

# Specialty Pharmacy

Please rate the following service attributes regarding the specialty medication you or your family member filled with Publix Specialty Pharmacy. Please be assured that this survey is confidential and your responses will not be tied back to you in any way:

### **Overall Experience**

Overall, I am satisfied with my experience using the Publix Specialty			
Pharmacy.	-		
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<ul> <li>Strongly Agree</li> </ul>	○ Agree	<ul> <li>Neither Agree nor Disagree</li> </ul>
<ul> <li>Disagree</li> </ul>	<ul> <li>Strongly Disagree</li> </ul>	○ N/A

### I can recommend this service to my family and/or friends without hesitation.

<ul> <li>Strongly Agree</li> </ul>	○ Agree	<ul> <li>Neither Agree nor Disagree</li> </ul>
<ul> <li>Disagree</li> </ul>	<ul> <li>Strongly Disagree</li> </ul>	○ N/A

### Your Prescription Order

#### Overall, the prescription order process was easy.

Strongly Agree
 Agree
 Neither Agree nor Disagree
 Strongly Disagree
 N/A

## Please describe the timeliness of filling your prescription. My prescription was received:

- Before the expected date
- On the expected date
- O After the expected date, but did not affect my treatment plan
- O After the expected date, and my treatment plan was affected
- Does not apply

## I am satisfied with the support I received regarding my insurance coverage and out-of-pocket costs.

<ul> <li>Strongly Agree</li> </ul>	<ul> <li>Agree</li> </ul>	<ul> <li>Neither Agree nor Disagree</li> </ul>
<ul> <li>Disagree</li> </ul>	<ul> <li>Strongly Disagree</li> </ul>	○ N/A

#### My prescription order was dispensed accurately.

Strongly Agree
 Agree
 Neither Agree nor Disagree
 Strongly Disagree
 N/A

### Our Staff

Overall, having the specialty pharmacy involved in this process was helpful.			
<ul> <li>Strongly Agree</li> </ul>	○ Agree	<ul> <li>Neither Agree nor Disagree</li> </ul>	
<ul> <li>Disagree</li> </ul>	<ul> <li>Strongly Disagree</li> </ul>	0 N/A	

#### I am confident in the information I received from the specialty pharmacy.

- Strongly Agree
   Agree
   Neither Agree nor Disagree
   N/A
- Disagree
   Strongly Disagree
   N/A

or fax to 1-863-413-5723



l am satisfied with the O Strongly Agree O Disagree	e level of knowledge of t O Agree O Strongly Disagree	the specialty pharmacy staff. O Neither Agree nor Disagree O N/A
The specialty pharma O Strongly Agree O Disagree	ocy staff were courteou O Agree O Strongly Disagree	s and friendly. O Neither Agree nor Disagree O N/A
I felt the specialty pho O Strongly Agree O Disagree	armacy listened to my a O Agree O Strongly Disagree	<ul> <li>Neither Agree nor Disagree</li> </ul>
I felt the specialty pho O Strongly Agree O Disagree	armacy cared about ma O Agree O Strongly Disagree	eeting my needs. O Neither Agree nor Disagree O N/A
Our Communication with You The level of communication I received kept me well informed throughout the prescription order process.		
<ul> <li>Strongly Agree</li> <li>Disagree</li> </ul>	<ul> <li>Agree</li> <li>Strongly Disagree</li> </ul>	<ul> <li>Neither Agree nor Disagree</li> <li>N/A</li> </ul>
During the prescriptic promptly.	on order process, my pł	none calls were answered
<ul> <li>Strongly Agree</li> <li>Disagree</li> </ul>	<ul> <li>○ Agree</li> <li>○ Strongly Disagree</li> </ul>	<ul> <li>Neither Agree nor Disagree</li> <li>N/A</li> </ul>
l am satisfied with the business hours.	e ability to contact the s	pecialty pharmacy after
<ul> <li>Strongly Agree</li> <li>Disagree</li> </ul>	<ul> <li>○ Agree</li> <li>○ Strongly Disagree</li> </ul>	○ Neither Agree nor Disagree ○ N/A
When I left messages timely manner.	for the specialty pharm	nacy, my call was returned in a
<ul> <li>Strongly Agree</li> <li>Disagree</li> </ul>	<ul><li>○ Agree</li><li>○ Strongly Disagree</li></ul>	○ Neither Agree nor Disagree ○ N/A
The frequency of communication from the staff through my prescription order was satisfactory.		
<ul><li>Strongly Agree</li><li>Disagree</li></ul>	<ul> <li>Agree</li> <li>Strongly Disagree</li> </ul>	<ul> <li>Neither Agree nor Disagree</li> <li>N/A</li> </ul>
The reminder phone of O Strongly Agree O Disagree	calls I receive for my pre O Agree O Strongly Disagree	escription refills are helpful. O Neither Agree nor Disagree O N/A
Please mail your response to: Publix Specialty Pharmacy, Attn: Quality Dept., 1950 Sand Lake Rd., Bldg. #5, Orlando, FL 32809		