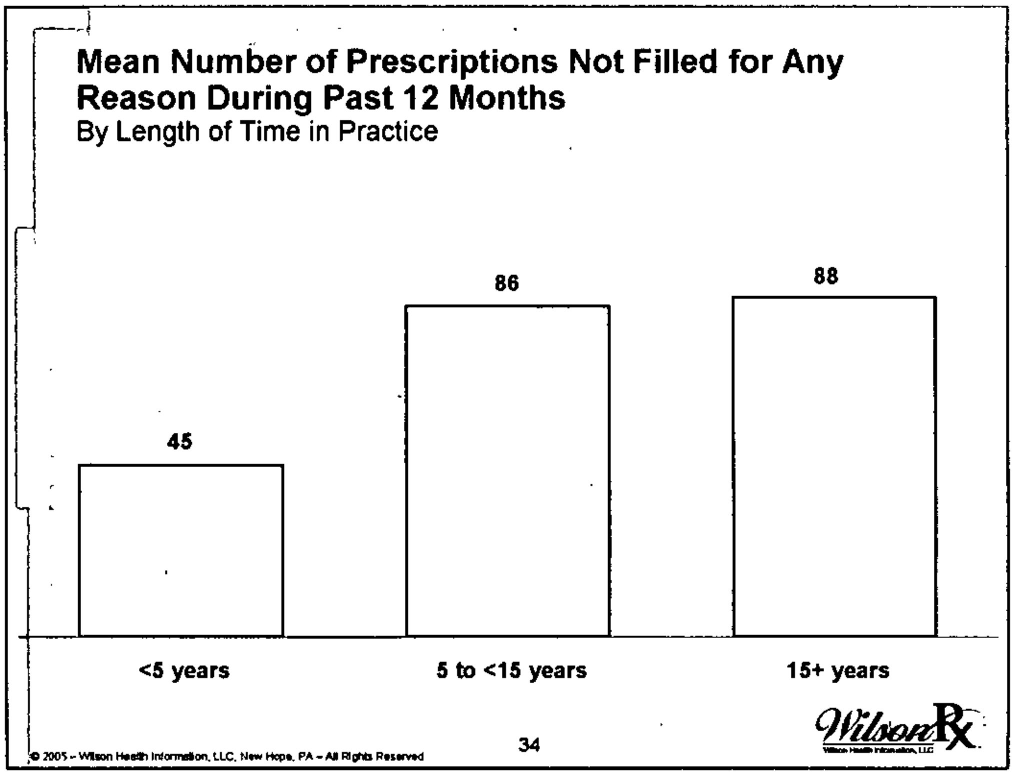
Q.14-1

The majority of prescriptions (54%) are covered by third party insurance, twenty-seven percent are covered by Medicaid/Medicare, and fourteen percent are paid out-of-pocket. Prescriptions filled at food store pharmacies (64%) are the most likely to be covered by insurance, while prescriptions filled at independents are the most likely to be paid out-of-pocket (18%) and by Medicaid/Medicare (30%).



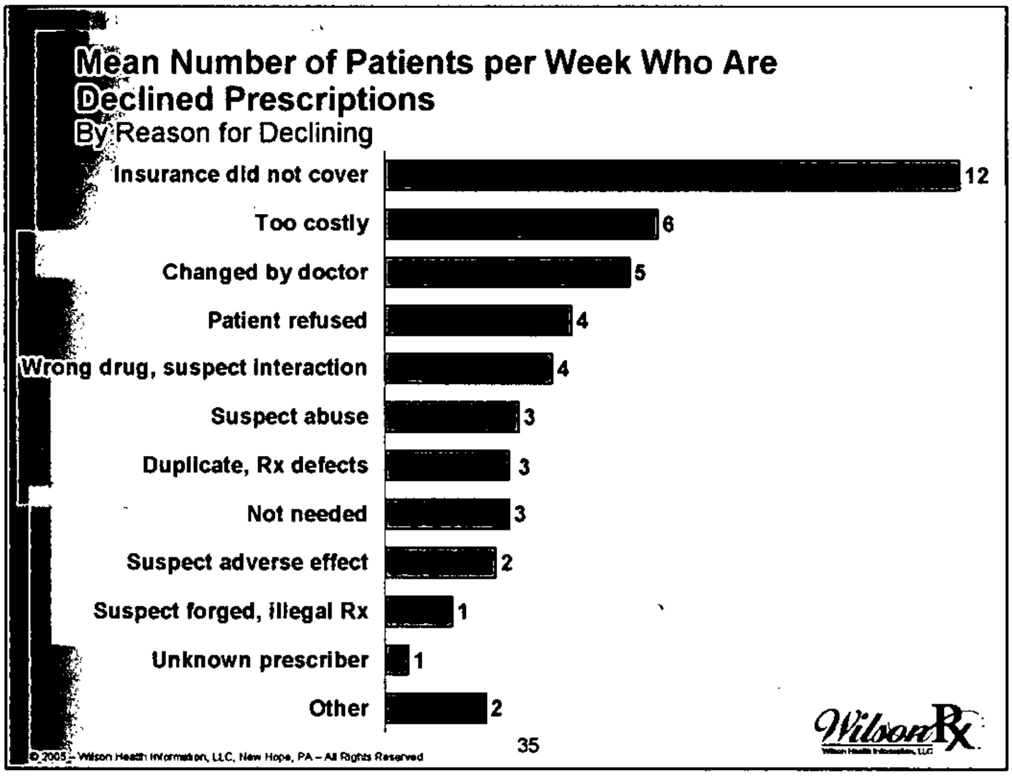
Q.15

On average, pharmacists say that did not fill 77 prescriptions in the past 12 months (for any reason).



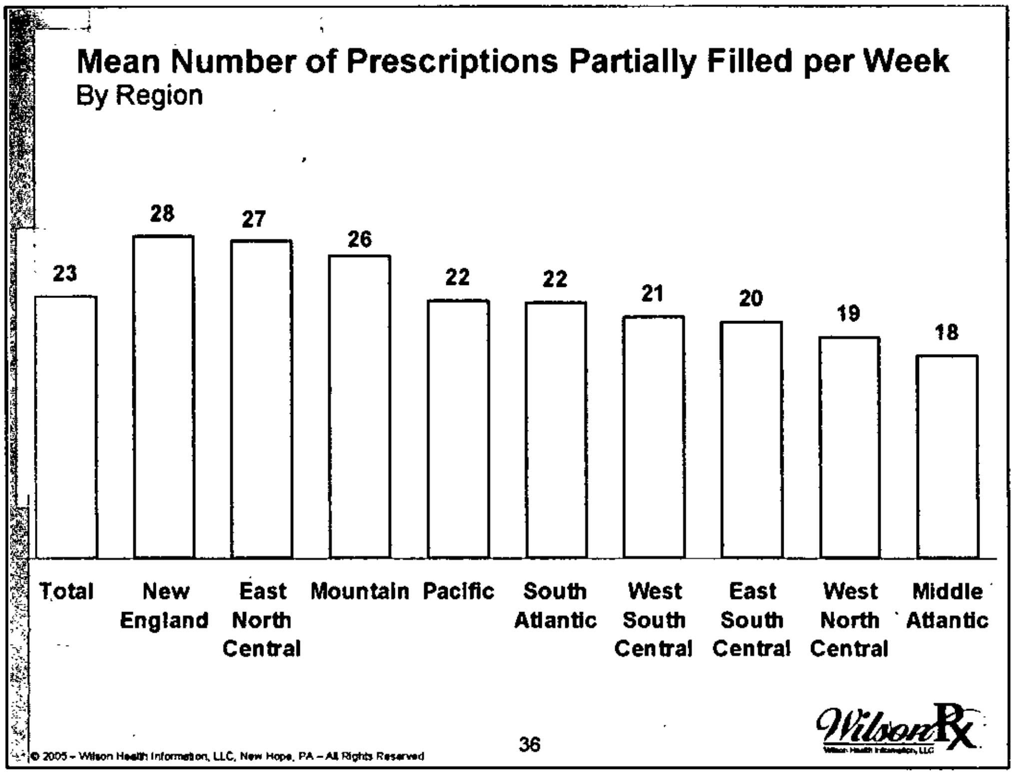
Q.15

As pharmacists' years in practice increase they tend to not fill more prescriptions.



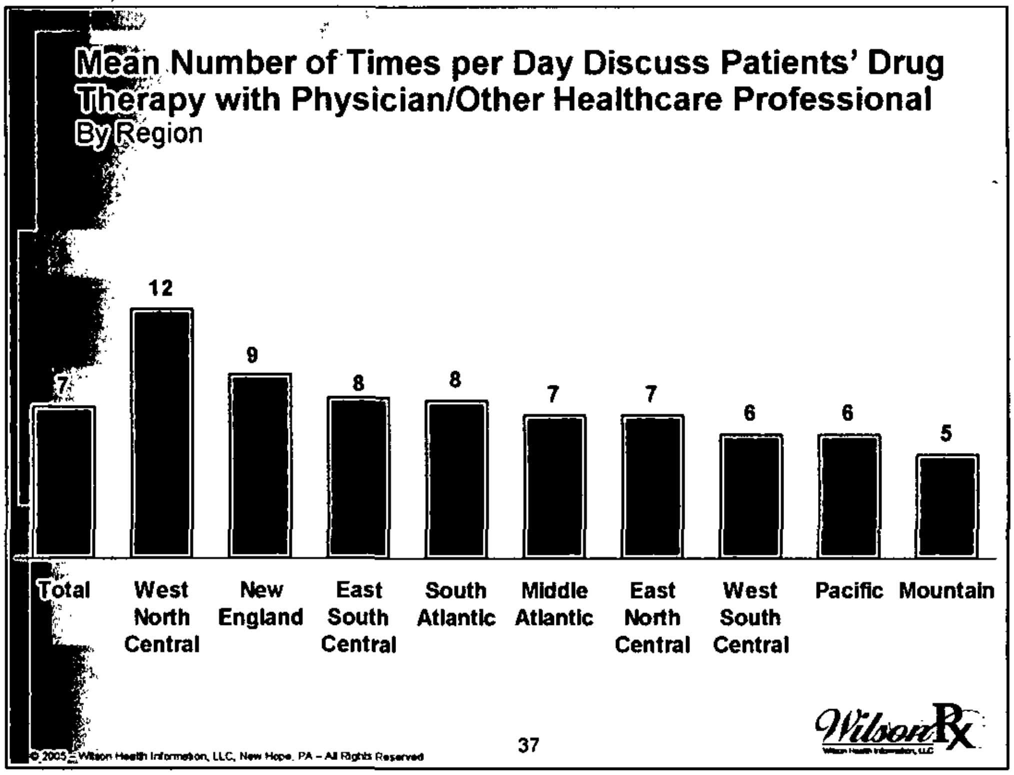
Q.16

Patients are most commonly declined prescriptions due to insurance not covering the prescription (12), the prescription being too costly (6), changed by doctor (5), patient refused (4), wrong drug, suspect interaction (4), suspect abuse (3), duplication, Rx defects (3), and not needed (3).



Q.17

Pharmacists partially fill an average of 23 prescriptions per week.



Q.18

On average, pharmacists discuss patients' drug therapy with physicians and other health care professionals seven times per day.

Counseling, Monitoring, and Testing Services

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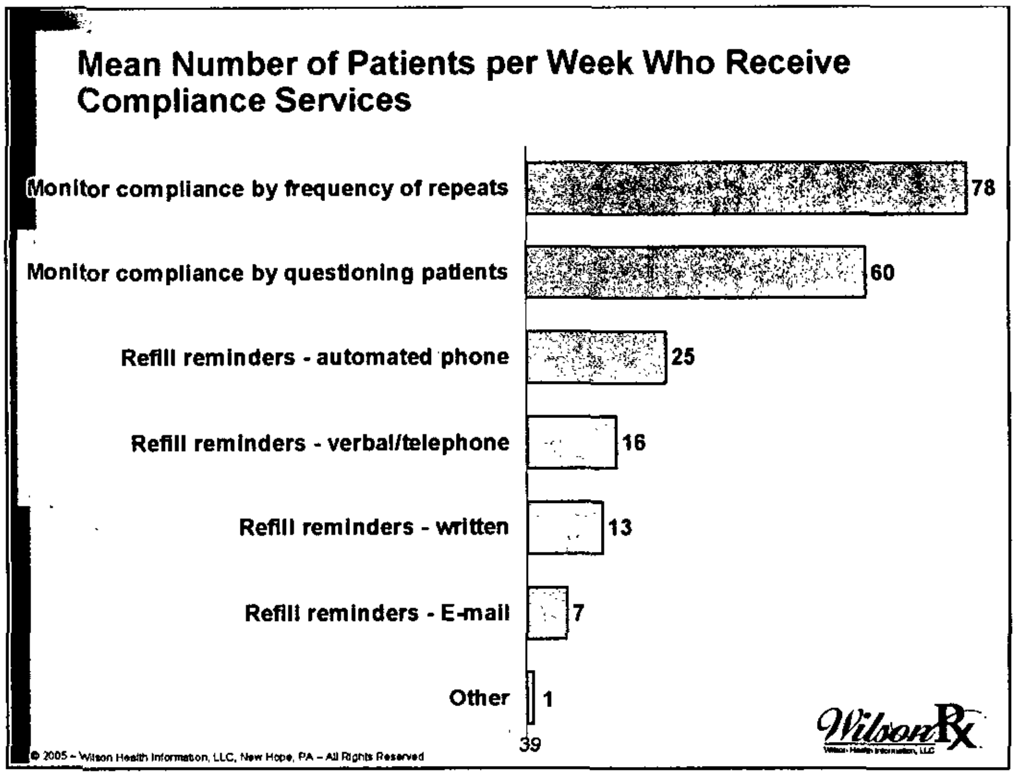
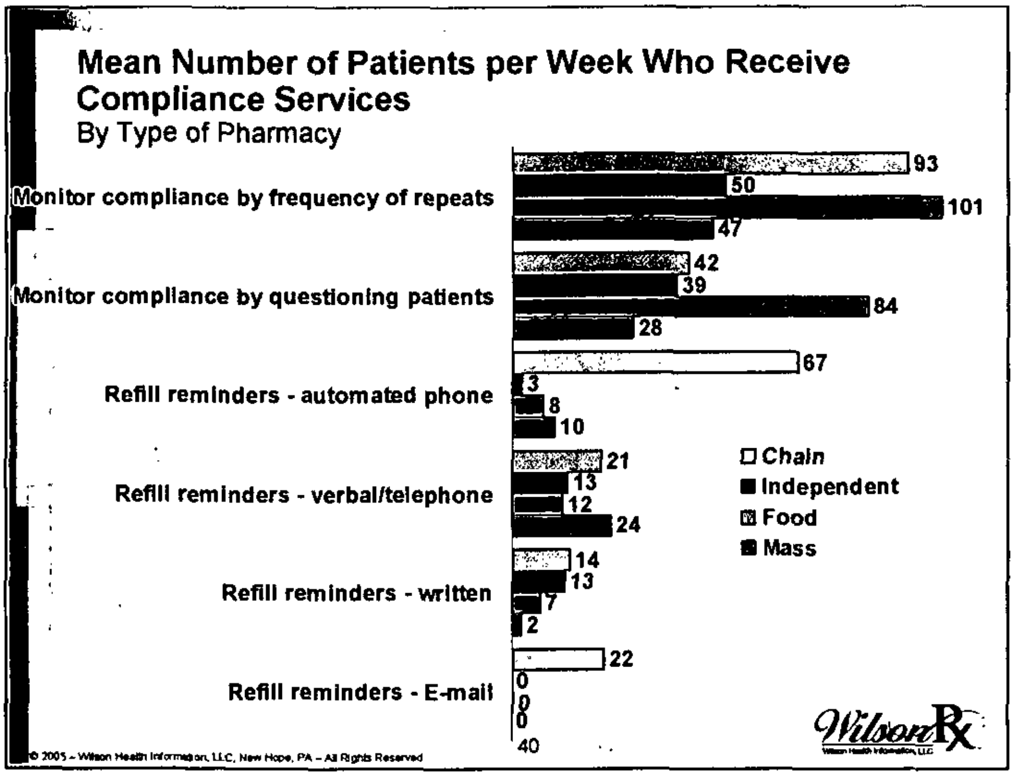


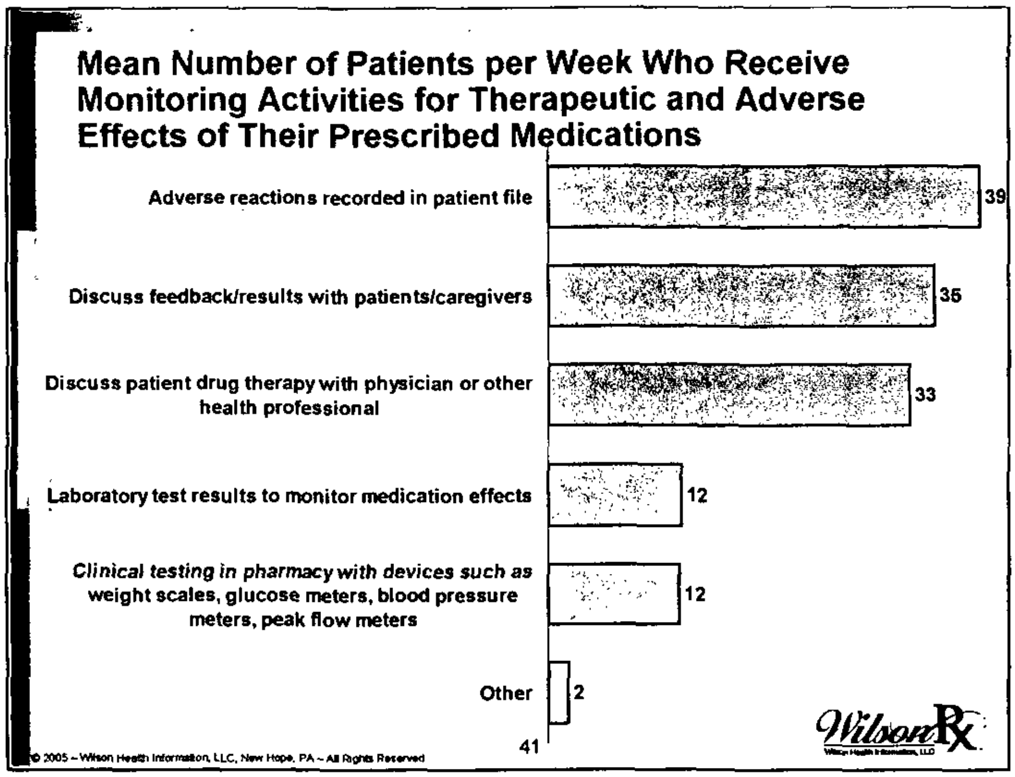
Q25

The leading compliance services received include monitoring compliance by frequency of repeats (78), monitoring compliance by questioning patients (60), automated phone refill reminders (25), telephone refill reminders (16), written refill reminders (13), and e-mail refill reminders (7).



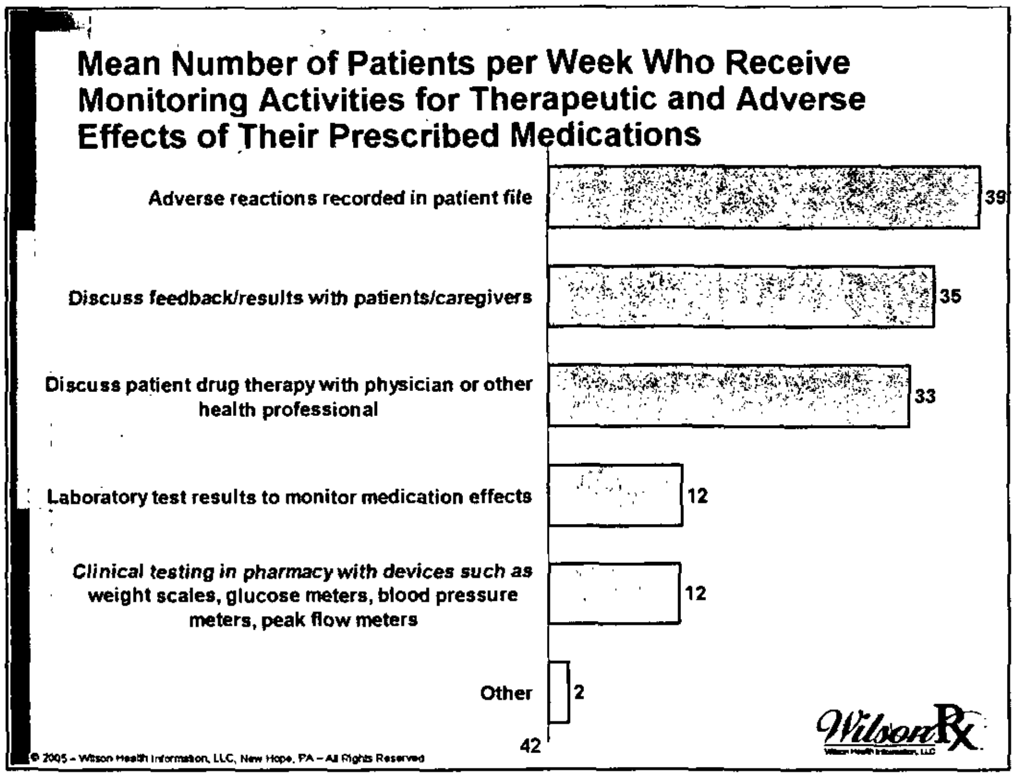
Q25

Compliance services vary by type of pharmacy. Chains are the most likely to use e-mail, written, and automated telephone reminders. Food store pharmacies are the most likely to monitor compliance by questioning patients and the frequency of repeats. Mass merchants are the most likely to make telephone call refill reminders.



