




THE  TEXAS
85TH LEGISLATURE

Pharmacy Outlook & Insights

Texas Pharmacy
Business Council 

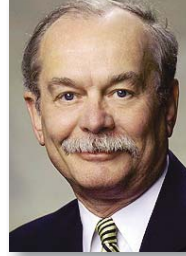
The Gold Standard For Texas Independents

Our Challenges Constantly Change But Our Focus & Preparation Never Waiver

It's amazing how fast 18 months can pass! The start of the 2017 legislative session is less than a month away, but we have been hard at work the last year and a half in preparation. **We have several new challenges to deal with, but our focus, commitment, resources and reputation give us the arsenal we need to succeed.**

Though the independent pharmacy landscape is ever-shifting, one thing is constant: we will build an advocacy agenda focused on strategic goals, achievable incremental changes and a professional, cooperative approach to doing business. Our Board, staff and consultants have steadfastly followed this course and it is validated by our successes:

- Passage of major MAC transparency and audit oversight bills in 2013 & 2015 with the resulting creation of online MAC portals;
- Passage of prompt-pay and audit reforms in 2011;
- Securing vital franchise tax gains for independent pharmacies in 2013 & 2015;
- The nation's first comprehensive ban on PBM transaction fees in 2015; and
- A reputation as the "go-to group" for independent pharmacy in Texas and a growing role in supporting independent groups in other states.



Michael J. Wright

Our Principles:

- **Focus on achievable goals you can build on:** It's easy to shoot for the moon; it's much harder to actually pass a bill.
- Take a long-term view: bridges & alliances built today reap future trust & cooperation.
- **Be willing to discuss & negotiate differences.** Just saying "no" is rarely a useful policy position because it solves nothing.
- **Always honor your commitments.**
- Give credit to those who help you — and expect credit from others for your effort.
- Advocate the value of your own objectives and efforts rather than attacking others.
- Cooperate with like-minded groups whenever possible with the caveat that talk is not action and that **real cooperation is measured by behavior during the session.**

We Are Committed to Leadership & Cooperation

By any measure of resources, reputation and accomplishments, TPBC is the clear leader in advocacy for Texas independents. Our achievements and influence give us clear advantages, but we have steep challenges this session. **The fiscal crisis means new budget dollars will be hard to win. Legislative and public alarm over the opioid issue are driving a level of alarm that may yield surprises and burdensome outcomes.**

In addressing all our challenges, we have improved our communications and coordination with other pharmacy groups and work with them toward shared goals whenever we can. We will support the legislation of other groups when their bills align with the goals and policy positions set by the TPBC Board. **We will keep our own initiatives close to our vest — we can't always predict or control the political landscape, but we can fully control the efforts in which we invest so much.**

We Need Your Help!

We are well-prepared and have a talented advocacy team in place, but your grassroots support is vital to our efforts. We need pharmacists to come to Austin to testify and call legislators in their home districts when called upon. **Our allies value your input, so please fill out the Grassroots Contact Form on page 9. And don't forget that our ability to financially support our legislative allies is critical to our advocacy success. You can support that effort by using the form on page 10 to contribute to APRxPAC.**

INSIDE

Session Backdrop:	2
Opioid Issue Looms:	3
Other Hot Issues:	4
TSBP Priorities:	5
Bills We're Watching:	6
Session Facts & Dates:	7
Advocacy Pointers:	8
Grassroots Network:	9
APRxPAC:	10

TPBC Board

Chairman

Bruce Rogers, R.Ph.
Bay City

Vice Chairman

Alton Kanak, R.Ph.
Katy

Secretary/Treasurer

Doug Eakman, R.Ph.
San Angelo

Directors

Lynn Everett, R.Ph.
Waco

Steve Hoffart, Pharm.D.
Magnolia

Bill Moore, R.Ph.
Sinton

Joe Ochoa, R.Ph.
Edinburg

TPBC Staff

Executive Director
Michael Wright

Dir. of Communications
Chuck Waters



TPBC is a fully-funded,
independent subsidiary of
American Pharmacies.

