

# 2021 MAIL SERVICE PHARMACY PERFORMANCE MEASUREMENT

AGGREGATE SUMMARY PERFORMANCE REPORT

January 2022



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## **EXECUTIVE SUMMARY**



**227M+** 

Prescriptions Dispensed

- There was a 10.5% increase in number of organizations reporting
- Continued decrease in call abandonment performance as organizations trend closer to 5% (aligning with program standard threshold)
- Most dispensing errors are due to incorrect quantity
- The leading cause of errors in distribution is prescriptions dispensed with the incorrect patient address
- 8.11% of organizations had zero errors in dispensing or distribution of prescriptions

#### **Turnaround Time**

~ 1.52 days

To fill a prescription

#### **Dispensing Accuracy**

99.99% Of prescriptions dispensed with no errors

#### **Generic Dispensing Rate**

96.91%

Of prescriptions dispensed as generic

#### **Distribution Accuracy**

**99.97%** Of prescriptions

distributed with no errors Presented in this report are the 2020 measurement year (2021 reporting year) results based on URAC's Mail Service Pharmacy Accreditation program performance measures.

URAC includes performance measures in multiple accreditation programs to align and harmonize with national priorities for healthcare quality and delivery improvement. Our priority of consumer protection and empowerment drives our measurement efforts on outcome measures. composite measures, and flexible measures collection. With the emphasis of the ACA on affordable, quality health care and access, it is imperative that performance measurement programs are in place to ensure that savings from cost cutting efforts in health care are not at the expense of the quality of care delivered to patients. The information provided by measures of performance can help stakeholders monitor the quality and accessibility of care across the nation.

Performance measurement for the 2021 reporting year aligns with Phase 2 of URAC's measurement process where mandatory performance measures are subject to an external data validation process. The data validation program identifies areas of opportunity for improvement and ensures ongoing compliance conformity to program standards. By requiring organizations to submit audited performance measures annually, URAC ensures accurate and reliable data for organization-toorganization comparisons. These audited performance measure results become publicly available via aggregated, de-identified reports.

Prepared by Kiser Healthcare Solutions, LLC



Organizations are required to report data for services covered under the scope of each accreditation. There are 5 mandatory measures and the option to report data for 2 exploratory measures. Results are reported to URAC separately for each accreditation.

Below is the list of measures for 2021 reporting.

#### MANDATORY MEASURES

- 1. Generic Dispensing Rates (MP2012-09)
- 2. Call Center Performance© (DTM2010-04)
- 3. Dispensing Accuracy© (MP2012-06)
- 4. Distribution Accuracy© (MP2012-07)
- 5. Turnaround Time for Prescriptions© (MP2012-08)

#### EXPLORATORY MEASURES

- 1. Complaint Response Timeliness (CM2013-03)\*
- 2. Overall Consumer Satisfaction (CM2013-04)

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\*Fewer than five organizations submitted data for this measure. Analysis and benchmarks were not produced given less than five valid data submissions.

### DATA VALIDATION PROCEDURES

Data validation vendors (DVV) identified any materially inaccurate submissions. Additionally, Kiser Healthcare Solutions, LLC corrected for any data entry and duplicate submission errors based on manual data review and cleaning, documented at the end of this report.

Kiser Healthcare Solutions executed standard procedures for data cleaning and validation prior to finalizing the results presented in this report. All organizations' measure submissions were reviewed for measure component quality. For example, numerators and denominators were checked against rates to ensure accuracy. Also, minimum, mean, median, and maximum rates were benchmarked nationally and regionally to ensure accuracy and to identify potential issues at an individual submission level.