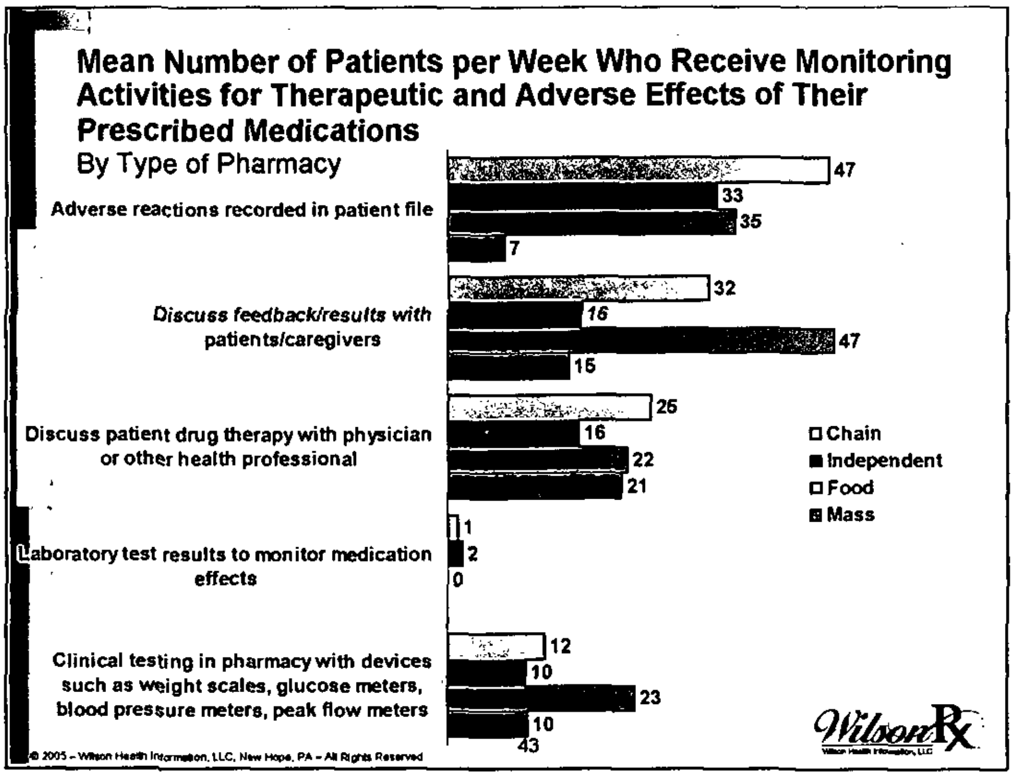
Q26

The most common monitoring activities received by patients for therapeutic and adverse effects of their prescribed medications include having adverse reactions recorded in their patient file, discussing feedback/results with patients/caregivers, and discussing patient drug therapy with physicians or other health professionals.



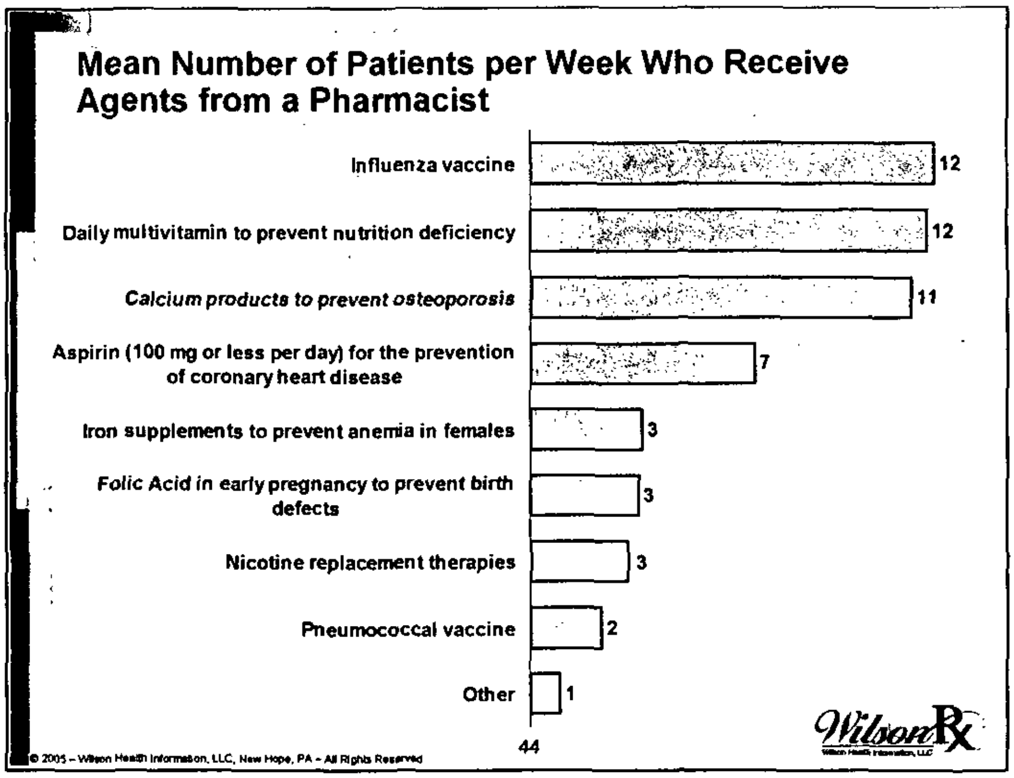
Q26

Monitoring activities most commonly received by patients for therapeutic and averse effects of their prescribed medications include having adverse reactions recorded in their patient file, discussing feedback/results with patients/caregivers, and discussing patient drug therapy with physicians or other health professionals.



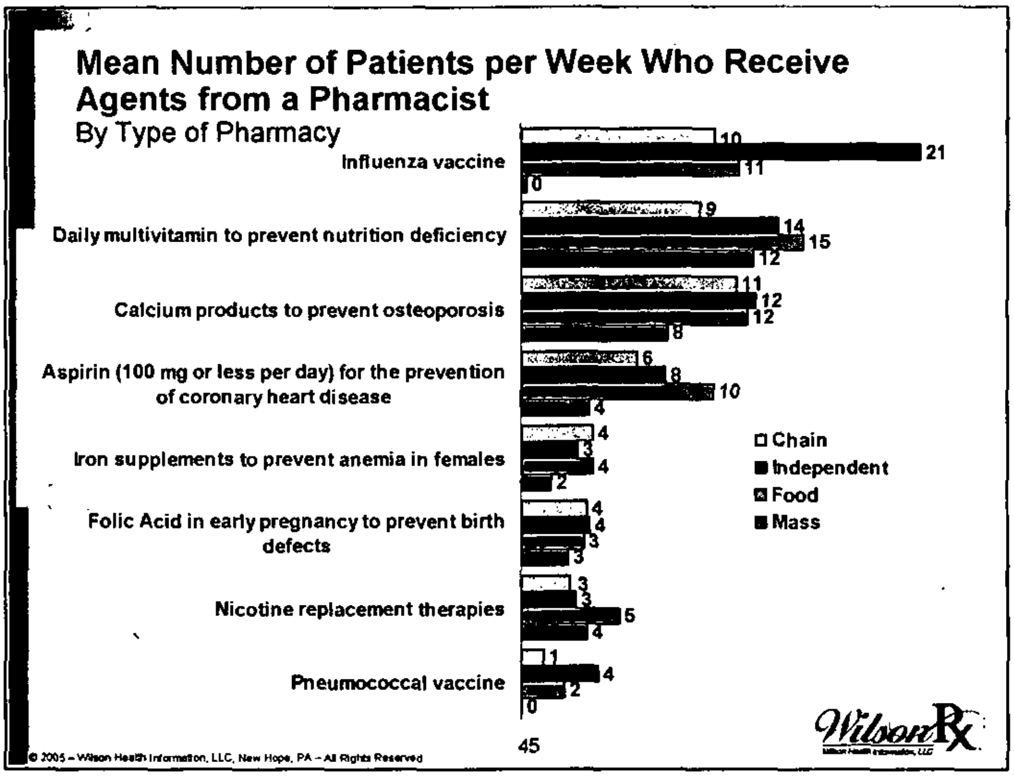
Q26

Monitoring activities vary by type of pharmacy. Pharmacists at food store pharmacies most commonly discuss patient drug therapy with patients/caregivers and do clinical testing in the pharmacy. Pharmacists at chain pharmacies most commonly discuss patient drug therapy with physicians or other health professionals and record adverse reactions in patient files.



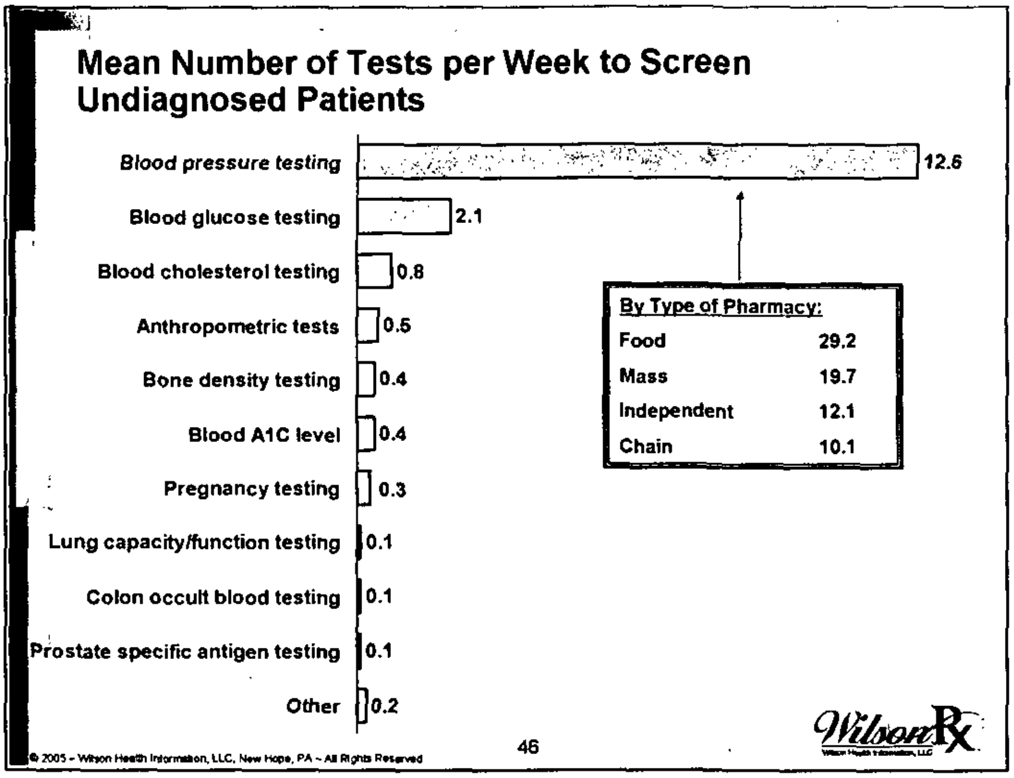
Q27

The most commonly received agents from pharmacists include the influenza vaccine, daily multivitamins to prevent nutrition deficiency, calcium products to prevent osteoporosis, and Aspirin to prevent coronary heart disease.



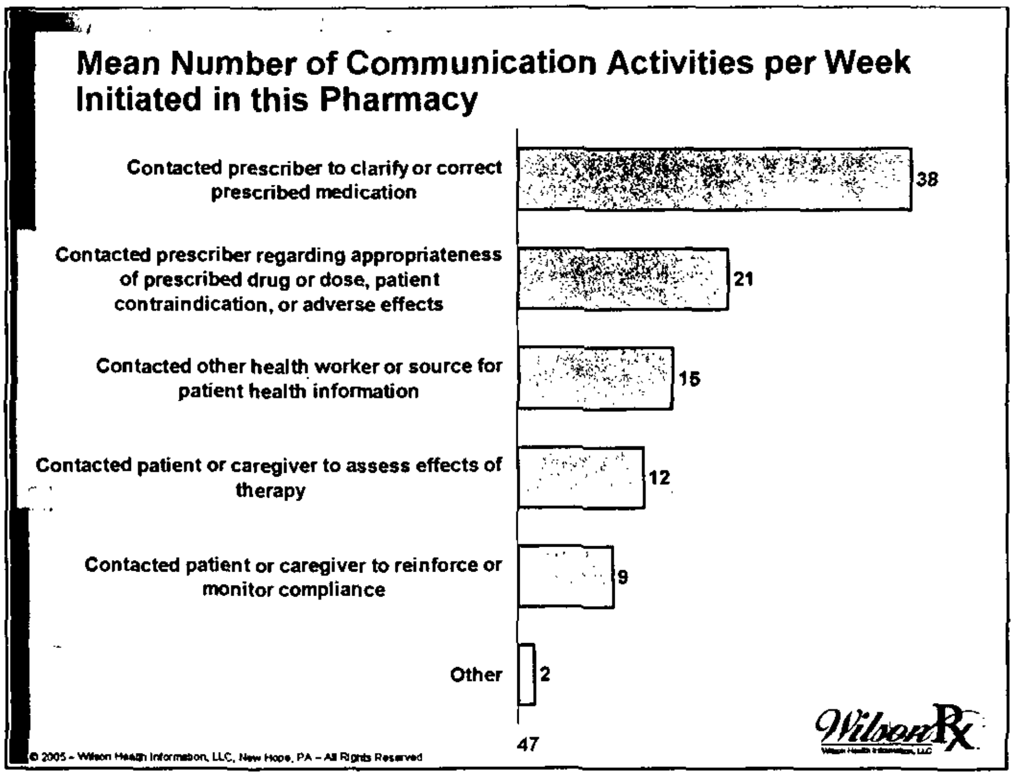
Q27

Agents provided by pharmacists vary somewhat by type of pharmacy. Independent pharmacies are the most likely to dispense the influenza vaccine.



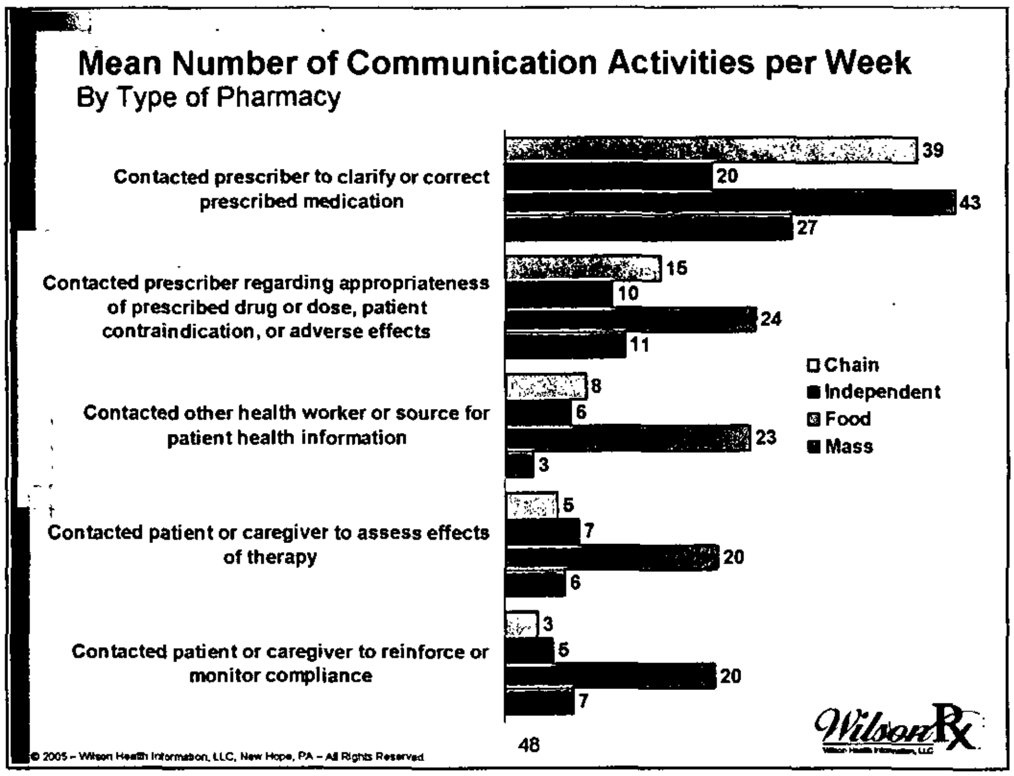
Q28

Blood pressure testing is the most commonly conducted test at pharmacies to screen undiagnosed patients, followed by blood glucose testing. Blood pressure testing is most commonly conducted at food store pharmacies and least commonly conducted at chains.



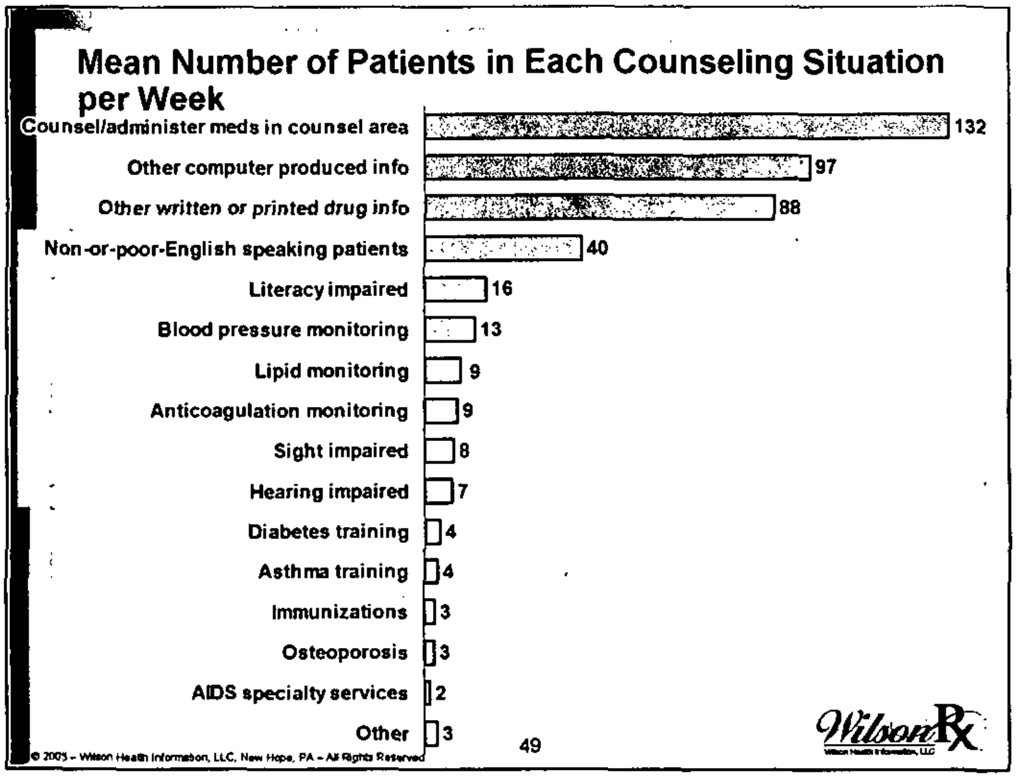
Q29

The most common communications (on a weekly basis) that are initiated by the pharmacy are contacting prescribers to clarify or correct prescribed medications (38), contacting prescribers regarding the appropriateness of prescribed drugs, doses, or patient contraindications (21), contacting health workers for patient health information (15), contacting patients/caregivers to assess the effects of therapy (12), and contacting patients/caregivers to reinforce or monitor compliance (9).



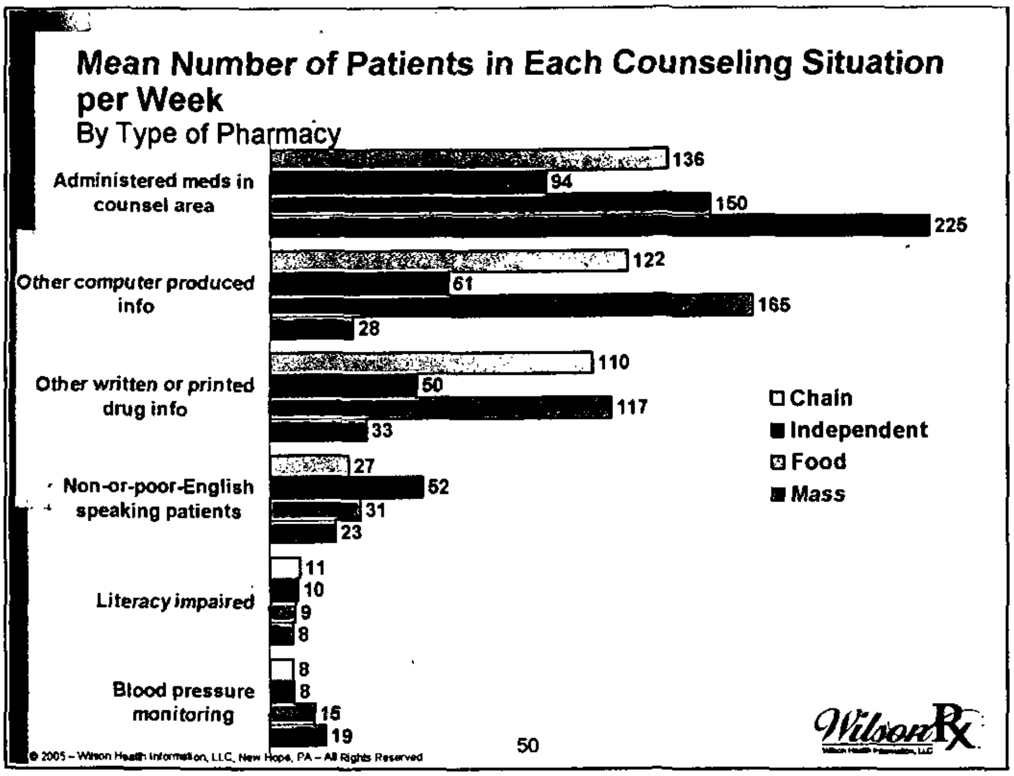
Q29

Communications vary by type of pharmacy with food store pharmacies more commonly initiating all forms of communication, compared to other types of pharmacies.