© 2016 TPBC

This document was produced by
Texas Pharmacy Business Council
& may not be reproduced or
distributed without our consent.

Fiscal Straits Make New Spending Near Impossible

The State's Fiscal Outlook

Continued weakness in oil and natural gas prices means a gloomy forecast for the state budget in the 2017 Session. **Gov. Greg Abbott last summer asked state agencies to scale back their budget requests by 4 percent for the 2018-19 biennium, and the Legislative Budget Board has recommended an 8% cap on growth in the new two-year budget, a percentage many see as unrealistically high.** The Rainy Day Fund held \$9.7 billion at the end of FY 2016 (Aug. 31), and lawmakers have not yet set a minimum balance for the fund. The revenue trend continues to be stagnant, with total state revenue for the September-November 2016 period up by just 0.71% over the same period in 2015, and total tax collections down by 2.05%.



But the list of budget items that *can't be cut* is pretty long: public education, border security, debt service on state bonds, state employee pensions, child protective services, behavioral health services, Medicaid, CHIP and foster care. Other major priorities/issues that will affect the next biennial budget include state highway maintenance, water infrastructure and efforts at continued franchise tax reform — Lt. Gov. Dan Patrick and some legislators want to continue franchise tax cuts and even want to take on business property taxes, a tough challenge because those taxes comprise the great majority of school district revenue.

The bottom line is that it's going to be a very poor session in which to float a fiscal wish list.

Sideshow Attractions for Everyone

With Donald Trump ascending to the White House and controversial issues abounding, the 2017 Session is sure to be entertaining. Expect more efforts to curb abortions, strengthen the overturned voter ID law, reign in the state's sanctuary cities, reduce local control, legalize medical cannabis and put gender-specific restrictions on public restrooms. If that's not enough, we are likely in for a power struggle between lawmakers and Abbott over budget control. Emboldened by the support of Attorney Gen. Ken Paxton, Abbott will be eager to again wield the line-item veto he broke out in 2015.



In April, Lt. Gov. Patrick and Senate Finance Committee Chairwoman Jane Nelson announced major changes in how the budget is written and how budget bills get passed next session: "The Senate Finance Committee will be incorporating the principles of zero-based budgeting when drafting our state budget and for transparency purposes will be requesting supplemental programmatic level budget information."

This means that the Senate will file a spending bill in January 2017 with budget zeroes for all state agencies and that it will later report a committee substitute with line-item program budgets, which increases Abbott's line-item veto potential. Expect plenty of jockeying for position among legislators, as well as competing budget proposals.

A Few New Faces Under the Dome

25 new House members and 3 new Senators will be seated next month. These are the new faces in the Senate: Republican Dawn Buckingham of Austin replaces the retiring Troy Frasier of Horseshoe Bay in District 24; Republican Bryan Hughes of Mineola replaces fellow Republican Kevin Eltife of Tyler in District 1 (Eltife also retired); in District 13, Rep. Borris Mills fills the Houston seat vacated by Rodney Ellis when he was elected Harris County commissioner. Frasier (Natural Resources & Economic Development) and Eltife (Business & Commerce) were committee chairs, so those leadership slots are now open. The Senate will retain its current margin of 20 Republicans and 11 Democrats.

Although there will be 25 newcomers in the House, just four seats changed party hands and Democrats picked them up: Republicans John Lujan, Rick Galindo and Gilbert Peña lost their re-election bids to Democratic challengers Tomas Uresti, Philip Cortez and Mary Ann Perez, while incumbent Rep. Kenneth Sheets of Dallas fell to Democratic challenger Victoria Neave. Several committee chairs departed in the House, the most important being Appropriations Chairman John Otto, Public Health Chair Myra Crownover and Public Education Chair Jimmy Don Aycock (all three retired). The new House will convene with 95 Republicans, 54 Democrats and one independent.

Opioid Abuse, Monitoring & Crime Are #1 Issue

No other pharmacy issue is likely to spark as much legislation or elicit stronger emotions in the 2017 session than the issue of opioid abuse and how pharmacy and the medical community deal with it. It's easy to understand why.