#### Basic guidelines for identifying valid submissions:

- Measure denominator is greater than zero
- DVV has not deemed the measure submission as materially inaccurate
- Organization has stated it is submitting the measure

#### Basic guidelines for aggregate rates:

- Measure denominator is greater than or equal to 30
- DVV has not deemed the measure submission as materially inaccurate
- Organization has stated it is submitting the measure
- Minimum of 5 reporting organizations

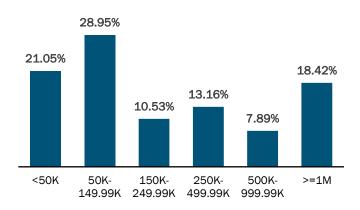
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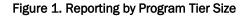


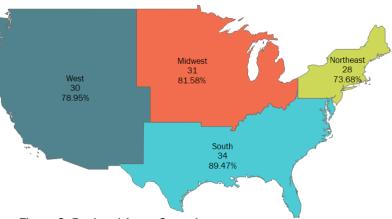
## **RESULTS IN AGGREGATE**

A total of 38 URAC-accredited Mail Service Pharmacy (MSP) organizations reported 2020 measurement year data for the 2021 reporting year. The total number of prescriptions dispensed across all MSP organizations was 227,811,037 with the number of prescriptions dispensed ranging from 663 to 91,159,412. Most organizations reported dispensing fewer than one million prescriptions, with the majority of organizations reporting that they dispensed fewer than 500,000 prescriptions (Figure 1).

Of the 38 MSPs that submitted performance measurement data, 27 organizations covered all four URAC-specified regions (Midwest, Northeast, South, and West), and 11 organizations covered only a single region (Figure 2).





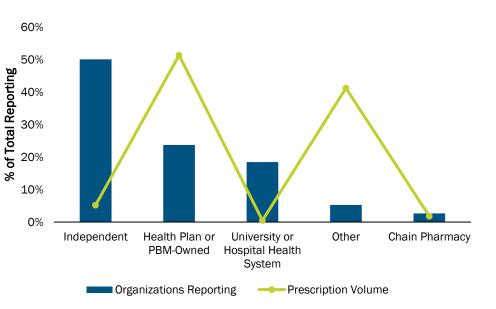


#### Figure 2. Regional Areas Served

% reporting organizations by region (n=38) Note: Multiple responses accepted.

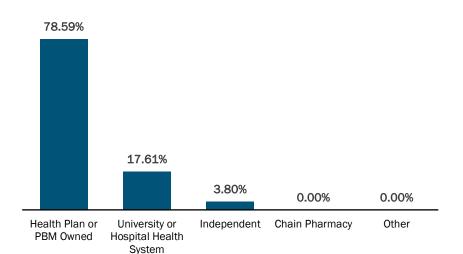


In the 2021 measure reporting year, URAC requested that pharmacies begin to selfidentify their pharmacy type for future analysis. Most pharmacies reported themselves as independent pharmacies. The organizations who reported "other" indicated themselves as a Mail Service Pharmacy which does not identify the pharmacy further. While organizations identified as health plan or PBM-owned represented 25% of the reporting organizations, they accounted for more than 50% of the dispensing volume.



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**Documented Clinical Interventions** 

Reporting on documented clinical interventions was also introduced during the 2021 measure reporting year. Organizations were asked to report the number of clinical interventions tracked within their organization in each of the following categories: Drug Utilization, Mental Health, Pain, and Other. Less than half of organizations (31.58%, n=12) reported clinical interventions of any type. The total number of documented clinical interventions reported was 9,162,466, with all interventions addressing drug utilization. Health Plan or PBMowned mail service pharmacies represented the greatest percentage of total interventions.



## GENERIC DISPENSING RATES (MP2012-09)

#### Measure Description

This *mandatory* measure assesses the percentage of all prescriptions that were dispensed as generics, branded generics, or brands for which members paid the generic co-pay.

### Generic Dispensing Rate

96.91%

Prescriptions Dispensed as Generics

There is no stratification for this measure; results are reported across all populations.

URAC is the measure steward, and all rights are retained by URAC.