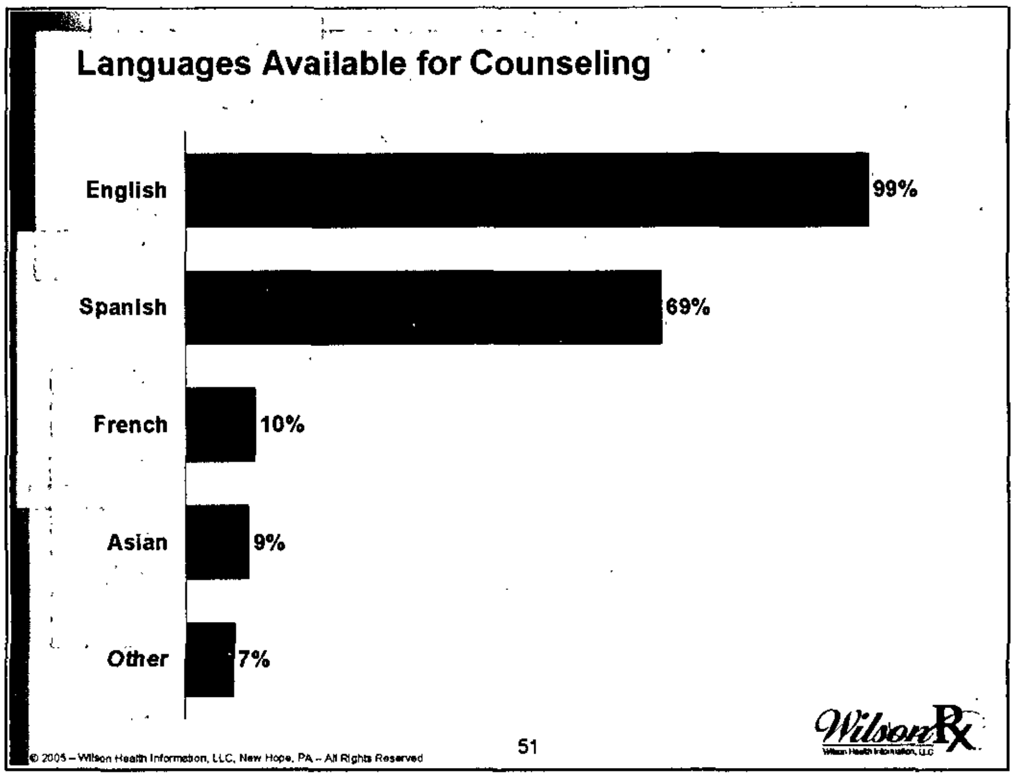
Q23

The most common counseling situation is counseling or administering medications in the counseling area, providing computer produced information, providing other written or printed drug information, and non or poor English speaking patients.



Q23

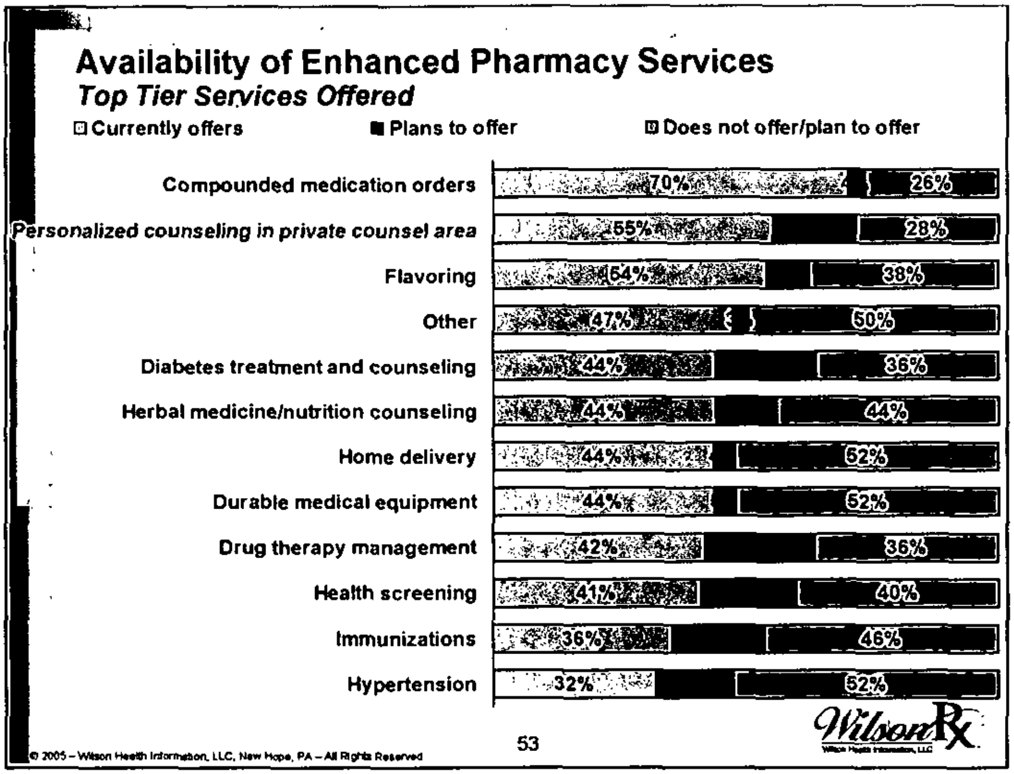
Food stores most commonly provide computer produced information and written or printed drug information. Independents most commonly deal with non or poor English speaking patients. Mass merchants most commonly counsel or administer medications in the counseling area and provide blood pressure monitoring.



Q24

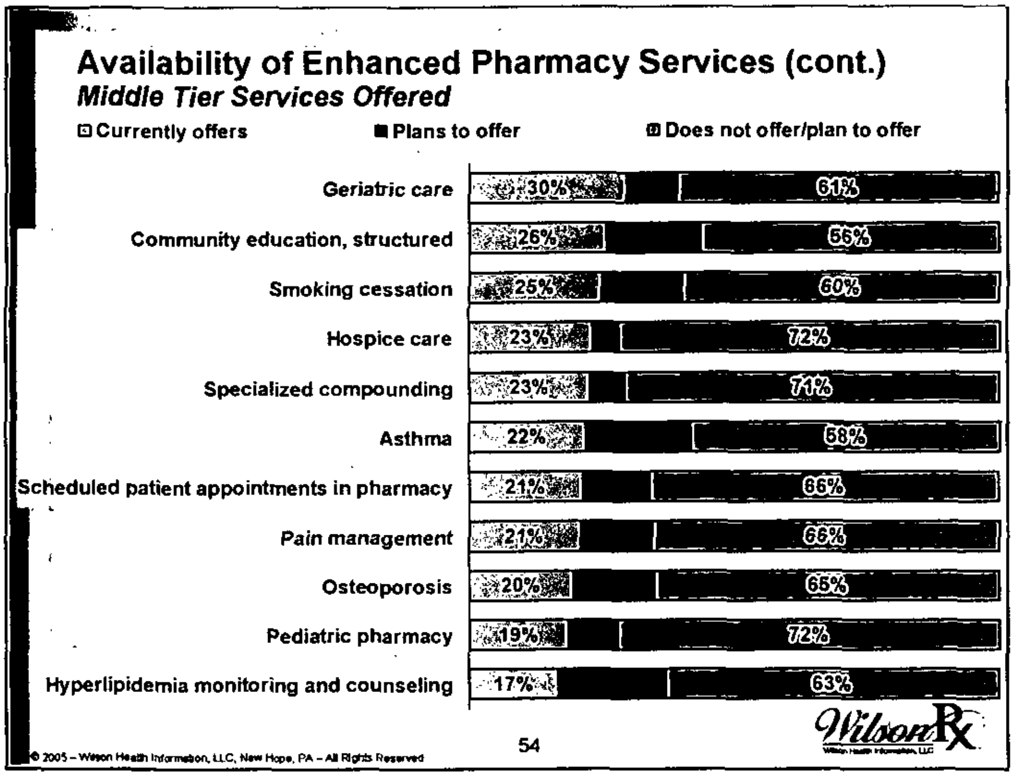
Nearly all pharmacies have counseling available in English and seven out of ten have counseling available in Spanish.

Enhanced Pharmacy Services

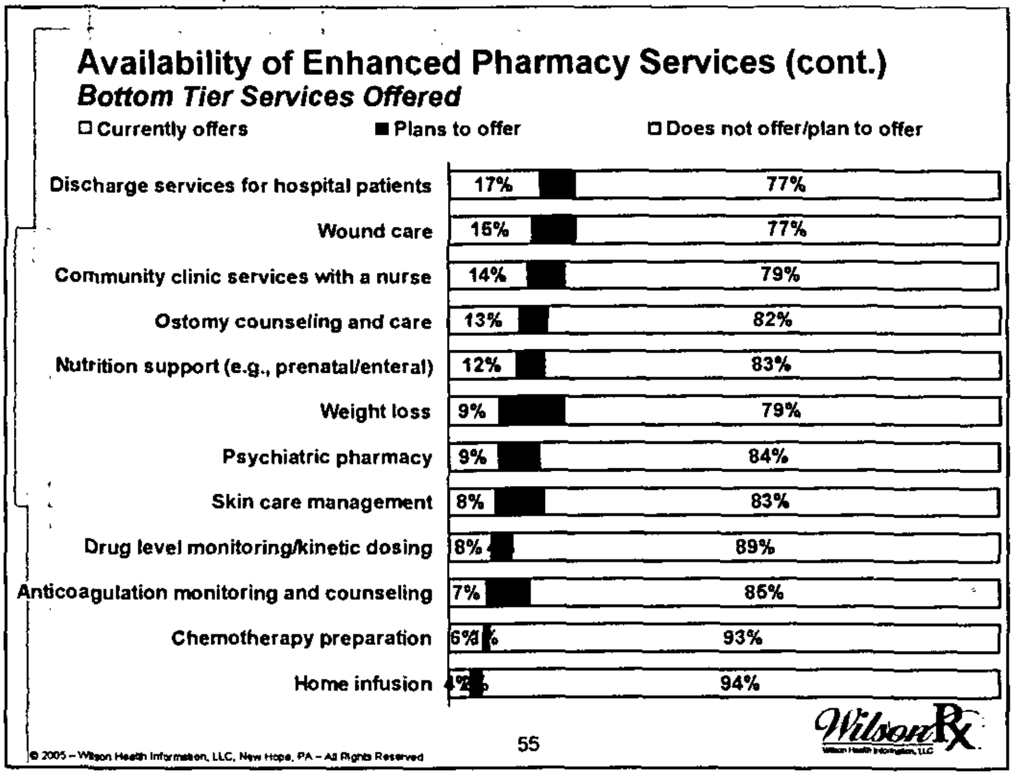


Q6

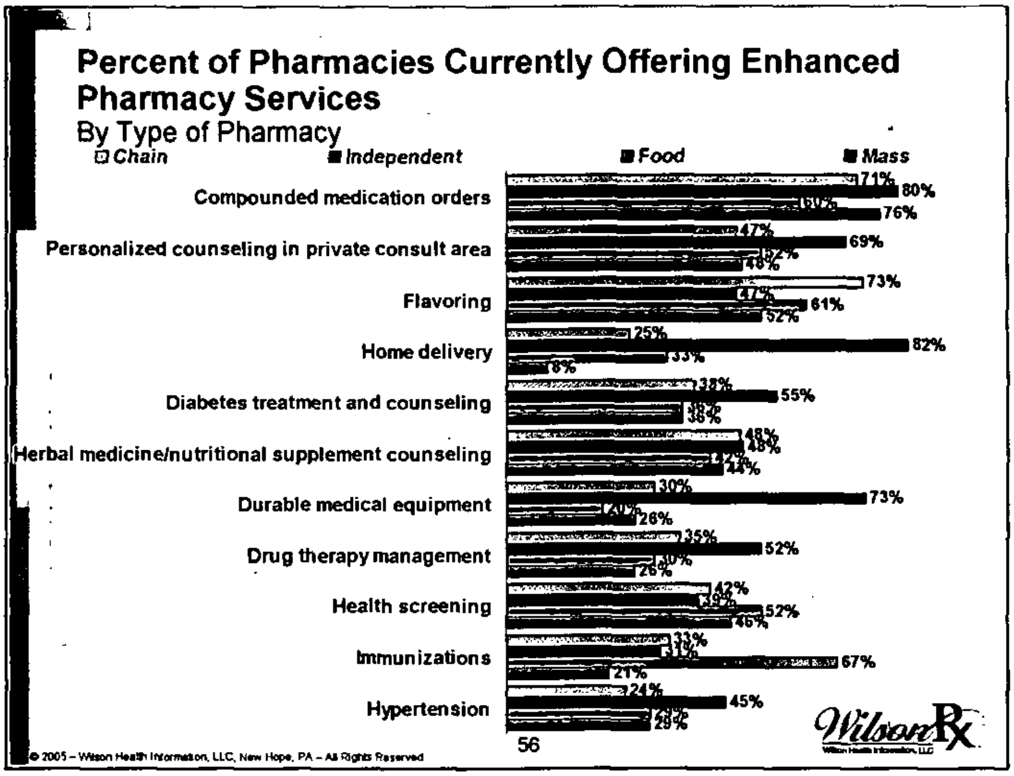
The most commonly offered enhanced pharmacy services include compounded medication orders (70%), personalized counseling in private counseling areas (55%), flavoring (54%), diabetes treatment and counseling (44%), herbal medicine/nutrition counseling (44%), home delivery (44%), durable medical equipment (44%), drug therapy management (42%), health screening (41%), and immunizations (36%).



Q6 continued



Q6 continued

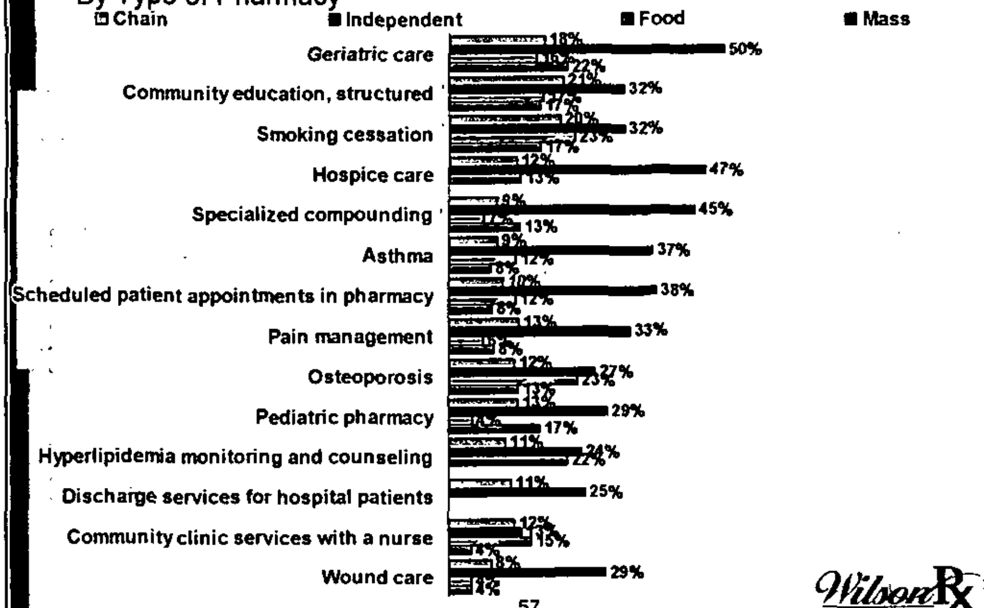


Q6

Enhanced pharmacy services offered vary by type of pharmacy. Independents are the most likely to offer many services, including compounded medication orders, home delivery, and durable medical equipment, geriatric care, and hospice care. Food store pharmacies are the most likely to offer immunizations and health screenings.

Percent of Pharmacies Currently Offering Enhanced Pharmacy Services (continued)

By Type of Pharmacy



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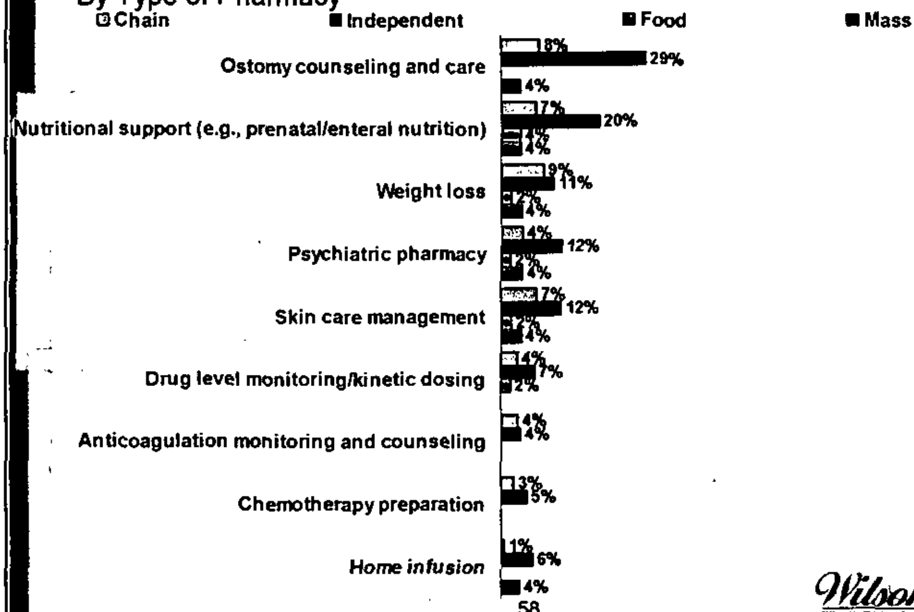
Q6

Percent of Pharmacies Currently Offering Enhanced Pharmacy Services (continued)

By Type of Pharmacy



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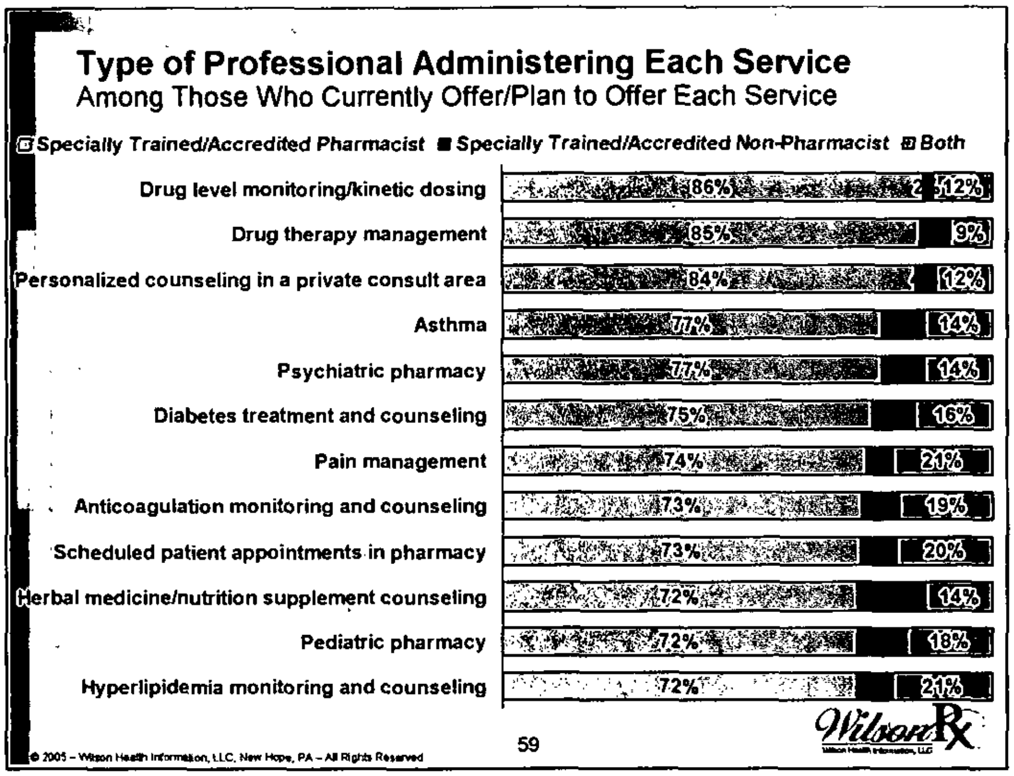
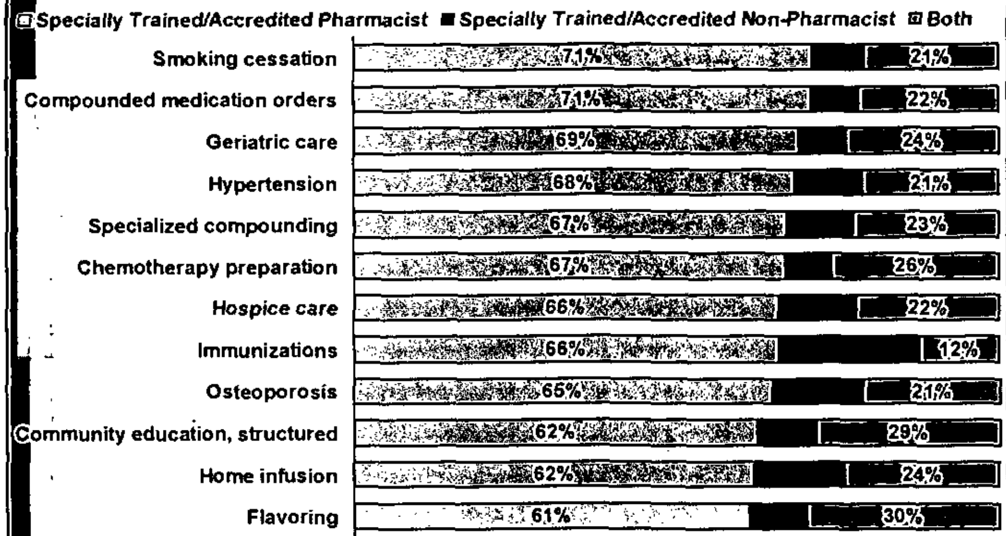
Q6



Q7

Most services offered are provided by specially trained/accredited pharmacists.