More than 60 Americans die daily from a prescription drug overdose. Overdose deaths from prescription painkillers have quadrupled since 1999 and outnumber deaths from all illicit drugs combined — including heroin and cocaine — by a 2-1 margin. In 2015, an estimated 2.6 million Americans were addicted to heroin or prescription narcotics. **This opioid addiction/abuse crisis has fueled a national surge in pharmacy break-ins and robberies that directly feeds the illicit opiate pipeline.**

TPBC will file legislation in 2017 seeking increased criminal penalties for pharmacy robberies and burglaries. TPBC's commissioned study of such thefts finds that the crimes are rampant in Texas, with an alarming volume of controlled drugs stolen. Even as pharmacies buy state-of-the-art safes and advanced security systems, criminals find new ways to break in and steal these drugs.

Current Laws an Ineffective Deterrent

We found that the perpetrators who are caught and convicted typically receive light punishments, even as repeat offenders. As we tracked offenders through the justice system, we learned that many received two years or less of jail time and that many had previously committed the same crime elsewhere in the state. **Repeat offenders in robberies, burglaries and thefts targeting controlled drugs must receive sentences appropriate to the extremely harmful qualities of the goods they steal and the decimating impact of stolen drugs on our society.**



Opioid Monitoring & Reporting Must Be a Shared Responsibility

As a systemic social and health-care crisis, opioid abuse requires a comprehensive team response from manufacturers, distributors, prescribers, dispensers and patients. Some groups support a mandate that only pharmacies check patient names in the PMP database before dispensing a controlled drug. **Pharmacies should not bear all the monitoring and reporting burden simply just because they are the endpoint of the distribution system. Pharmacists don't prescribe high-risk painkillers, nor treat the patients for whom these addictive drugs are abundantly chosen.** They should not be forced to second-guess prescriber decisions through the PMP. As the prescribers of these high-risk drugs, physicians are the true gatekeepers because only they can determine if any patient has a legitimate need for them.

All prescribers — physicians, ophthalmologists, dentists, veterinarians — should be required to search the PMP database at the time of writing a controlled prescription. It serves no purpose to require pharmacists to enter a report in the PMP database if physicians are not required to look at that data before they prescribe high-risk drugs. On Feb. 10, TPBC sent a letter to the Texas State Board of Pharmacy supporting the current seven-day requirement for reporting the dispensing of controlled substances to the PMP. (TPBC also supports the mandatory enrollment of both prescribers and pharmacists in the PMP at the time of licensure or license renewal.) Some groups have advocated that reporting be required every three days or even daily, which TPBC opposes as unnecessary and burdensome.

After its review of TSBP and discussion of the opioids monitoring issue, the Texas Sunset Commission recommended in November that Texas pharmacists be required, starting in September 2018, to search the PMP database before dispensing certain controlled drugs. TSC also recommended requiring pharmacists to report the dispensing of those drugs to the PMP database within one business day of dispensing. TPBC believes, that if daily reporting comes to pass, technology may by 2018 enable the live-time, automated reporting of controlled drug dispensing to the PMP.

Our lawmakers must reduce careless prescribing and dispensing of dangerous opioids while toughening criminal penalties for those who are repeatedly victimize pharmacies and distributors to feed the illegal opioid pipeline. **We will be highly vigilant in advancing our positions on these issues and ensuring the equitable treatment of pharmacists.**

HOT LIST: These Other Top Pharmacy Issues Are on Our Radar

Clawback Prohibition

TPBC will lead the way in efforts to prohibit PBM clawbacks.

Expanded Immunization Authority

TPBC supports incremental expansion of pharmacists' immunization authority in current vaccine classes.

Franchise Taxes

TPBC will actively work to secure additional reductions in the marginal tax rates as well as expanded exemptions.

Medicaid Formulary

PBMs want control of the Medicaid formulary; **TPBC supports a single Vendor Drug-managed formulary with a targeted 5% - 7% increase in the program's generic utilization rate.**

Medicaid Rx Payment Reform

We can't count out another longshot attempt to "carve out" pharmacy from Medicaid managed care.