The 35 valid submissions for this measure reported an aggregate summary rate of 96.91%. One organization dispensed 100% generic prescriptions.

TOTAL NUMERATOR	OTAL NUMERATOR TOTAL DENOMINATOR		AL NUMERATOR TOTAL DENOMINATOR AGGREGATE SUMMARY RATE MEA		MEAN	:	SUBMISSIONS
144,795,893	149,418,003		-18,003 96.91%		6	35	
MIN	10TH	25TH	50TH	75TH	90ТН	MAX	
24.04%	80.17%	90.69%	95.34%	98.72%	99.13%	100%	



## CALL CENTER PERFORMANCE (DTM2010-04)

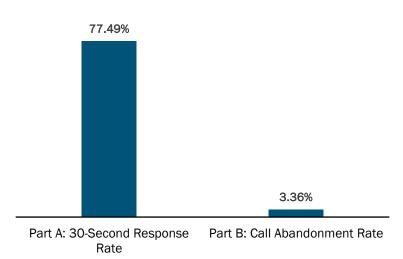
#### Measure Description

This mandatory measure has two parts:

- Part A evaluates the percentage of calls during normal business hours to the organization's call service center(s) during the measurement period that were answered by a live voice within 30 seconds
- Part B evaluates the percentage of calls made during normal business hours to the organization's call service center(s) during the reporting year that were abandoned by callers before being answered by a live customer service representative

For Part A, a higher rate represents better performance. For Part B, a lower rate represents better performance.

URAC is the measure steward, and all rights are retained by URAC.



#### Figure 3. Call Center Performance Aggregate Summary Rates

#### Summary of Findings

A total of 35 organizations reported valid results for each measure part. There were four submissions at or above the 90th percentile for Part A. There were five submissions at or above the 90th percentile for Part B.

MEASURE	TOTAL NUMERATOR	TOTAL DENOMIN	ATOR A	GGREGATE SUMMARY RATE	MEAN	SU	BMISSIONS
Part A: 30-Second Response Rate	54,671,211	70,551,64	1	77.49%	81.85%		35
Part B: Call Abandonment Rate	2,370,129	70,584,51	4	3.36%	3.40%		35
MEASURE	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Part A: 30-Second Response Rate	0%	66.39%	78.14%	6 84.37%	93.23%	97.09%	99.59%
Part B: Call Abandonment Rate	12.69%	6.92%	3.50%	2.55%	1.94%	1.03%	0.09%



## DISPENSING ACCURACY (MP2012-06)

#### **Measure Description**

This *mandatory* six-part measure and composite roll-up assesses the percentage of prescriptions that the organization dispensed inaccurately. Measure parts include:

- Part A: Incorrect Drug and/or Product Dispensed
- Part B: Incorrect Recipient
- Part C: Incorrect Strength
- Part D: Incorrect Dosage Form
- Part E: Incorrect Instructions
- Part F: Incorrect Quantity

## For all parts, a lower rate represents better performance.

Each part of this measure is calculated at the individual prescription level, not at the order level (i.e., if an order contains three prescriptions, those three prescriptions are each counted separately in each denominator).

There is no stratification for this measure; results are reported in aggregate across all populations.

URAC is the measure steward, and all rights are retained by URAC.

Summary of Findings Of the 38 valid submissions, there were four organizations that reported 0% (perfect performance). The lowest performer indicated 74 drug dispensing defects per 100,000.

TOTAL NUMERATOR	R TOTAL DENOMINATOR		TOTAL DENOMINATOR AGGREGATE SUMMARY RATE MEAN			SUBMISSIONS
13,159	227,811,037		0.00578%	0.03722	0.03722%	
MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.74115%	0.04022%	0.01750%	0.01089%	0.00330%	0.00031%	0%

5.78 errors

Al	Error Compositi	e	Per 100k Pre	scriptions Dispens	sed
					0.00401%
0.00073%				0.00000	
	0.00021%	0.00022%	0.00022%	0.00039%	
Part A: Incorrect Drug Dispensed	Part B: Incorrect Recipient	Part C: Incorrect Strength	Part D: Incorrect Dosage Form	Part E: Incorrect Instructions	Part F: Incorrect Quantity

#### Figure 4. Dispensing Error Types

0.00578%

Aggregate Summary Rates per dispensing error sub-part

\* Most dispensing errors are due to incorrect quantity.