Type of Professional Administering Each Service (cont.) Among Those Who Currently Offer/Plan to Offer Each Service



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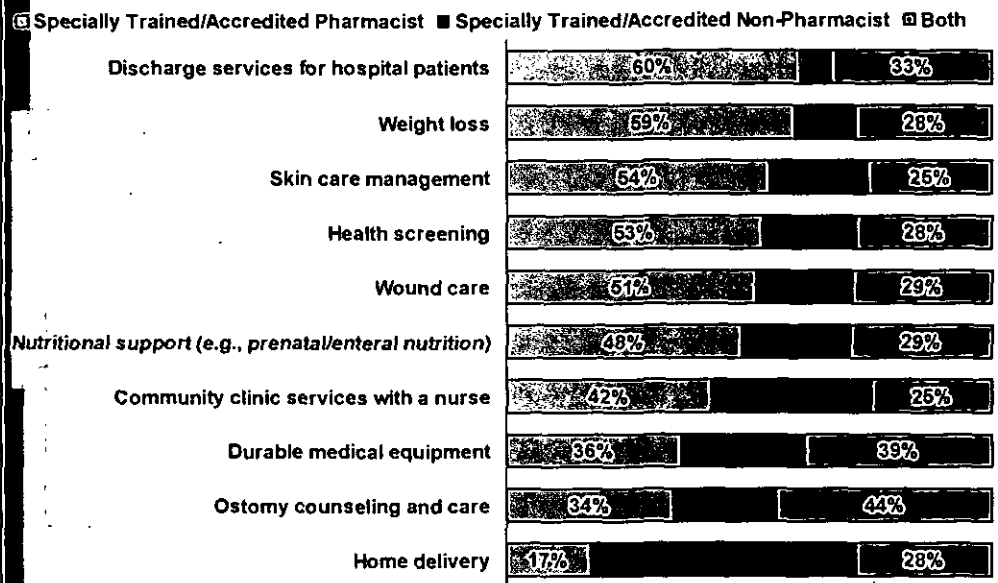
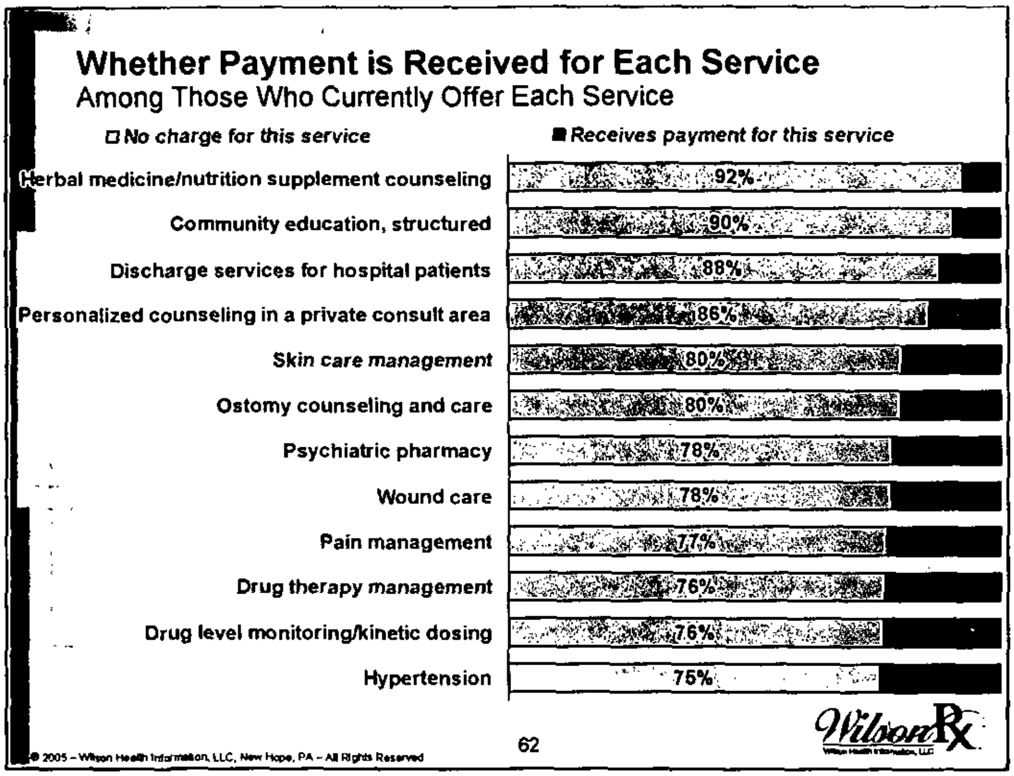
Type of Professional Administering Each Service (cont.) Among Those Who Currently Offer/Plan to Offer Each Service

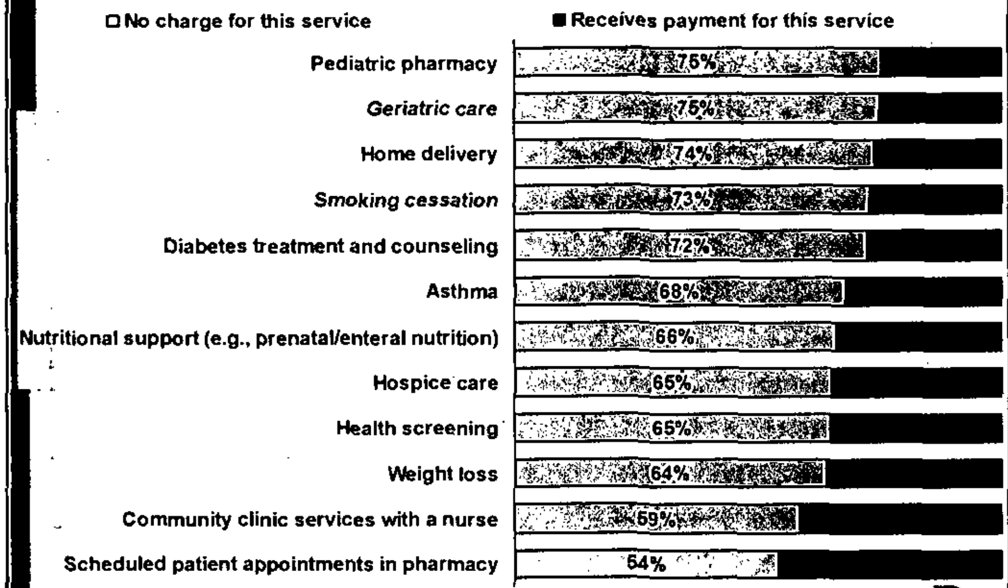




Q8

Pharmacies offer many enhanced pharmacy services free of charge. Immunizations (90% receiving payment), flavoring (87%), and home infusions (69%) are the services for which payment is most commonly received. Herbal medicine/nutrition supplement counseling (92% offering service free of charge), community education (90%), discharge services (88%), and personal counseling in a private area (86%) are the services that are most commonly provided free of charge.

Whether Payment is Received for Each Service (cont.) Among Those Who Currently Offer Each Service



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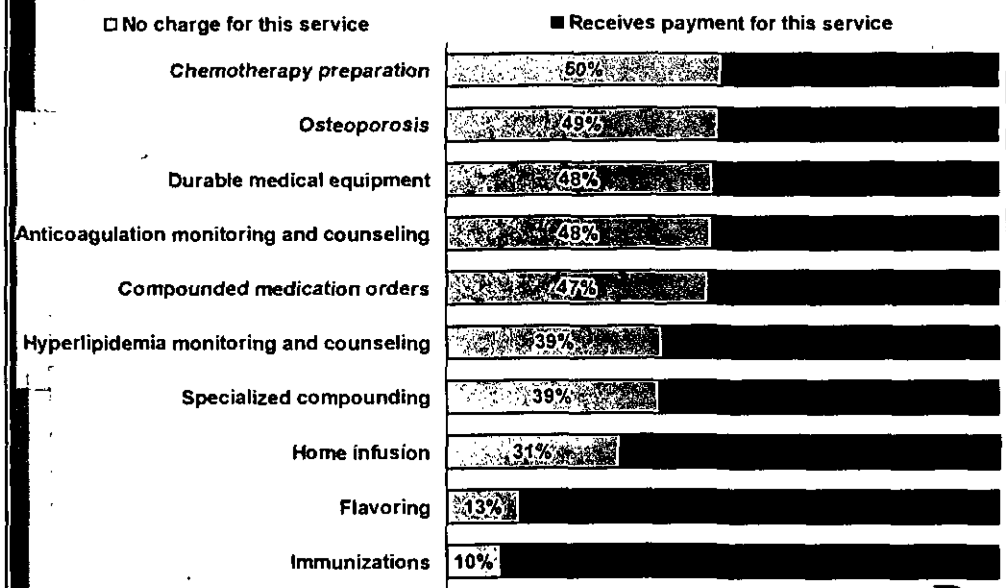
Whether Payment is Received for Each Service (cont.) Among Those Who Currently Offer Each Service



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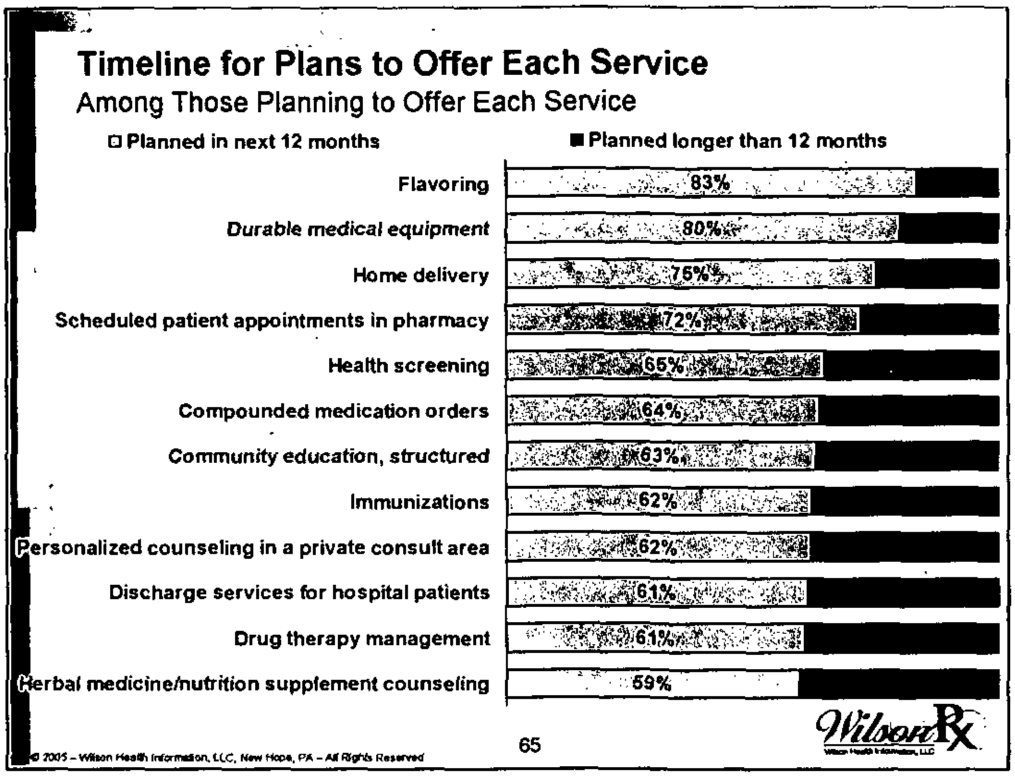
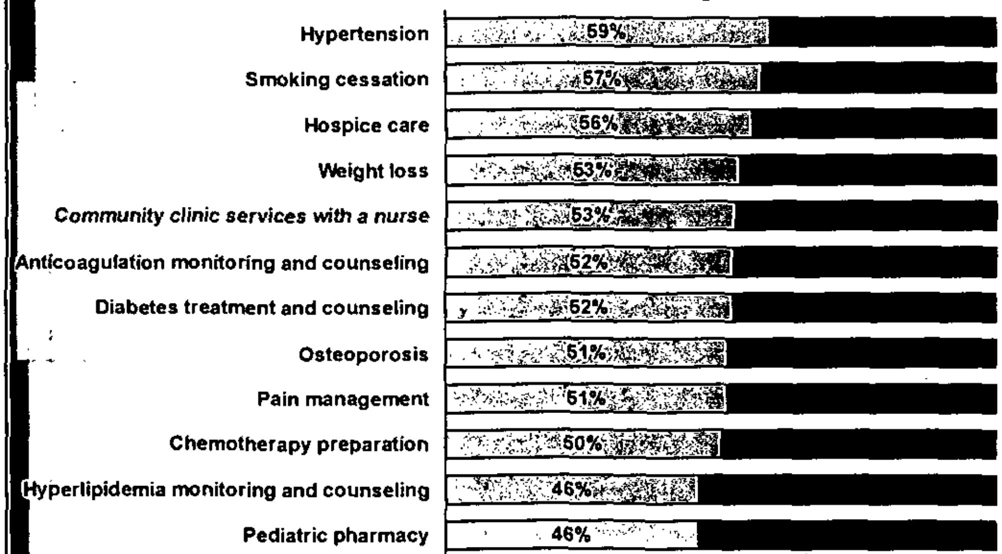


Q9

The enhanced pharmacy services that pharmacies most commonly intend to offer in the next 12 months (among pharmacies that intend to offer services) include: flavoring (83%), durable medical equipment (80%), home delivery (75%), scheduled patient appointments in the pharmacy (72%), health screening (65%), and compounded medication orders (64%).

Timeline for Plans to Offer Each Service (cont.)
Among Those Planning to Offer Each Service

□ Planned in next 12 months ■ Planned longer than 12 months



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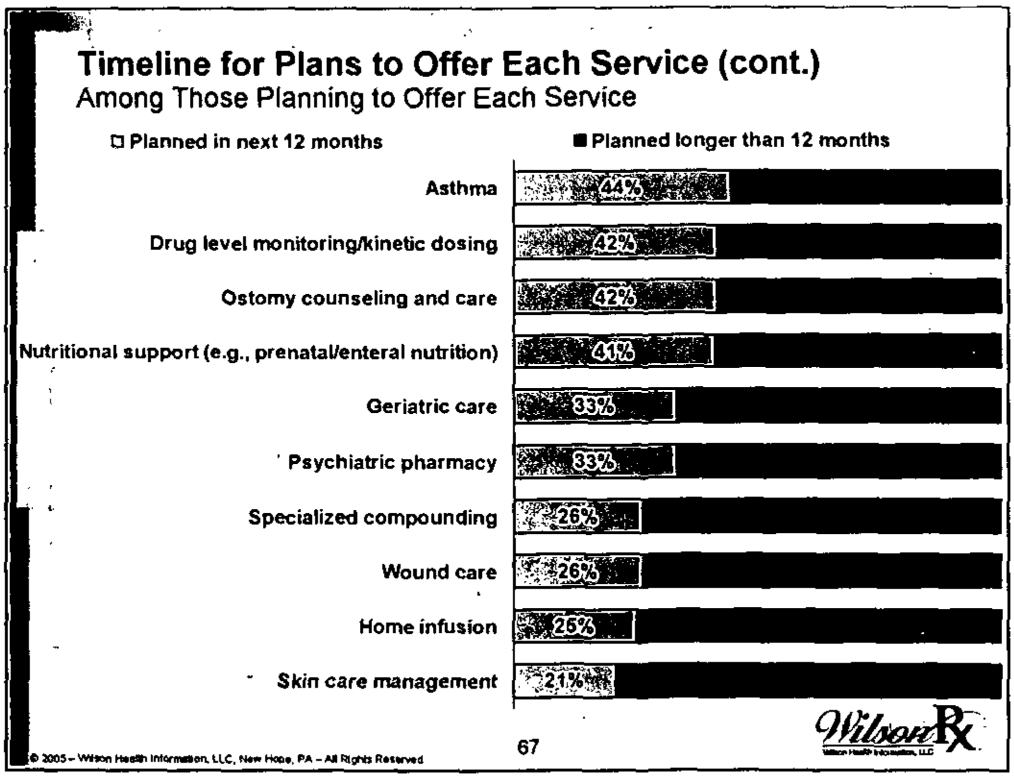
Timeline for Plans to Offer Each Service (cont.)
Among Those Planning to Offer Each Service
Planned in next 12 months
Planned longer than 12 months
Asthma
44%
Drug level monitoring/kinetic dosing
42%
Ostomy counseling and care
42%
Nutritional support (e.g., prenatal/enteral nutrition)
41%
Geriatric care
33%
Psychiatric pharmacy
33%
Specialized compounding
26%
Wound care
26%
Home infusion
25%
Skin care management
21%
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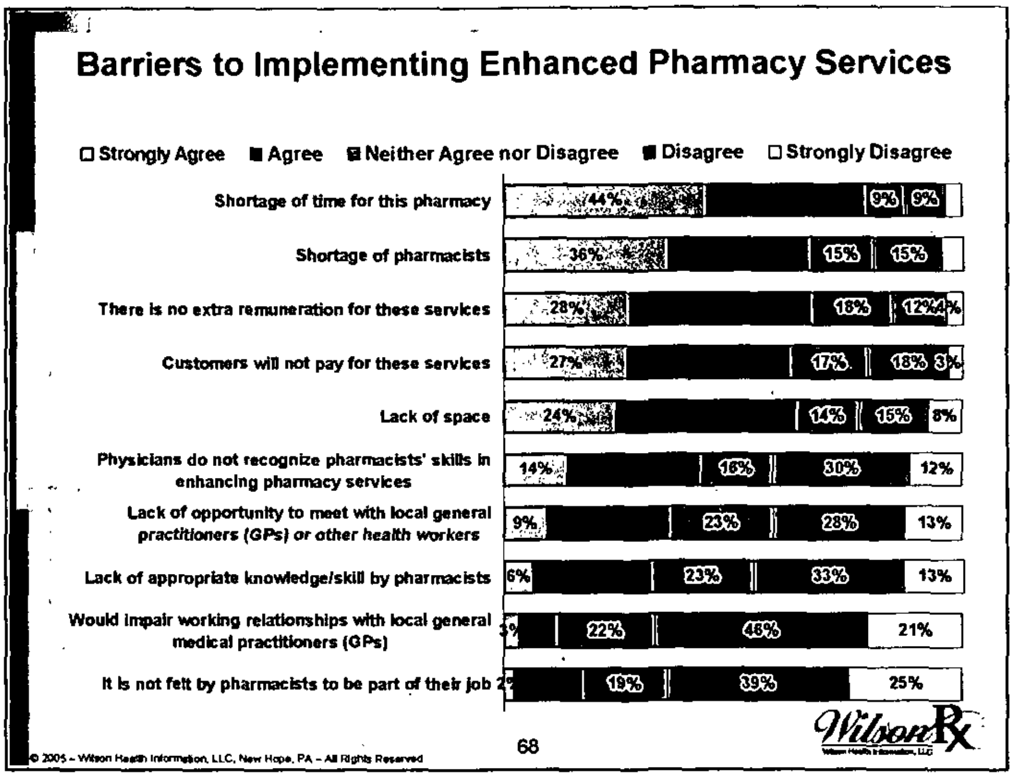
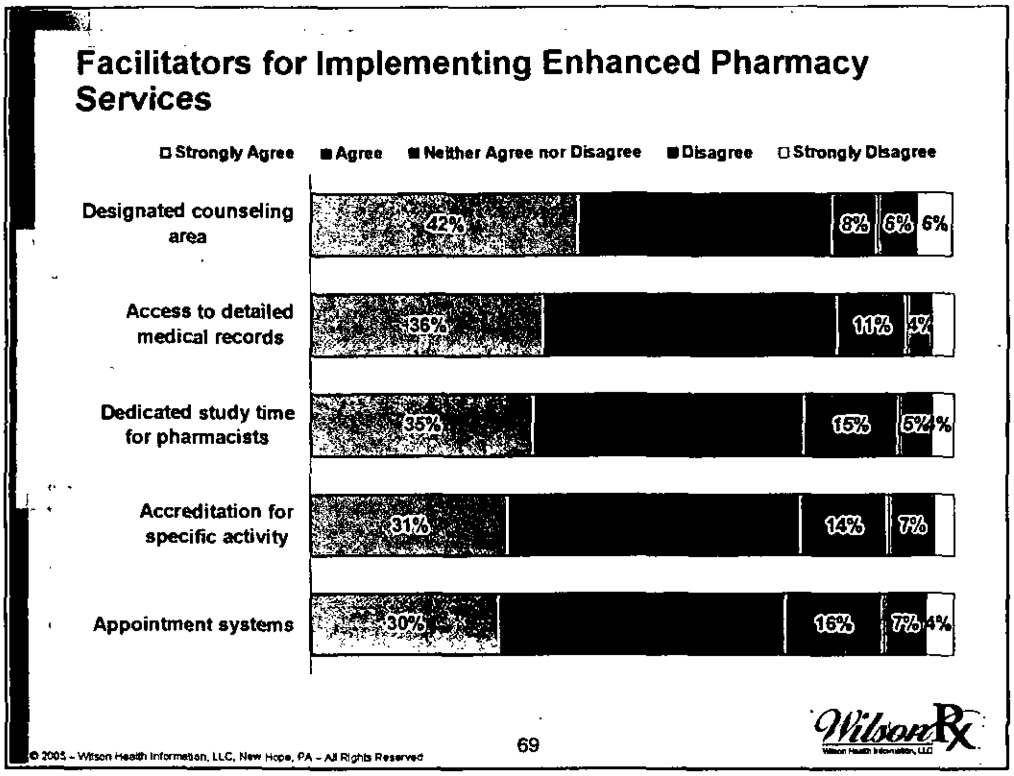


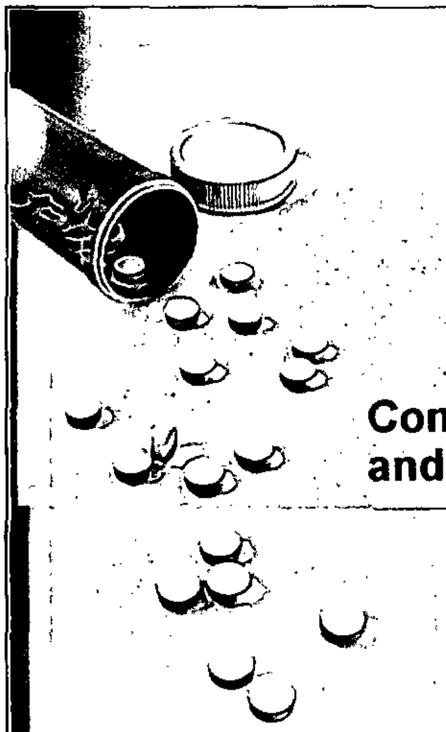
Q10

The most commonly cited barriers to implementing enhanced pharmacy services include a shortage of time, a shortage of pharmacists, that there is no pay for these services, the belief that customers will not pay for services, and a lack of space.