Medication Synchronization

TPBC supports legislation to allow a pharmacist to synchronize a patient's maintenance medications and to be reimbursed for filling the partial prescriptions needed to synchronize meds.

NADAC Reimbursement Methodology

TPBC opposes a switch from MAC to NADAC as the basis for pharmacy reimbursement in Medicaid managed care. Failure to win a separate dispensing fee of \$9 - \$12 would be an economic disaster for Texas pharmacy.

Opioid Monitoring & Restrictions

TPBC supports shared responsibility among MDs and pharmacists on opioid prescription monitoring and opposes any attempt to make pharmacies the only monitoring point in the opioid distribution channel.

Pharmacy Crime

TPBC will file legislation to secure stronger criminal penalties for burglary/robbery of pharmacies.

Pharmacists' Scope of Practice

Legislation is likely to authorize collaborative drug therapy management with prescriptive authority for pharmacists.

Physician Dispensing

Expect the return of bills to allow dispensing of select aesthetic drugs by dermatologists and ophthalmologists.

Provider Status & Compensation

TPBC supports expanded coverage and payment for patient-care services and expansion of compensable services delivered in the role of a health-care provider.

Step Therapy

Legislation will seek to reduce the medication categories for which insurers may require step therapy.

"Tech Check Tech"

Legislation will be filed to authorize technicians with advanced training to refill automated dispensing machines, prepare unit dose batches and verify refills on limited classes of medications.

Technician Supervision Ratios

TPBC opposes any increase in the 1:4 pharmacist/technician ratio adopted for Class A & B pharmacies in 2014.

Telemedicine Expansion

Legislation will be filed to expand telemedicine by allowing physicians to establish the MD-patient relationship by remote communication. Current law requires an existing relationship prior to telemedicine care.

Telepharmacy Expansion

Legislation will be filed to authorize a class of remote retail pharmacies in medically underserved areas that are staffed by advance-trained technicians and monitored remotely by a pharmacist.

Transaction Fees

TPBC will be vigilant to any bill or amendment that attempts to repeal or weaken the provisions of the landmark transaction fee ban we passed in the 2015 session.

Texas State Pharmacy Board's Legislative Priorities

In mid-November, The Texas State Board of Pharmacy published its own list of recommended changes in Texas law governing pharmacies and pharmacists. Here are the notable items:



- Self-Directed Semi-independent Agency Status
TSBP will seek legislative authority to be a semi-independent agency that self-directs its own activities and sets its own budget.
- Require Submission of "Zero" Report for Controlled Substance Prescriptions
TSBP wants to require pharmacies to file a "Zero" report every seven days to the Prescription Monitoring Program (PMP) even if no controlled drugs are dispensed, as most other states require.
- Revocation of Pharmacy License for Failure to Open Within 6 Months
Add Section 560.105 of the Texas Pharmacy Act (TPA) to allow the Board to revoke a pharmacy's license to operate in Texas if the pharmacy does not open within six months of license issuance.
- Authority to Issue Citations for Simple Violations
TSBP will seek authority to issue citations to licensees & registrants in some situations without holding a disciplinary hearing, such as in the case of a technician working with an expired registration.
- Pharmacy Practice in Small & Rural Hospitals
TSBP wants to amend the TPA to reduce the size of small hospitals that may operate a Class C Pharmacy without a full-time pharmacist from 100 beds to 50 beds. It will also seek to repeal Section 562.1011, which allows nurses to supervise pharmacy technicians in certain rural hospitals. Technology now allows remote pharmacist supervision.
- Grounds for Discipline of Pharmacies & Pharmacists
The Board will seek to expand the list of violations of the Health & Safety Code that are grounds for discipline of pharmacies and pharmacists to include offenses concerning Simulated Controlled Substances, Abusable Volatile Chemicals and OTC sales of Ephedrine, Pseudoephedrine and Norpseudoephedrine.

Free Resources for Monitoring the Texas Legislature & Congress

Texas Legislature Online

www.capitol.state.tx.us

This free resource isn't the fastest or most feature-laden, but it lets you search for legislation by lawmaker, bill number or keywords, as well as create and maintain tracking lists. When the session gets busy, it can be slow to update.