#### Part A: Incorrect Drug Dispensed

Of the 38 valid submissions, there were 12 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 669 drug dispensing defects per 100,000.

TOTAL NUMERATOR	TOTAL NUMERATOR TOTAL DENOMINATOR		GREGATE SUMMARY RATE	MEAN		SUBMISSIONS
1,664	227,811,03	37	0.00073%	0.020359	%	38
MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.66880%	0.00697%	0.00192%	0.00092%	0%	0%	0%

#### Part B: Incorrect Recipient

Of the 38 valid submissions, there were 13 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 19 drug dispensing defects per 100,000.

TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
478	227,811,037	0.00021%	0.00177%	38

MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.01941%	0.00441%	0.00216%	0.00018%	0%	0%	0%

#### Part C: Incorrect Strength

Of the 36 valid submissions, there were 15 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 11 drug dispensing defects per 100,000.

TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
486	224,961,987	0.00022%	0.00094%	36

MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.01149%	0.00222%	0.00104%	0.00011%	0%	0%	0%

#### Part D: Incorrect Dosage Form

Of the 36 valid submissions, there were 16 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 8 drug dispensing defects per 100,000.

TOTAL NUMERATOR	TOTAL DENOM	IINATOR	AGGREGATE SUMMARY RATE	MEAN		SUBMISSIONS
492	224,961,	987	0.00022%	0.00094%	, D	36
MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.00760%	0.00309%	0.00098%	0.00007%	0%	0%	0%



#### Part E: Incorrect Instructions

Of the 38 valid submissions, there were 13 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 148 drug dispensing defects per 100,000.

TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGAT	E SUMMARY RATE	MEAN	S	UBMISSIONS
897	227,811,037	0.00039%		0.00550%		38
MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.14804%	0.00601%	0.00233%	0.00032%	0%	0%	0%

#### Part F: Incorrect Quantity

Of the 38 valid submissions, there were 12 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 74 drug dispensing defects per 100,000.

TOTAL NUMERATOR	TOTAL DENOM	INATOR AC	GREGATE SUMMARY RATE	MEAN		SUBMISSIONS
9,142	227,811,0	037	0.00401%	0.00788%	6	38
MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.07402%	0.01618%	0.00904%	0.00196%	0%	0%	0%



## **DISTRIBUTION ACCURACY (MP2012-07)**

#### **Measure Description**

This mandatory two-part measure and composite assesses the percentage of prescriptions delivered to the wrong recipient.

- Part A assesses the percentage of prescriptions mailed with an incorrect address
- Part B assesses the percentage of • prescriptions mailed with a correct address that were not delivered to the correct location

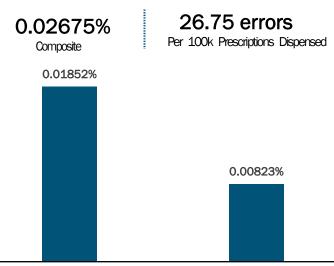
#### For all parts, a lower rate represents better performance.

Each part of this measure is calculated at the individual prescription level, not at the order level (i.e., if an order contains three prescriptions, those three prescriptions are each counted separately in each denominator).

There is no stratification for this measure. results are reported in aggregate across all populations.

URAC is the measure steward, and all rights are retained by URAC.

## **Distribution Error Rate**



Part A: Prescriptions Dispensed Part B: Prescriptions Dispensed with Incorrect Patient Address with Correct Patient Address But **Delivered to Wrong Address** 

#### Figure 5. Distribution Error Types

Aggregate Summary Rates per distribution error sub-part

\*Most distribution errors are due to prescriptions being dispensed with the incorrect patient address.