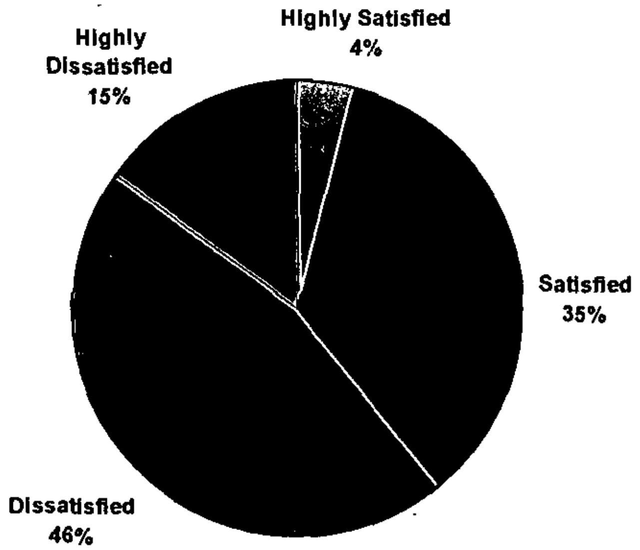
Q11

The leading facilitators for implementing enhanced pharmacy services according to pharmacists include having designated counseling areas (81%), access to detailed medical records (81%), dedicated study time for pharmacists (77%), accreditation for specific activities (76%), and appointment systems (74%).



Community Perceptions and Attitudes

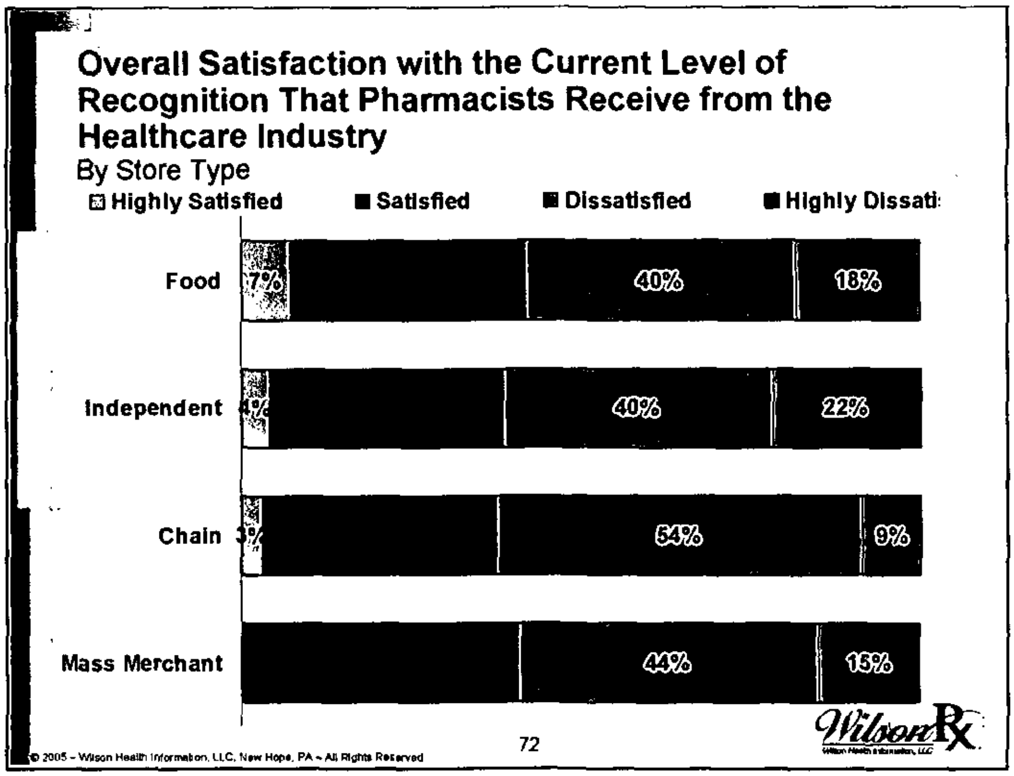
Overall Satisfaction with the Current Level of Recognition That Pharmacists Receive from the Healthcare Industry



71

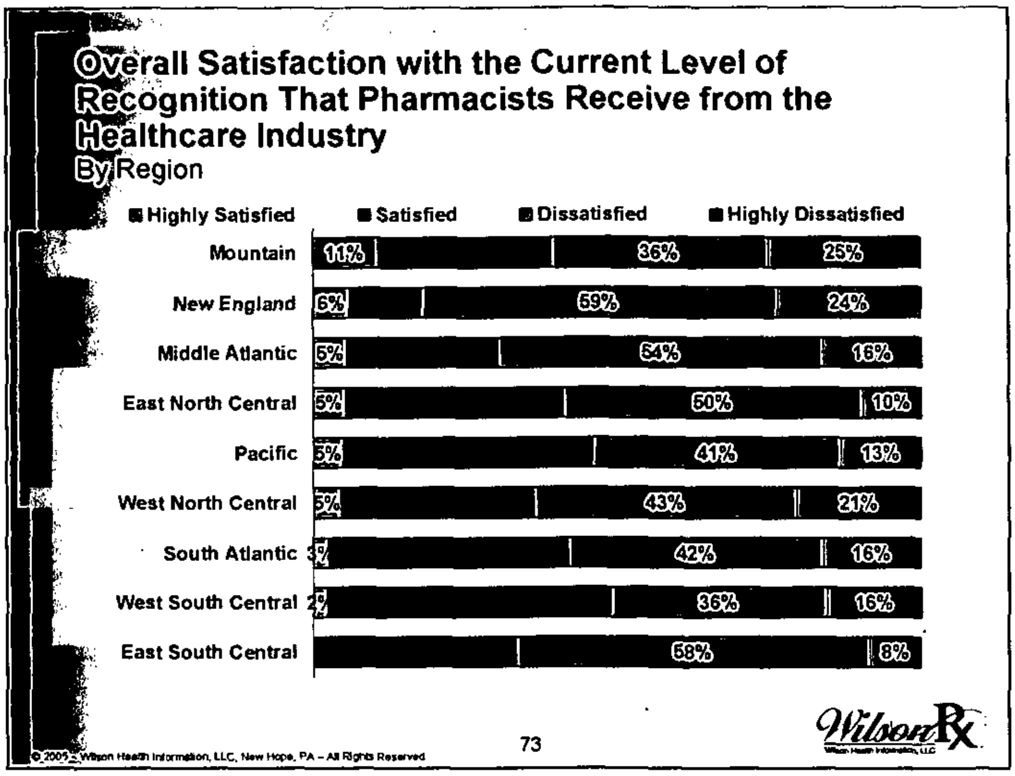
Q.37

More than three out of five respondents are dissatisfied with the current level of recognition that pharmacists receive from the healthcare industry.



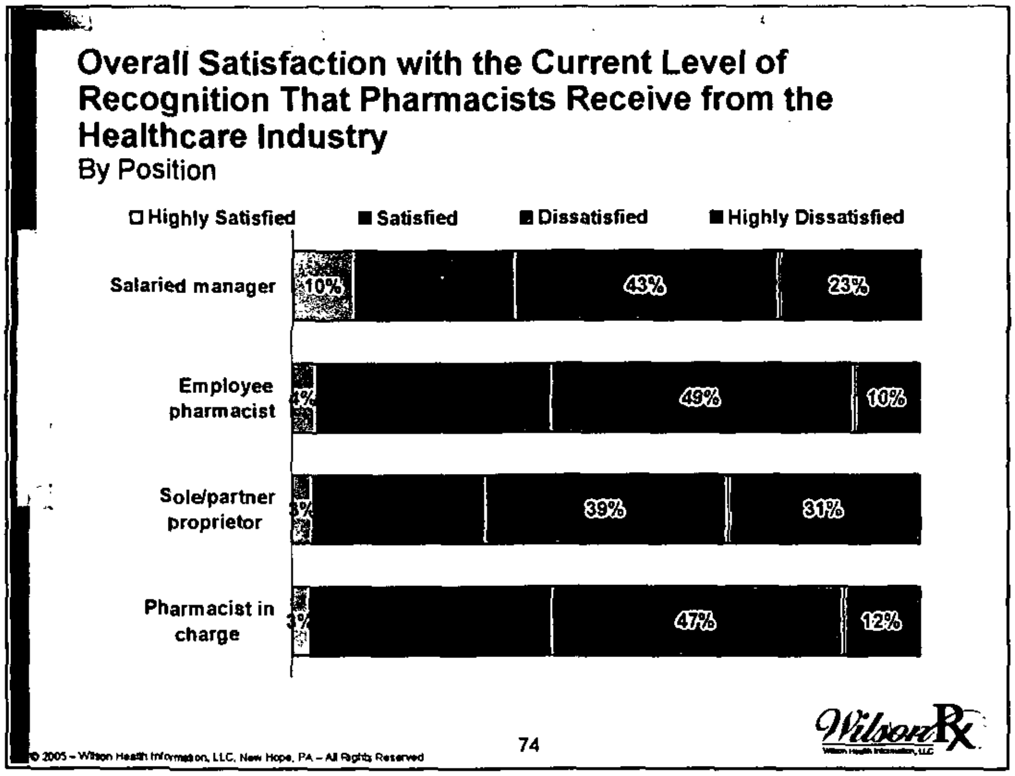
Q37

The majority of pharmacists of all types of pharmacies are dissatisfied with the current level of recognition that pharmacists receive from the healthcare industry.



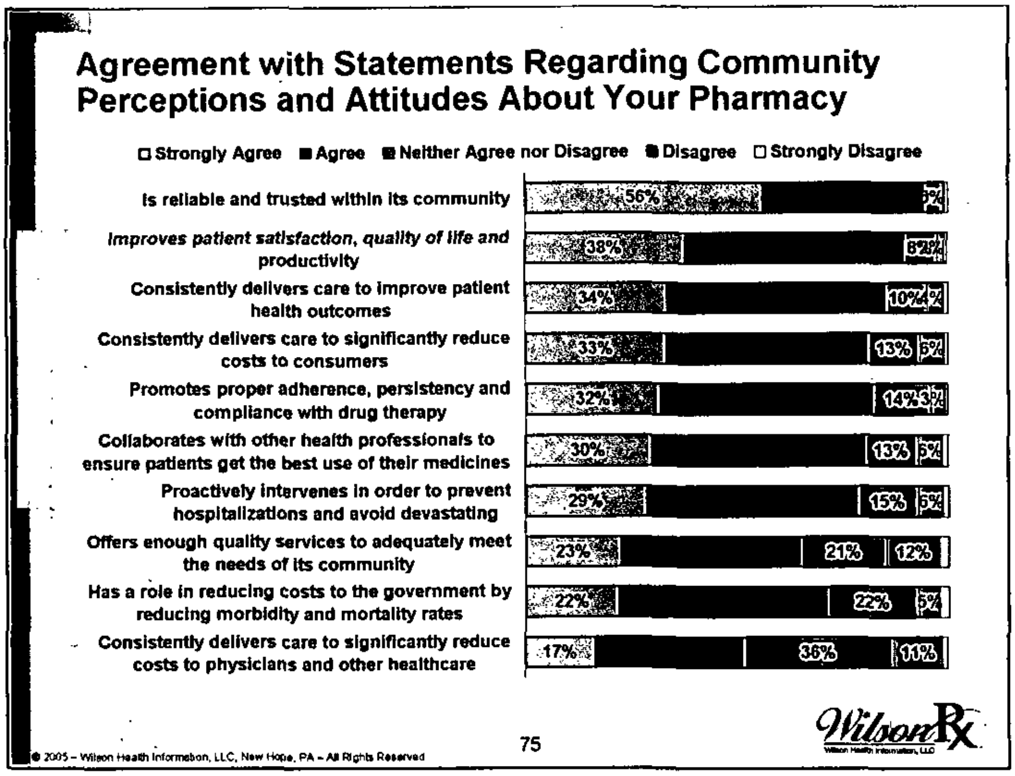
Q37

Some variation can be seen in satisfaction with recognition that pharmacists receive by region. Dissatisfaction is highest among respondents in New England (83%).



Q37

Sole/partner proprietors are the most apt to be dissatisfied with the level of recognition that pharmacists receive from the healthcare industry.



Q38

Respondents agree with many statements regarding community perceptions and attitudes about their pharmacy, including:

Is reliable and trusted within its community

Improves patient satisfaction, quality of life and productivity

Consistently delivers care to improve patient health outcomes

Consistently delivers care to significantly reduce costs to consumers

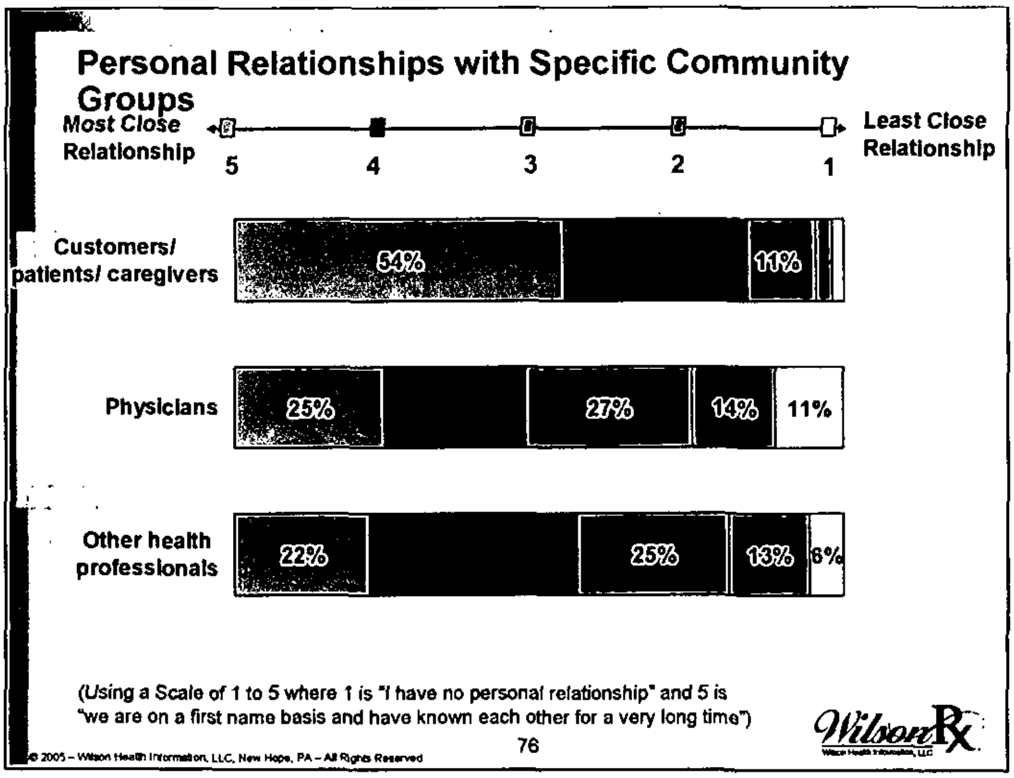
Promotes proper adherence, persistency and compliance with drug therapy

Collaborates with other health professionals to ensure patients get the best use of their medicines

Proactively intervenes in order to prevent hospitalizations and avoid devastating consequences due to medication use problems

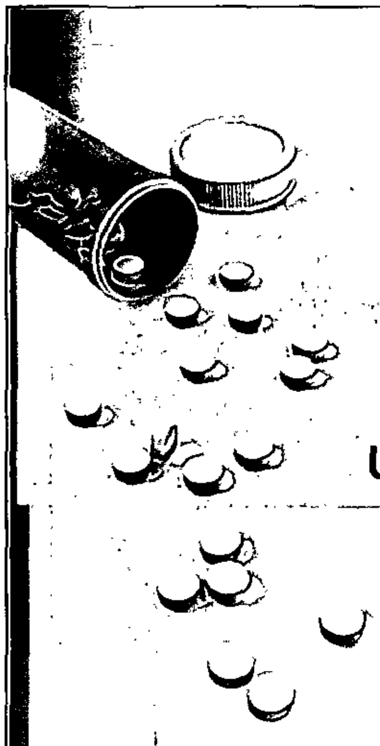
Offers enough quality services to adequately meet the needs of its community

Has a role in reducing costs to the government by reducing morbidity and mortality rates



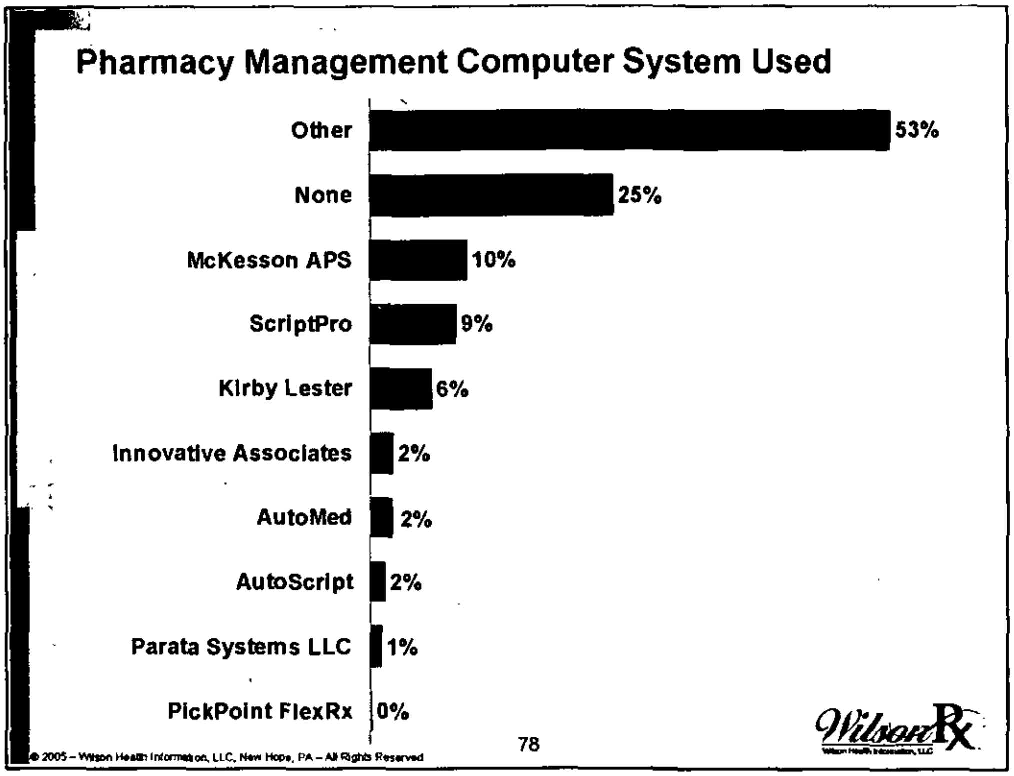
Q39

In terms of personal relationships, pharmacists have considerably closer relationships with customers/patients/caregivers than with physicians and other health professionals.