#### Summary of Findings

A total of 37 organizations reported valid results for each measure part. Prescriptions dispensed with the incorrect patient address occur more frequently than prescriptions delivered to the wrong location. The highest performing pharmacies had zero distribution errors for the 2020 measure collection year. The lowest performer represented 900 distribution defects per 100,000 prescriptions dispensed.

TOTAL NUMERAT	OR TOTAL DE	NOMINATOR	AGGREGATE SUMMARY RATE MEAN		SUBMISSIONS		
60,729	227,0	03,520	0.02675%	0.02675% 0.07756%		37	
MIN	N 10TH 25TH		50TH	75TH 90TH		MAX	
0.89996%	% 0.20083% 0.06556%		0.01137%	0.00185%	0%	0%	



#### Part A: Prescriptions Dispensed with Incorrect Patient Address

Of the 36 valid submissions, there were six valid data submissions that reported 0% (perfect performance). The lowest performer indicated 754 drug dispensing defects per 100,000.

TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
42,036	227,003,430	0.01852%	0.04189%	37

MIN	10TH	25TH	50TH	75TH	90TH	MAX
0.75350%	0.07686%	0.03411%	0.00879%	0.00123%	0%	0%

#### Part B: Prescriptions Dispensed with Correct Patient Address but Delivered to Wrong Location

Of the 37 valid submissions, there were nine valid data submissions that reported 0% (perfect performance). The lowest performer indicated 296 drug dispensing defects per 100,000.

TOTAL NUMERATOR	R TOTAL DEM	IOMINATOR	AGGREGATE SUMMARY RATE	MEA	N	SUBMISSIONS	
18,693	227,0	03,430	0.00823%	0.03568%		37	
MIN	10TH	25TH	50TH	75TH	90TH	MAX	
0.29631%	0.14950%	0.01348%	0.00140%	0%	0%	0%	



## **TURNAROUND TIME FOR PRESCRIPTIONS (MP2012-08)**

#### Measure Description

This *mandatory* three-part measure assesses the average speed with which the organization fills prescriptions.

- Part A measures prescription turnaround time for clean prescriptions
- Part B measures prescription turnaround time for prescriptions that required intervention
- Part C measures prescription turnaround time for all prescriptions

## For all parts, a lower rate represents better performance.

Parts A and B of this measure are mutually exclusive; if a prescription requires an intervention, it is counted in Part B; when it becomes clean, it is not counted again in Part A. The unit of analysis in this measure is individual prescriptions, not orders (which may include multiple prescriptions).

There is no stratification for this measure, results are reported across all populations.

URAC is the measure steward, and all rights are retained by URAC.

#### Summary of Findings

Of the 31 organizations that submitted valid data for this measure, 25 organizations submitted valid data for all parts of the measure. There were no valid data submissions that reported less than one-day turnaround time for new or refill prescriptions. There were five organizations that took more than five days to turnaround new prescriptions. There were two organizations that took more than five days to turnaround new prescriptions.

MEASURE	TOTAL NUMERAT			NUMERATOR		MEAN	SUBMISSIONS
Part C1: All Prescriptions - New	125,419,0	125,419,024		1.63		3.60	31
Part C2: All Prescriptions - Refill	125,422,9	125,422,914		1.41		2.22	31
MEASURE	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Part C1: All Prescriptions - New	16.03	8.67	3.84	2.58	1.53	1.38	1.22

2.62

### **Turnaround Time**

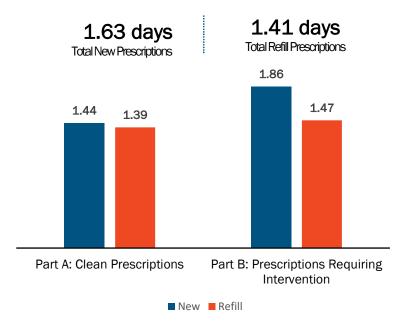


Figure 6. Turnaround Time Aggregate Summary Rates

1.78

1.40

1.18

Part C2: All Prescriptions - Refill

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2.90

7.91

1.08



#### Part A: Clean Prescriptions

There were no valid data submissions that reported less than one-day turnaround time for new prescriptions. There were two organizations that took more than five days to turnaround new prescriptions.