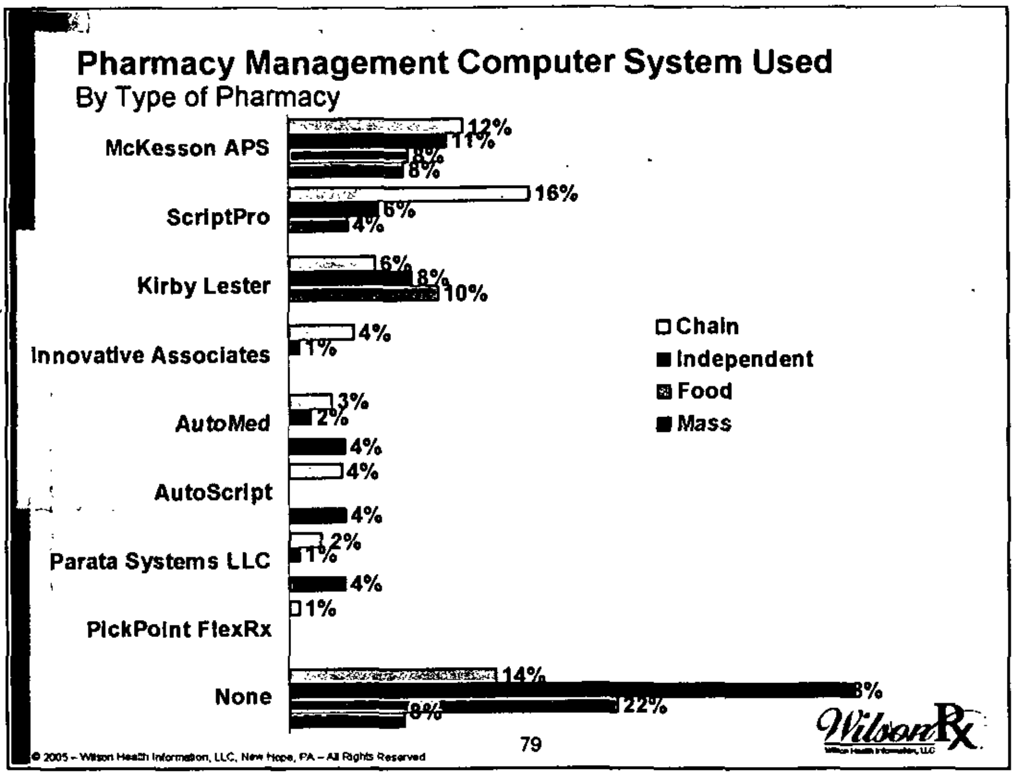
Usage of Technical Facilities

77



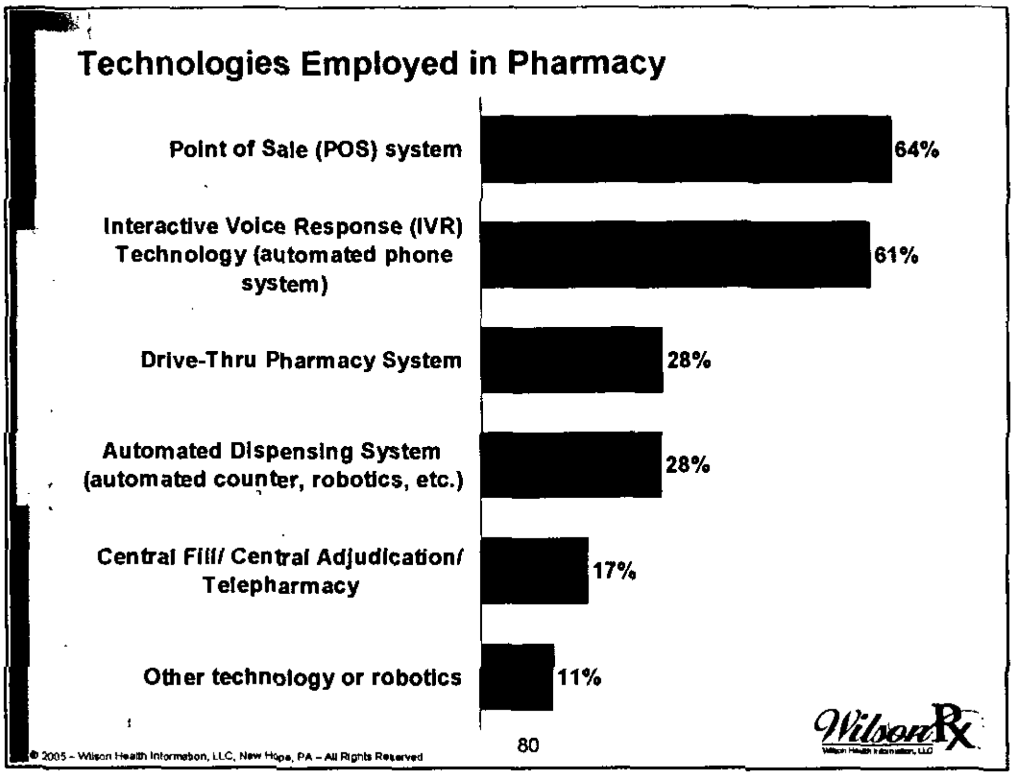
Q32

Among pharmacies that use computer management systems, McKesson APS is most commonly used, followed by ScriptPro and Kirby Lester.



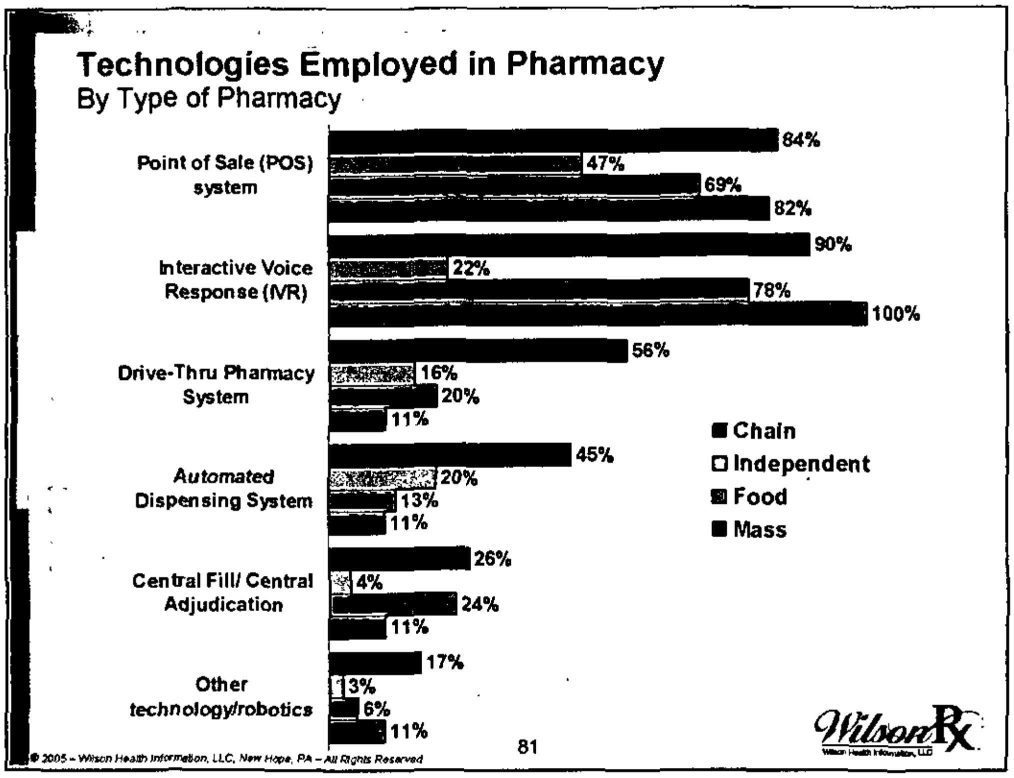
Q32

Chain pharmacies more commonly use ScriptPro and Mckesson APS, compared to other types of pharmacies. Food store pharmacies are the most likely to use Kirby Lester. Independent pharmacies are the most likely to use no pharmacy management computer system.



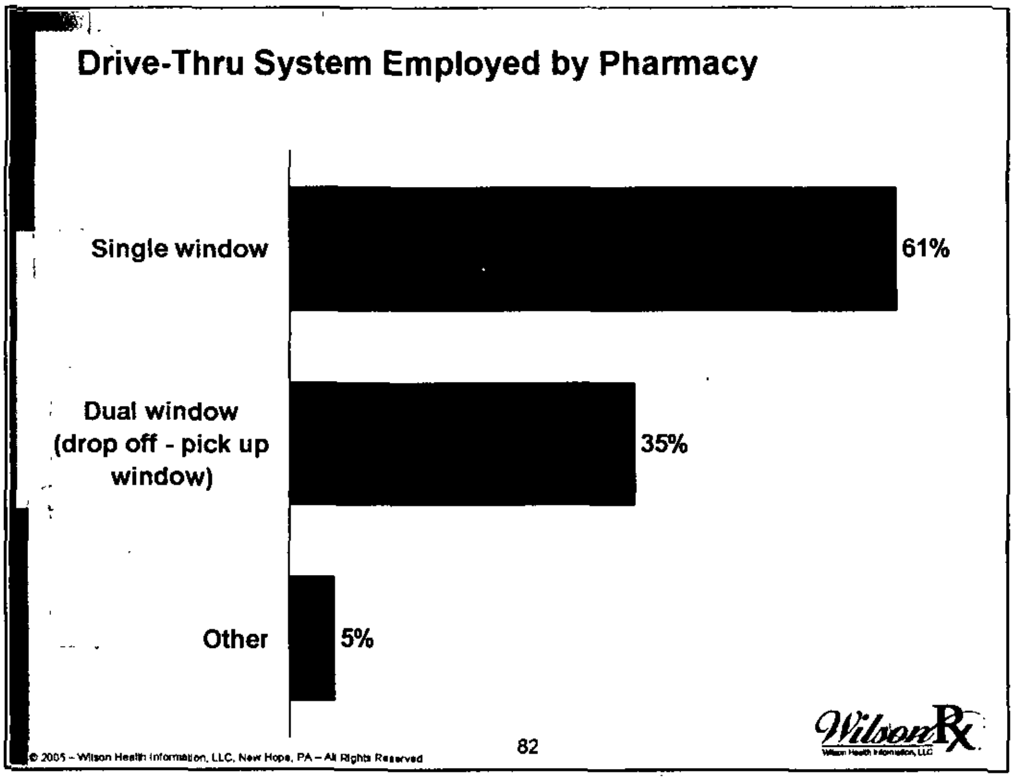
Q31 and Q31a (type of drive-thru system)

The most common technologies employed in pharmacies are point of sale (POS) systems (64%), interactive voice response (IVR) technology (61%), drive-thru systems (28%), automated dispensing systems (counter, robotics, etc.) (28%), and central filling/adjudication (17%).



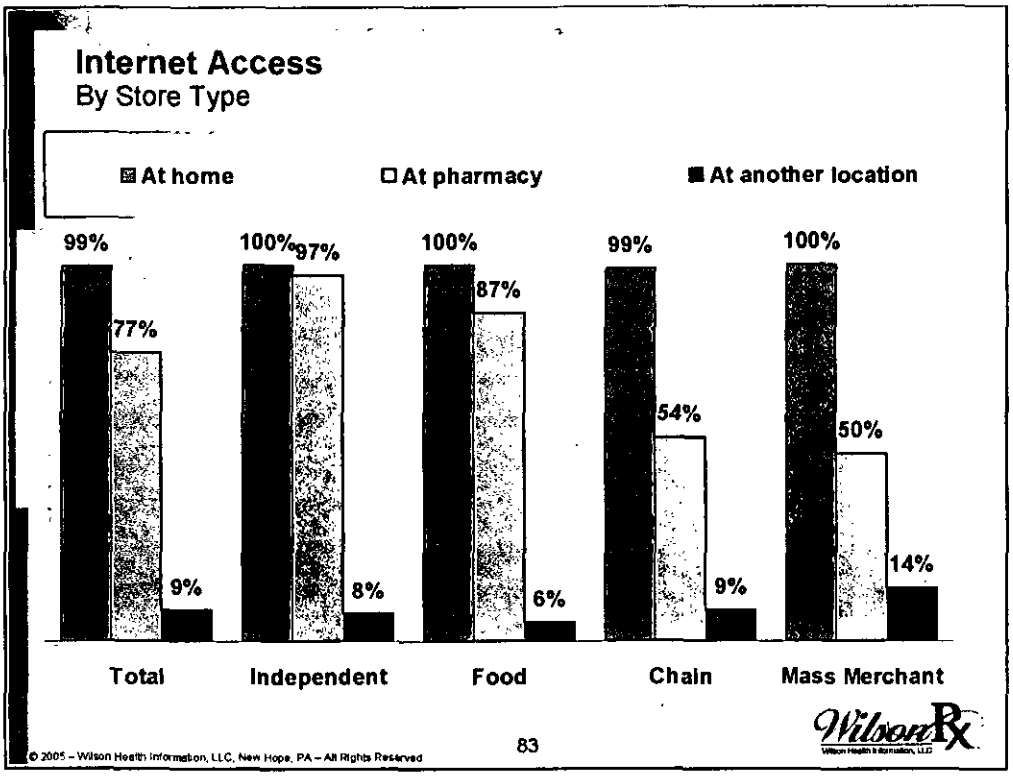
Q31 and Q31a (type of drive-thru system)

Technologies employed vary by type of pharmacy. Point of sale (POS) systems are most commonly used by chain (84%) and mass merchant pharmacies (82%). Mass merchants (100%) are the most likely to use IVR systems, followed by chains (90%). Chains are much more likely to employ drive-thru windows and automated dispensing systems, compared to other types of pharmacies. Central fill/central adjudication systems are most commonly used by chain (26%) and food store pharmacies (24%).



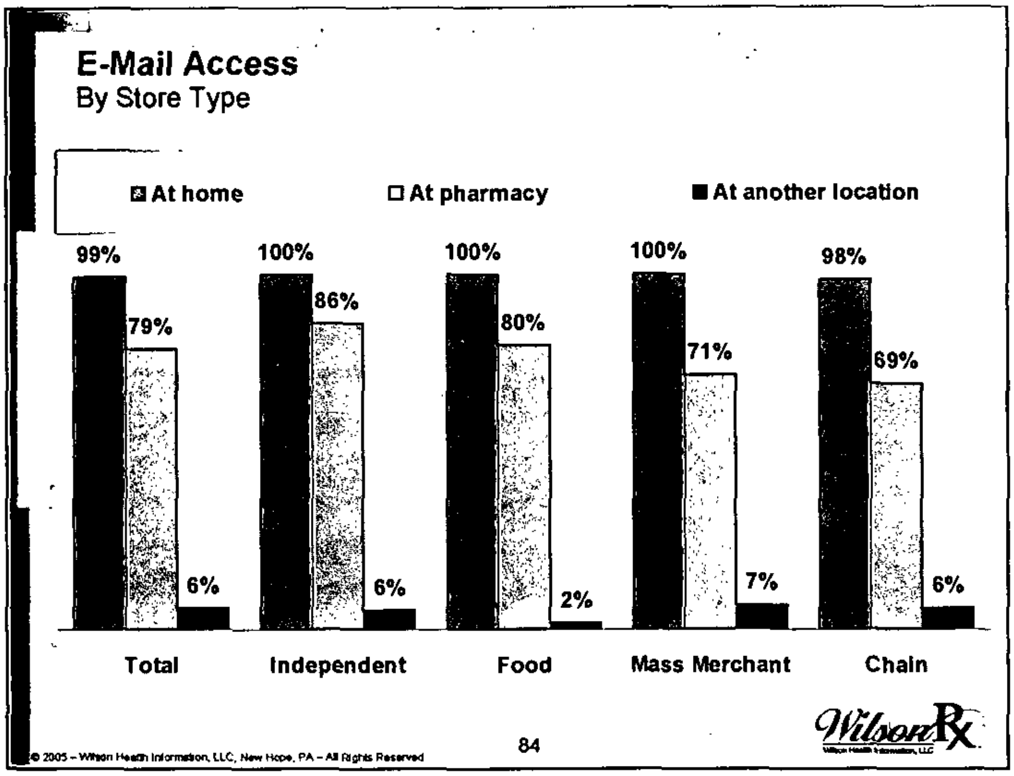
Q31 and Q31a (type of drive-thru system)

Sixty-one percent of pharmacies that employ a drive-thru have a single window and thirty-five percent a dual window.



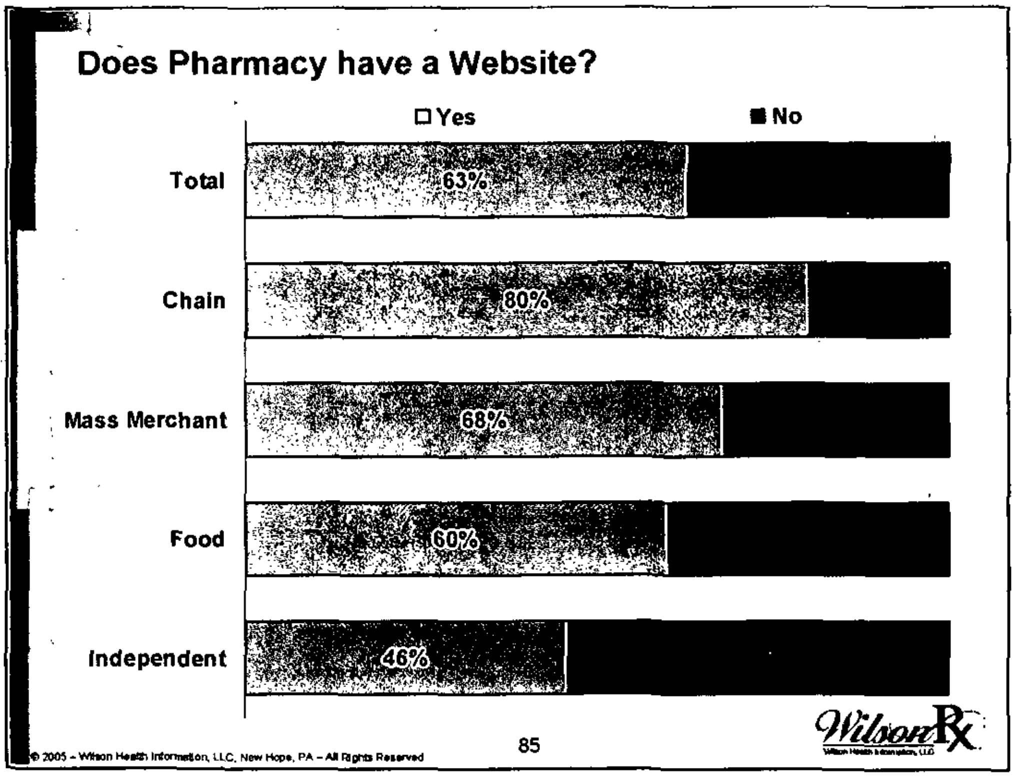
Q33/34

Nearly all respondents have Internet access at home, and three quarters indicate that they have Internet access at the pharmacy. Independent pharmacies (97%) are the most likely to have Internet access, followed by food store pharmacies (87%), while chain (54%) and mass merchant pharmacies (50%) are much less likely to have Internet access.



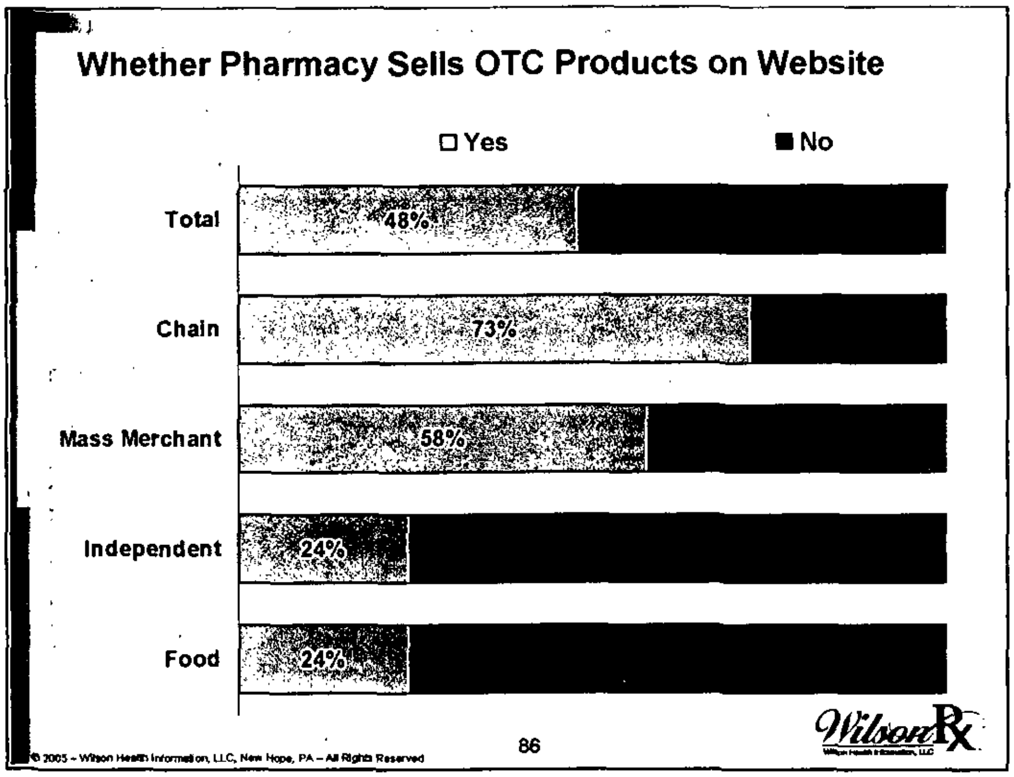
Q33/34

About four out of five respondents indicate that their pharmacy has e-mail access. Independent pharmacies (86%) most commonly have e-mail access, while mass merchant (71%) and chain pharmacies (69%) are the least apt to have e-mail access.



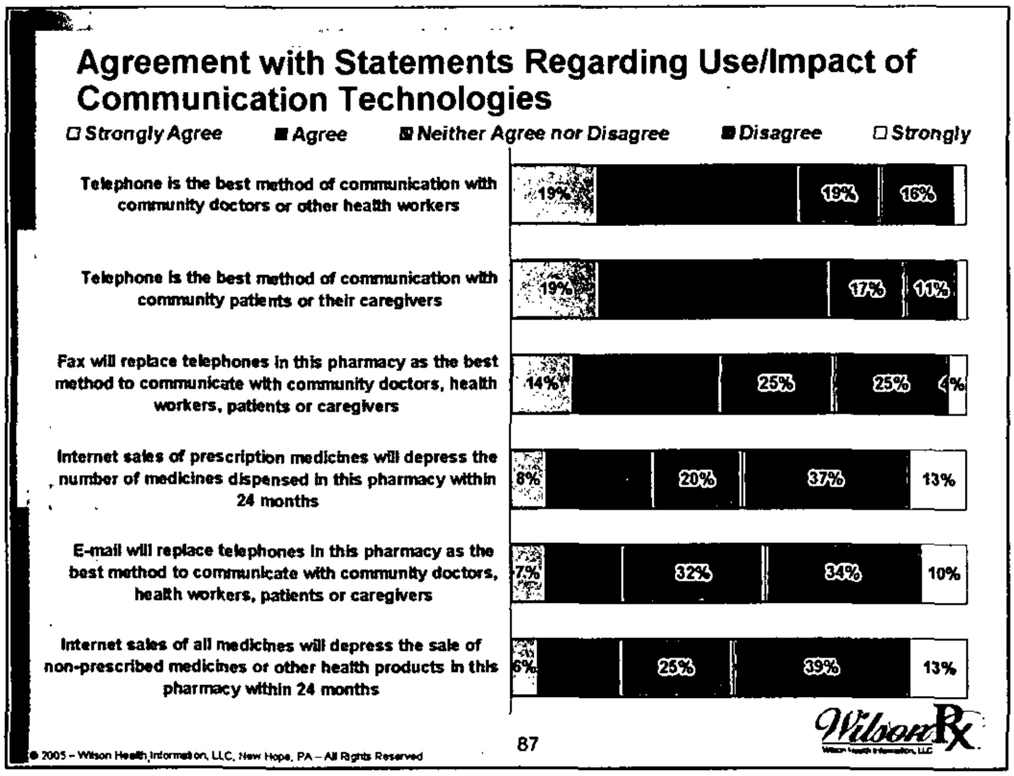
Q35/36

Sixty-three percent of respondents indicate that their pharmacy has a website. Chains (80%) are the most likely to have a website, followed by mass merchants (68%) and food store pharmacies (60%). Fewer than half of independent pharmacies (46%) have a website.