There were two valid data submissions that reported less than one-day turnaround time for refill prescriptions. There were 12 organizations that took more than two days to turnaround refill prescriptions.

MEASURE	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Part A1: Clean Prescriptions - New	61,756,113	42,804,663	1.44	2.55	28
Part A2: Clean Prescriptions - Refill	85,620,893	61,728,163	1.39	2.04	29

MEASURE	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Part A1: Clean Prescriptions - New	9.10	4.40	2.64	1.92	1.36	1.23	1.19
Part A2: Clean Prescriptions - Refill	7.75	2.82	2.29	1.66	1.29	1.15	0.64

#### Part B: Prescriptions Requiring Intervention

There were no valid data submissions that reported less than one-day turnaround time for new prescriptions where interventions were required. There were 18 organizations that took over two days to turnaround new prescriptions. Among those, seven took more than five days.

There were no valid data submissions that reported less than one-day turnaround time for refill prescriptions. There were 15 organizations that took over two days to turnaround refill prescriptions. Among those, three took more than five days.

MEASURE	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Part B1: Prescriptions Requiring	63,404,609	34,032,792	1.86	4.20	28
Intervention - New Part B2: Prescriptions Requiring	39,757,839	27,045,140	1.47	3.25	27
Intervention - Refill					

MEASURE	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Part B1: Prescriptions Requiring	15.39	8.66	4.95	3.60	1.65	1.47	1.06
Intervention - New							
Part B2: Prescriptions Requiring	14.90	6.02	3.26	2.57	1.67	1.19	1.08
Intervention - Refill							



## OVERALL CONSUMER SATISFACTION (PH2021-02)

#### **Measure Description**

This *exploratory* measure assesses percentage of program participants who completed a consumer satisfaction survey and reported that they were "satisfied" overall with the pharmacy program during the measurement period.

There is no stratification for this measure, results are reported across all populations.

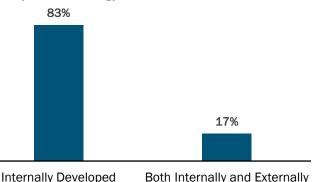
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#### Summary of Findings

Of the 6 organizations that submitted data for this measure, 5 organizations submitted valid data for both measure sub-parts. **Based on the data submitted**, **overall consumer satisfaction was 79.62%, with a survey response rate of 5.4%.** Most pharmacy organizations (83% of respondents) reported the use of internally developed surveys for consumer satisfaction (**Figure 7**) with surveys being administered by mail and online (**Figure 8**).



#### Survey Methodology



d Both Internally and Externally Developed

#### Figure 7. Development of Survey

% of reporting organizations (n=6)



#### Figure 8. Survey Administration Method

% of reporting organizations (n=6) Note: Multiple responses accepted per organization.

MEASURE	TOTAL NUMERATOR	TOTAL DEM	OMINATOR	AGGREGATE SUMMARY	RATE	MEAN	SUBMISSIONS
Overall Consumer Satisfaction	8,418	10,	573	79.62%		89.41%	5
Survey Response Rate	10,622	196	,790	5.40%		42.73%	6
MEASURE	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Overall Consumer Satisfaction	76.99%	79.08%	82.23%	92.73%	95.08%	98.03%	100%
Survey Response Rate	4.00%	4.29%	9.63%	27.63%	77.01%	96.26%	100%

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