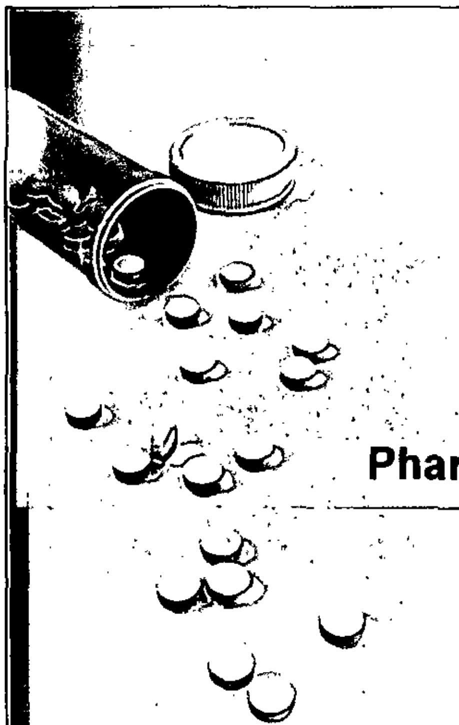
Q35/36

Nearly half of pharmacies sell OTC products on their website. Chains (77%) are the most likely to sell OTC products on their website, followed by mass merchant pharmacies (58%).



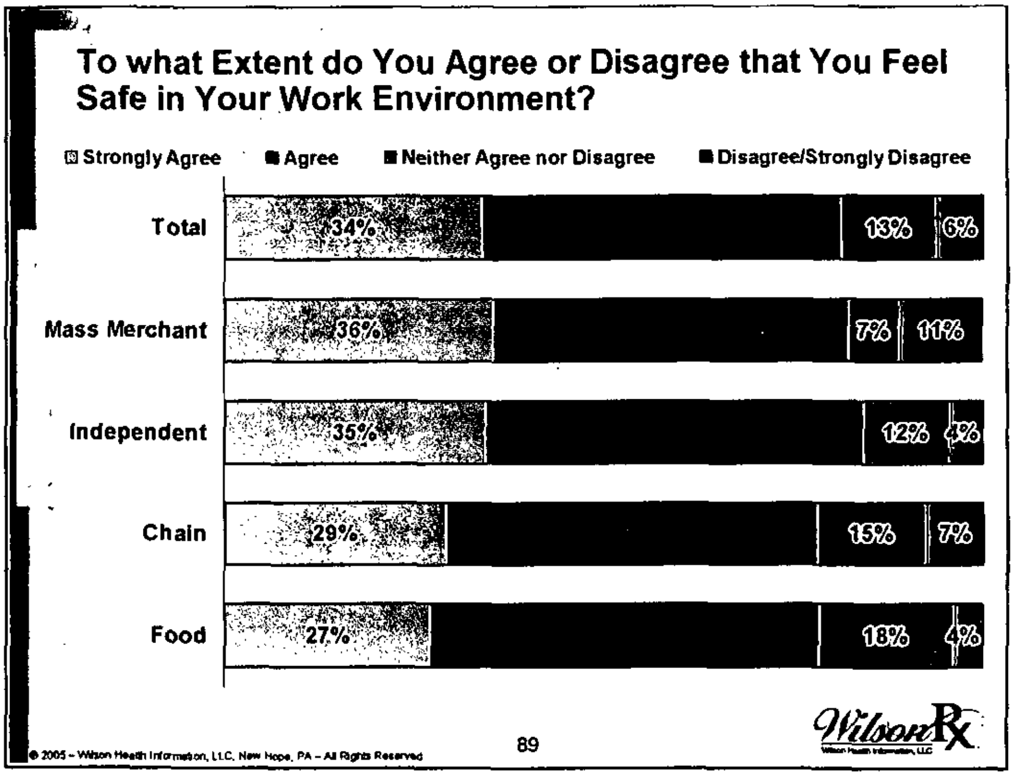
Q30

Respondents most commonly agree that telephone is the best method of communication with doctors/health workers and with patients/caregivers. They less commonly believe that the Internet will depress the number of medicines dispensed and the number of non-prescribed medicines that are sold and that e-mail will replace telephones as the best means of communicating with doctors and patients.



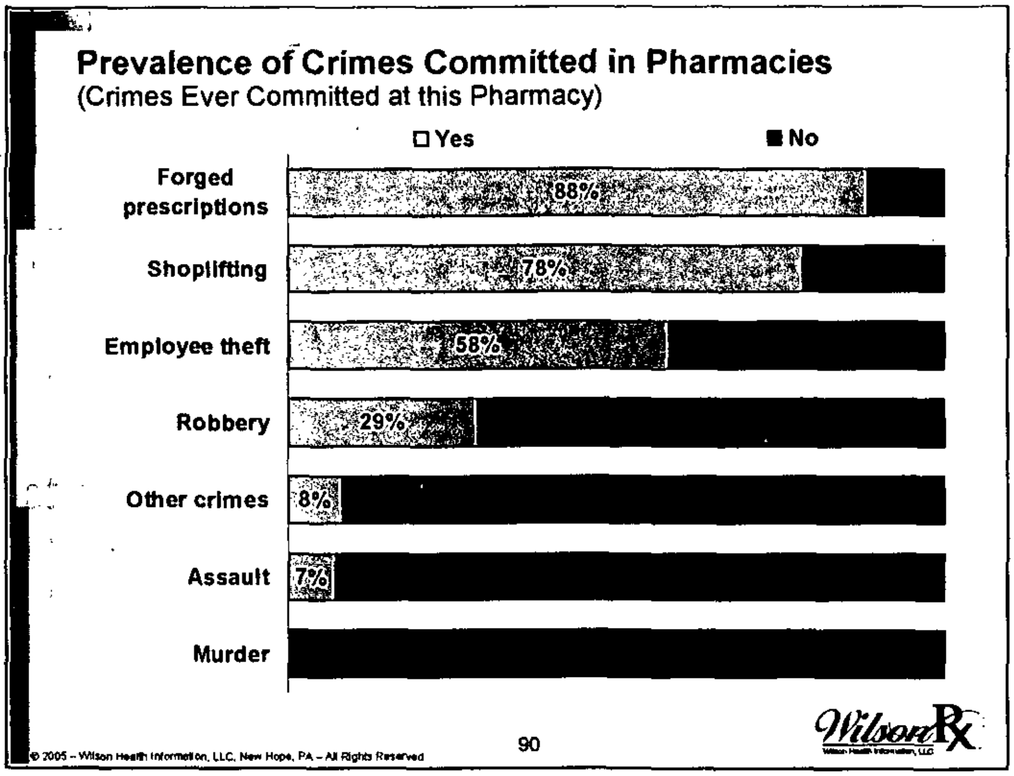
Pharmacy Security

WilsonRx



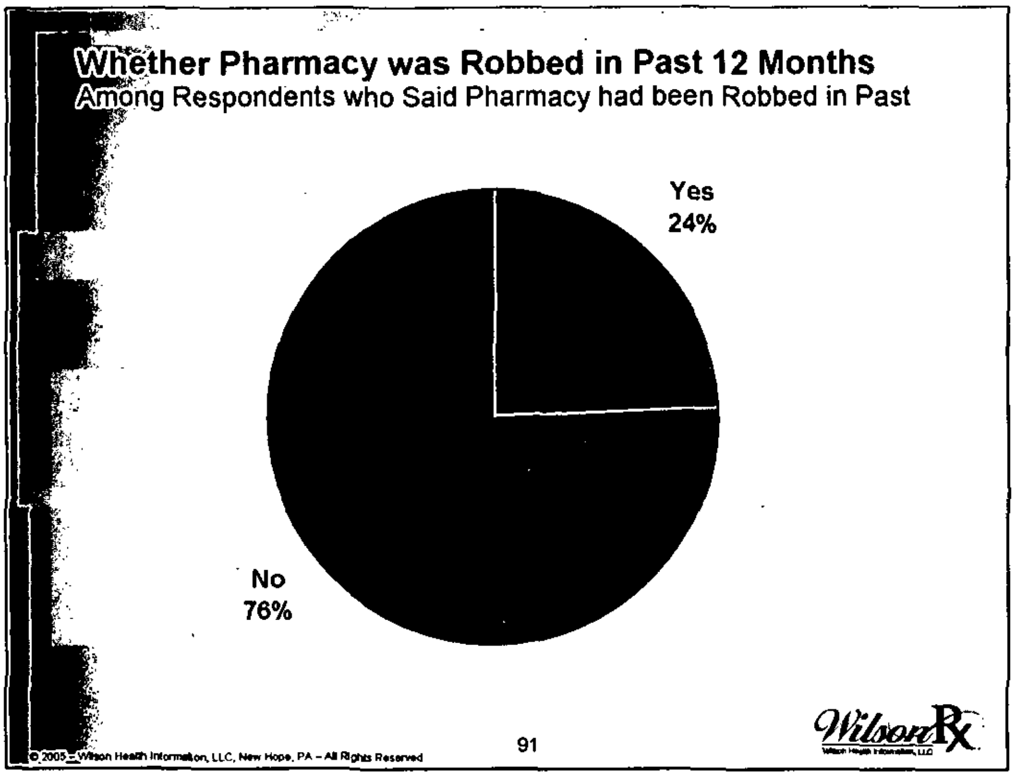
Q30

Eighty one percent of respondents strongly agree or agree that they feel safe in their work environment. Employees of mass merchant and independent pharmacies are the most likely to feel safe in their work environment.



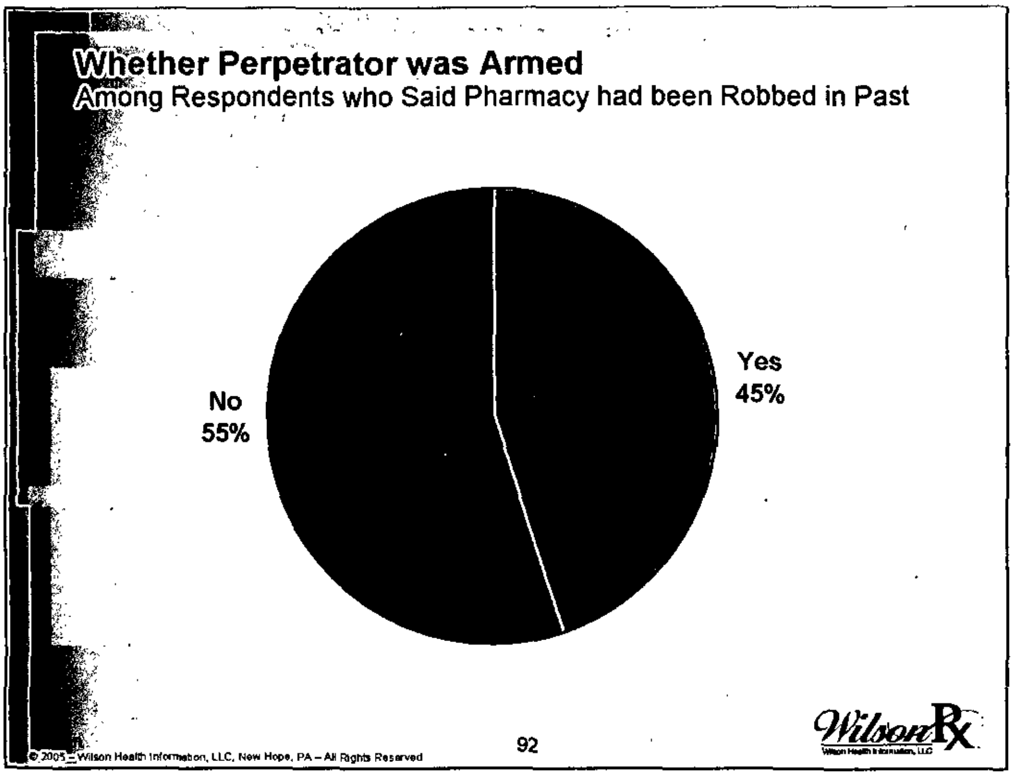
Q48-1

The most commonly committed crimes in pharmacies include forged prescriptions (88%), shoplifting (78%), employee theft (58%), and robbery (29%).



Q48-2

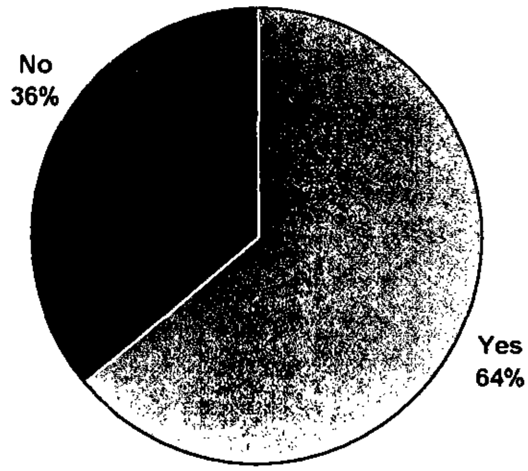
One out of four pharmacies has been robbed in the past 12 months.



Q48-3

Forty-five percent of robberies were committed by armed perpetrators.

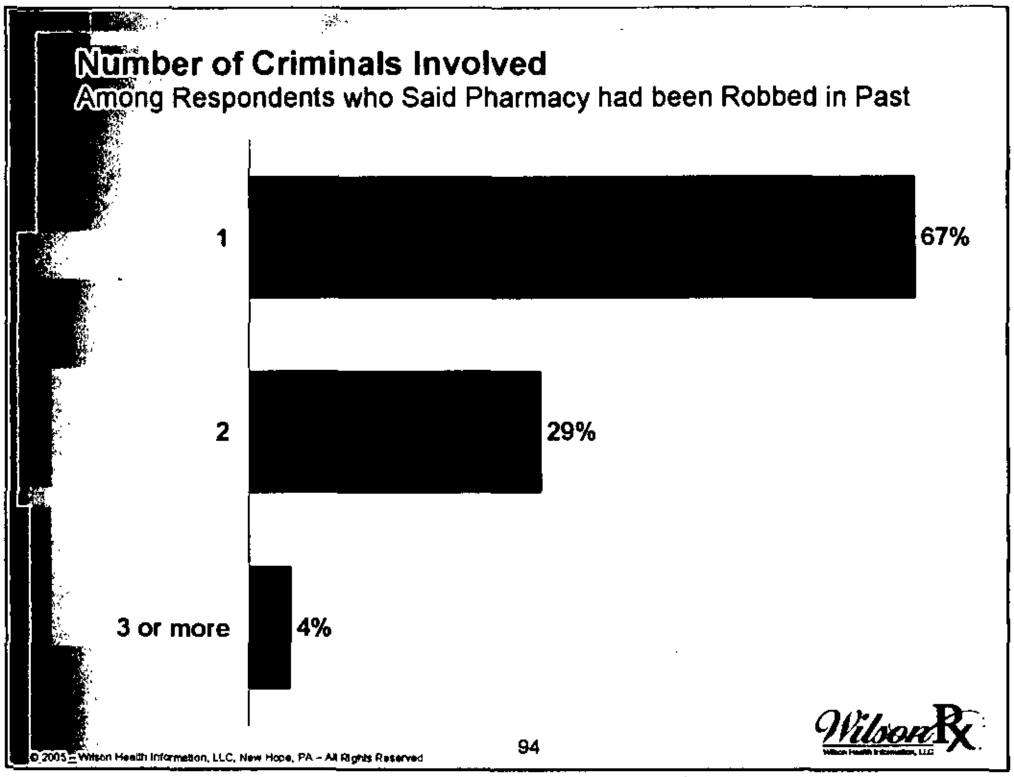
Whether Crime Occurred During Business Hours
Among Respondents who Said Pharmacy had been Robbed in Past



93

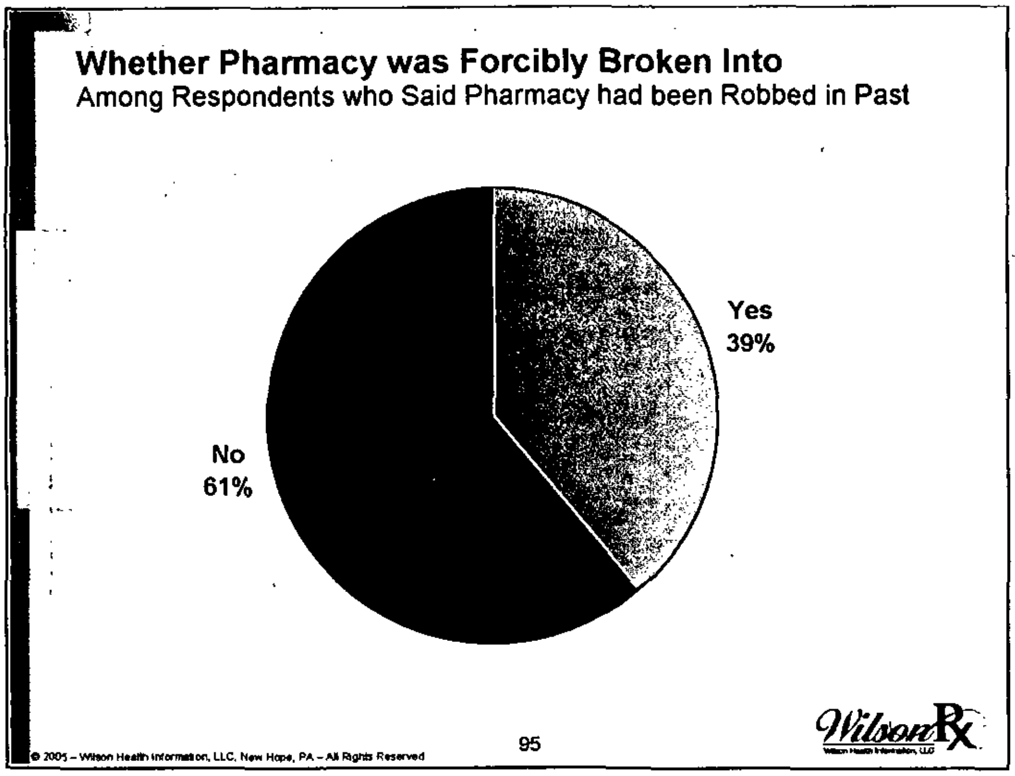
Q48-3

Sixty-four percent of robberies occurred during business hours.



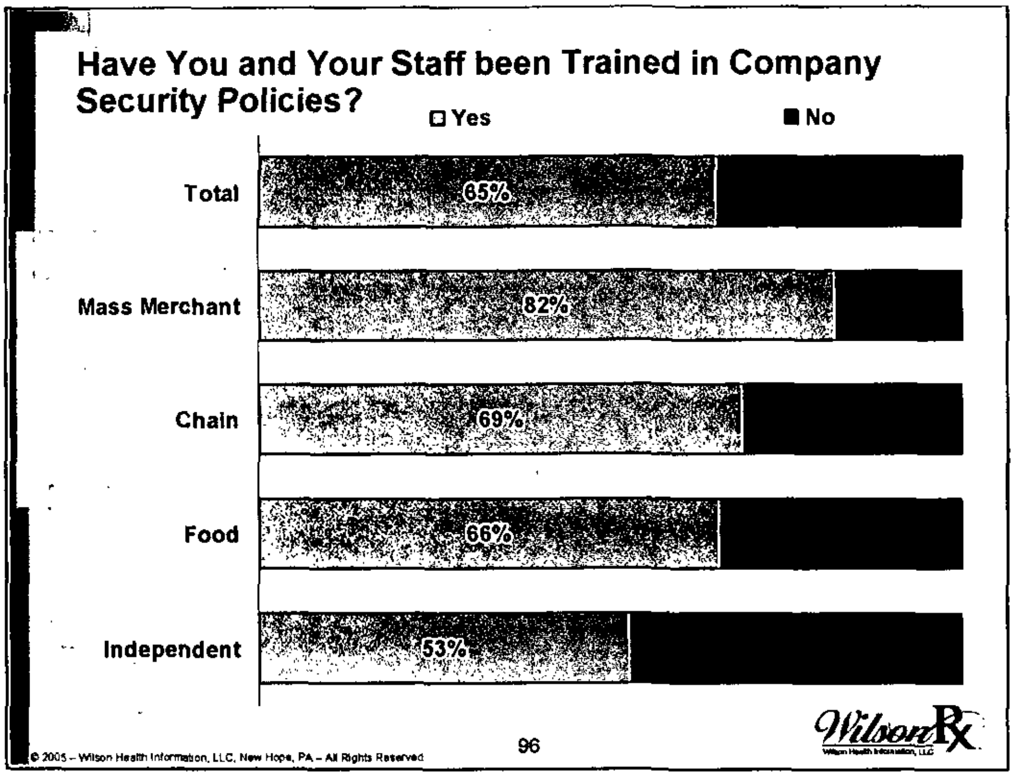
Q48-5

Two thirds of robberies involved only one criminal.



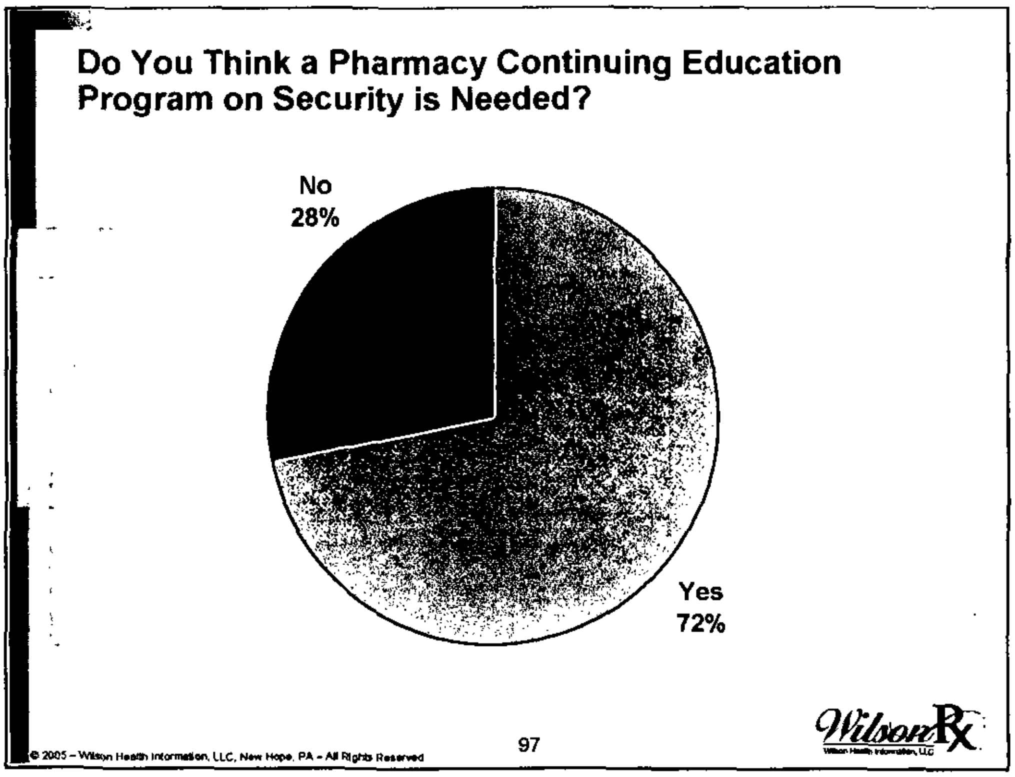
Q48-6

Among respondents who say that their pharmacy has been robbed, thirty-nine percent indicate that the pharmacy was forcibly broken into.



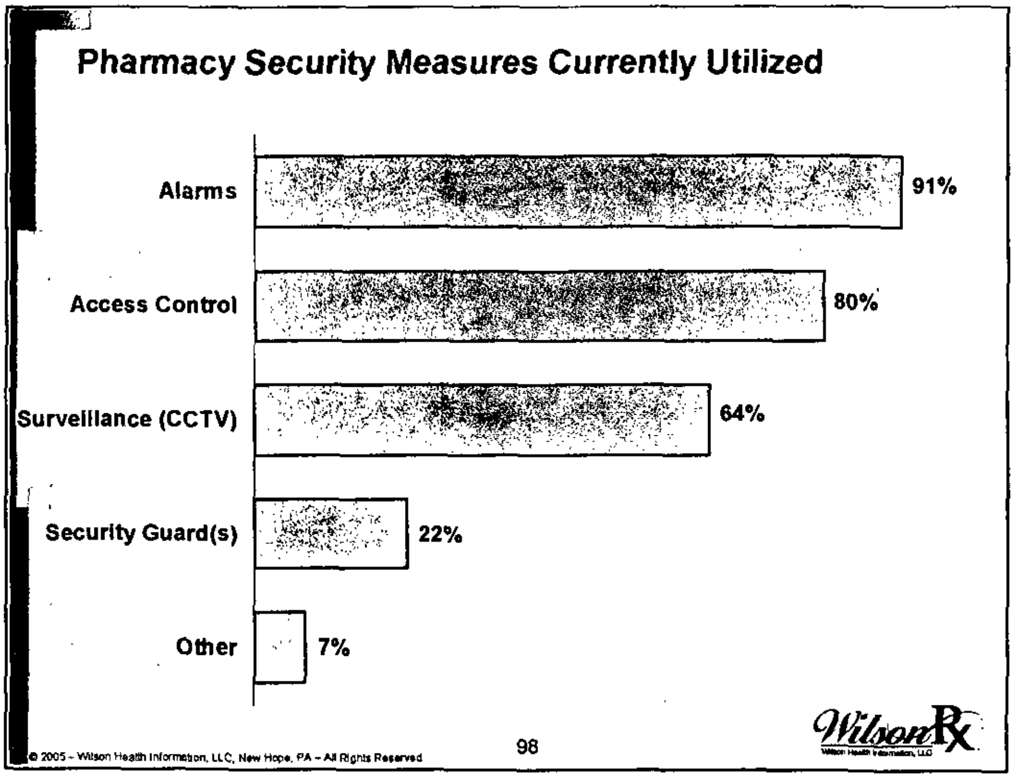
Q48-7

Approximately two out of three respondents indicate that their staff has been trained in company security policies. Employees of mass merchant pharmacies are most commonly trained in company security policies, while employees of independent pharmacies are least commonly trained.



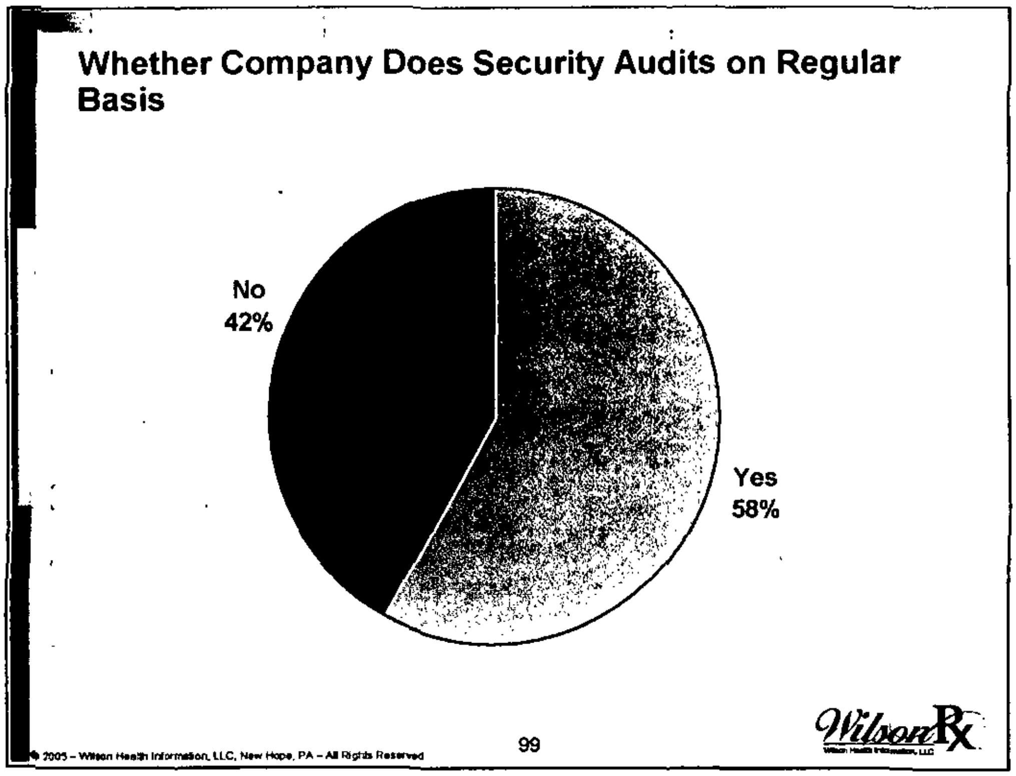
Q48-8

Most respondents (72%) think that a continuing education program on security is needed.



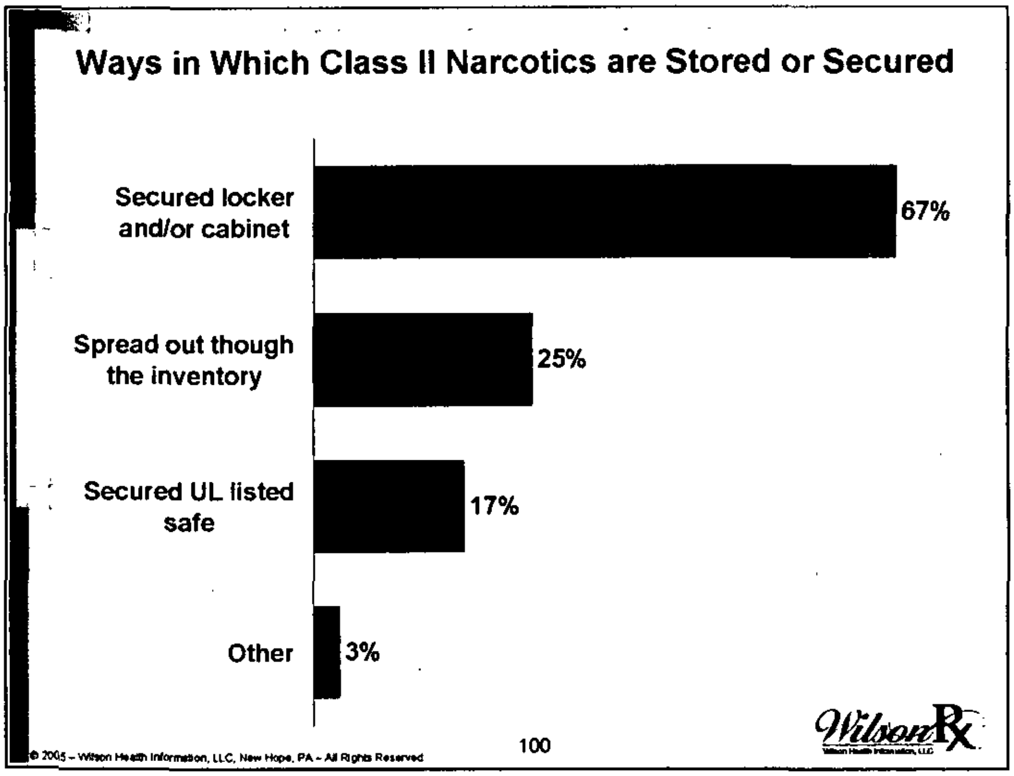
Q48-9

Commonly employed security measures include alarms (91%), access control (80%), surveillance (CCTV) (64%), and security guards (22%).



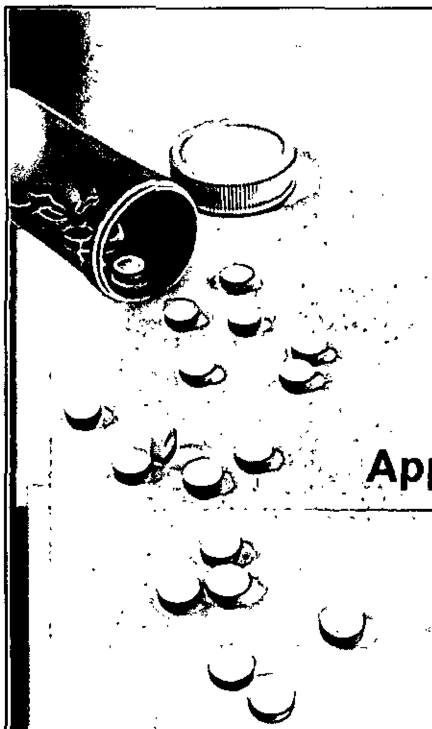
Q48-10

The majority of respondents indicate that their pharmacy does security audits on a regular basis.



Q48-11

Class II narcotics are most commonly stored in secured lockers/cabinets (67%), spread out through the inventory (25%), and secured UL listed safes (17%).



Appendix

Many pharmacists appreciate the ongoing efforts of the APHA and the opportunity to be surveyed.

Positive Feedback from Pharmacists about the Survey

- "I enjoyed doing this survey."
- "Very thorough survey. Thanks for the opportunity to compete this survey. I would like to know when results will be available"
- "I thought this was an excellent survey. More should be conducted. How will this information be used? The public and healthcare community in particular need to be made aware of our skills and training. We have done a poor job of selling ourselves."
- "The questions actually helped me think of ways to improve our pharmacy service to the community."
- "In my opinion this survey exemplifies the continuing efforts APHA has with Americas' pharmacists and I congratulate you for putting such interesting survey together. Good luck compiling the results."
- "Good range of topics covered, all relevant. May need to look more at why people are leaving the profession and why others do not want to go into pharmacy as a career."
- "Thank you for asking me to participate in this study. I think you need feedback from *what the pharmacists feel about their current situation in the field. It's hard to move to* the next level of care, when we aren't established in the current environment."
- "This was well done."

WilsonRx

Pharmacists suggest many new survey topics, including overall work satisfaction, the number of hours worked per week, the frequency of mistakes, quality assurance issues, Spanish pharmacy courses, repeat customers, compounding services, and the effect of formularies on time.

New Topic Suggestions from Pharmacists

- "What's the average working hours per week for pharmacists?"
- "Would you like to see more Spanish pharmacy courses?"
- "This questionnaire has no questions about pharmacist satisfaction. How many pharmacists actually get to take a lunch? I know that I am a type 1 diabetic and there are many days I don't get to have lunch. How is this legal?"
- "Overall work satisfaction rating and quality assurance issues."
- "It may be relevant to ask the percentage of repeat customers/patients."
- "I think questions on the effects of formularies by insurance companies on our time should have been asked. They truly are in charge of our patients' health care decisions. They have taken the control out of the hands of the health care providers and the patients."
- "Didn't question sufficiently about compounding services offered, i.e. veterinary, sterile, bio-identical hormone replacement, pain, nutrition, etc."
- "I feel it is important to ask about frequency of mistakes (especially incorrect Rxs that have left the pharmacy)."

WilsonRx

Suggestions for improving the survey include making it shorter, making questions more concise and specific, and adding don't know or not applicable answer choices. Many respondents say they had difficulty with the question about pharmacy revenues (since they do not have access to that information) as well as the question about the size of the pharmacy. Another recommendation is to ask about the percentage of customers rather than the number of customers.

Constructive Criticism from Pharmacists about the Survey

- "On future surveys, please let the participant know (at the beginning of the survey) how many questions are involved and the approximate time required to complete this survey. Thanks."
- "I spent 2 hours answering the questions. How long did you estimate that it would take to complete the questions?"
- "For a survey of this length I expect to be compensated for my time."
- "Please make future surveys more concise."
- "Maybe not making it so long. Split up the questions between different responders. Too long and no reward!"
- "Much too lengthy."
- "It's too long."
- "Percentages are more useful to estimate then number of patients falling into categories."
- "Percentages rather than numbers might have been a better way to answer. In particular with immunizations which are only done certain times of the year."

WilsonRx

Constructive Criticism from Pharmacists about the Survey (Cont)

- "Some questions require "don't know" because they either don't apply or are too vague in query."
- "I was not sure how to answer some of the questions and I was not always given the option to select don't know"
- "Please add "Don't Know" as an option for the fiscal year end date question. Please also mention if info provided will be kept confidential. "
- "You should have a n/a line for the other columns or allow the user to move onto the next question without having to enter an answer on the other questions."
- "I hated the "other" needing an answer. If it doesn't apply, I shouldn't need to answer it. This was way too long. I read fast, and it still took approximately 30 minutes."
- "Financial status was difficult to answer - Sometimes this info is not available to employees or not known to employees of large corporations, Some questions were difficult to comprehend. If you could be a bit more specific (give examples) next year"
- "Being part of a large chain, I do not have access to the fiscal information. I estimated pharmacy sales. I do not have information on entire store sales."
- "Question about size of pharmacy was difficult to answer - I would have preferred multiple choice or don't know as an option. Fiscal year end date was asked, even though I gave no financial info and don't know the fiscal year end date. . .still had to input one to continue."
- "Sorry, I don't have access to the pharmacy's financial data."
- "Maybe break down questions into sections of independent, chain/retail. I felt that some didn't really apply to me or I was unable to answer because I work for a large company."
- "Include "clinic-based" as a type of pharmacy."

WilsonRx

Pharmacists voice concerns about the PBM industry and formulary lists and the amount of time spent on bureaucracy and solving insurance problems. Some are even concerned about being able to stay in business. There is some interest in patient therapies and other projects, but many pharmacists feel pressured by the need to make a profit and the bottom line.

Pharmacists' Opinions on Other Topics

- "The PBM industry with their mandatory mail service is a detriment to the small independent pharmacy. More information is needed on what pharmacists in the retail work environment think about the PBM industry."
- "Its simple. You fill a prescription and make $1.50 gross. You provide all the services we have in the past with no remuneration for that. We have to make a profit as any good business people have to. Think about this my friends. Managed care? My question was: Who do we want to manage?"
- "Pharmaceutical care the term has been around for over 25 years---how very LITTLE progress we have made in this area!!! Very simply, until we show the insurance industry that our interventions and counseling save health care dollars they (and the public) will not reimburse us."
- "A tremendous amount of my time is dedicated to solving insurance questions related to patient insurance. Drug lists and exclusions, prior approvals and other issues must be dealt with by phone. PBM's do not offer efficient methods of problem resolution. Too much time is lost on hold."

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Pharmacists' Opinions on Other Topics (Continued)

- "Pharmacy is a thankless profession constantly bullied by manufacturing lobbies with deep pockets and greedy third party managers attempting to take all the profit out of independent ownership. If given the chance to do over, I would not be a pharmacist."
- "I believe that pharmacists should participate more in patient therapies. Increased bottom line profits and the unwillingness of corporation to truly invest in new ideas and concepts will be the downfall. Currently, my company times everything that I do and is constantly pressing pharmacists."
- "Striving for other pharmacy reimbursement and recognition is fine, but shouldn't we be concerned about getting better payment for the drugs first? It is only logical to assume that if we were reimbursed from third party more appropriately then we would be able to fund other pharmacy projects."
- "....my biggest fear is staying in retail pharmacy. I am very worried with mandatory mail order. I have lost a large % of my patient base to mail order and the trend is getting worse."

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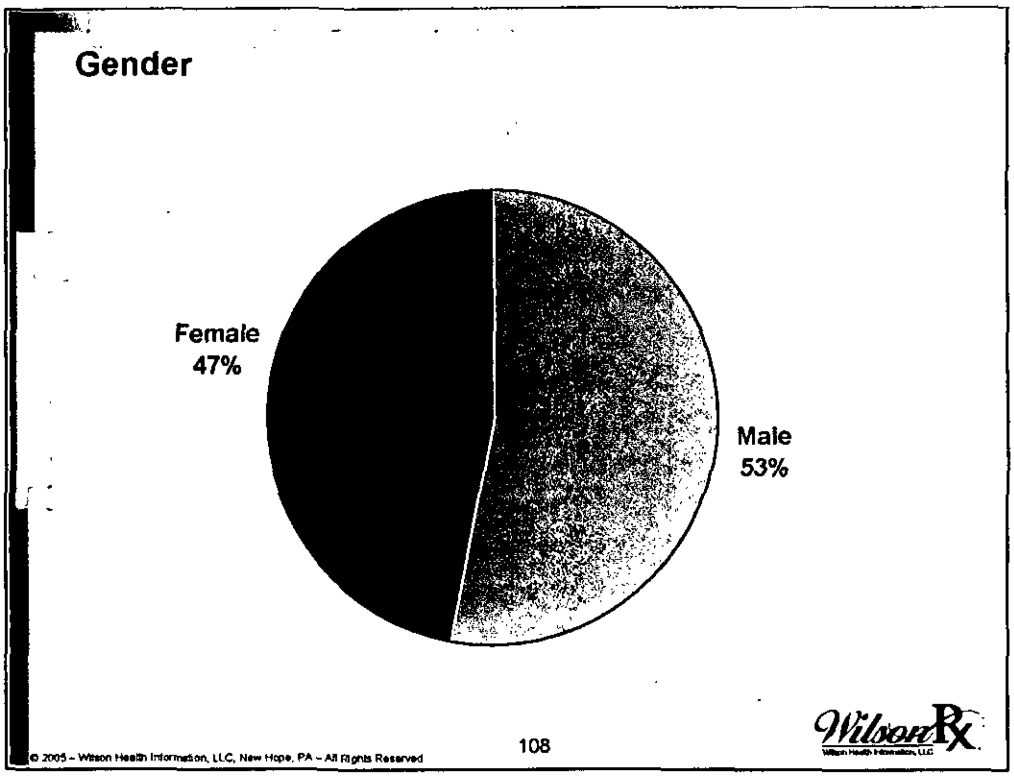

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Fifty-three percent of respondents are male and forty-seven percent female.

WilsonRx Company Overview

Wilson Health Information, LLC

- Independent, privately-owned, limited liability company based in New Hope, PA
- Founded in 2000 by third generation pharmacist Jim Wilson, R.Ph, MBA
- Twenty years of healthcare, marketing and consumer research experience
- Retail, chain, hospital, long-term care, wholesale pharmacy & pharmaceutical industry experience
- www.wilsonrx.com

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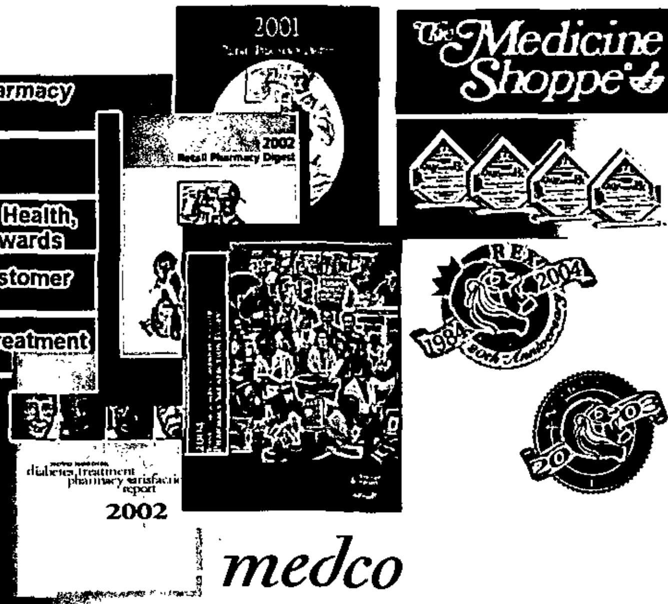
WilsonRx™ Recognition

- Boehringer Ingelheim Pharmacy Satisfaction Digest
- Ortho Biotech Retail Pharmacy Digest
- Medicine Shoppe, Medco Health, Publix, Pfizer, AultCare Awards
- Drug Store News REX Customer Satisfaction Award
- Novo Nordisk Diabetes Treatment Satisfaction Report
- Presentations
  - NACDS
  - NCPA
  - APhA
  - AMCP
  - PCMA
  - FMI
  - Others



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Thank You!

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