Texas House of Representatives

www.house.state.tx.us

View live and recorded video feeds of committee hearings; get House news, biographical and contact information for House members; check daily calendars and view schedules of Capitol/House events, meetings and broadcasts.

Texas Senate

www.senate.state.tx.us

The Senate's website has content very similar to the House's, but includes a Spanish-language version of the site.

Texas Legislative Council

www.tlc.state.tx.us

TLC is a state entity providing legal, research and analytical support to the Legislature. It's a great reference source for legislative procedures, reviewing research and reports on key issues and accessing summaries of past sessions.

Legislative Reference Library of Texas

www.lrl.state.tx.us

The official research arm of the Legislature is the best place to access Texas statutes, the Texas Constitution and the Texas Administrative Code, as well as the legislative archives.

Texas Tribune

www.texastribune.org | www.texastribune.org/directory

The *Tribune* has among the most comprehensive and objective online news coverage of the Texas Legislature. Be sure to check out the **Elected Officials Directory**, which has extensive information about all 181 legislators.

Congress.gov

A comprehensive site for finding and tracking federal legislation, House/Senate calendars, and members of Congress.

Bills Affecting Pharmacy

Legislation Can Be Filed Through March 10 — Here's What We're Tracking So Far:



HB 75 | Dan Flynn, R-Van

Caption: Relating to the education and examination requirements for pharmacy technicians.

Intent: Would require the Texas State Board of Pharmacy to accept Pharmacy Technician certification exam results from nationally accredited organizations in addition to the Pharmacy Technician Certification Board.



HB 120 | Sarah Davis, R-West University Place

Caption: Relating to non-medical exemptions from immunization requirements.

Intent: Would remove the personal conscience/religious belief exemption to required elementary and secondary school vaccinations, replacing it with a broader category of "non-medical" reasons.



HB 126 | Sarah Davis, R-West University Place

Caption: Relating to an educational module certificate requirement for certain immunization exemptions.

Intent: Would require state to develop an online vaccine education module that provides CDC-based information on vaccine effectiveness and safety; would require those seeking exemptions to complete the module.



HB 241 | Donna Howard, D-Austin

Caption: Relating to a health care practitioner counseling requirement for persons claiming an immunization exemption on the basis of conscience, including a religious belief.

Intent: Would require those seeking immunization exemption to receive counseling from a health-care professional.



HB 243 | Donna Howard, D-Austin (Same as SB 54 by Zaffarini)

Caption: Relating to the immunization data included in and excluded from the immunization registry.

Intent: Would remove the mandate of obtaining permission to enter personal vaccination data in the registry.



SB 72 | Jane Nelson, R-Flower Mound

Caption: Relating to the decrease of the rates of the franchise tax . . . and the expiration of that tax.

Intent: Would trigger specified current-year decreases in the marginal rates of the state franchise tax if the state's official biennial revenue estimate projects a sufficient surplus.



SB 112 | Don Huffines, R-Dallas

Caption: Rel. to decreasing the rates of the franchise tax under certain circumstances & the expiration of that tax.

Intent: Would use excess revenue to incrementally scale back and eliminate the franchise tax starting in 2020.



SB 124 | Don Huffines, R-Dallas

Caption: Relating to the Internet broadcast of open meetings of the Texas State Board of Pharmacy.

Intent: Would require TSBP to provide a live online audio & video broadcast of all its open meetings and to provide an accessible online archive of all past meeting broadcasts.



SB 269 | Jose Menendez, D-San Antonio

Caption: Relating to authorizing the possession, use, cultivation, distribution, transportation, and delivery of medical cannabis for medical use....

Intent: Decriminalizes the cultivation, transportation, delivery and possession and use of medical marijuana — or the sale, possession or use of related products, byproducts and paraphernalia.



SB 270 | Brandon Creighton, R-Conroe

Caption: Relating to health benefit plan coverage for abuse-deterrent opioid analgesic drugs.

Intent: Would require commercial health plans in Texas to provide coverage for abuse-deterrent opioid drugs.



SB 293 | Juan Hinojosa, D-McAllen & Charles Schwertner, R-Georgetown

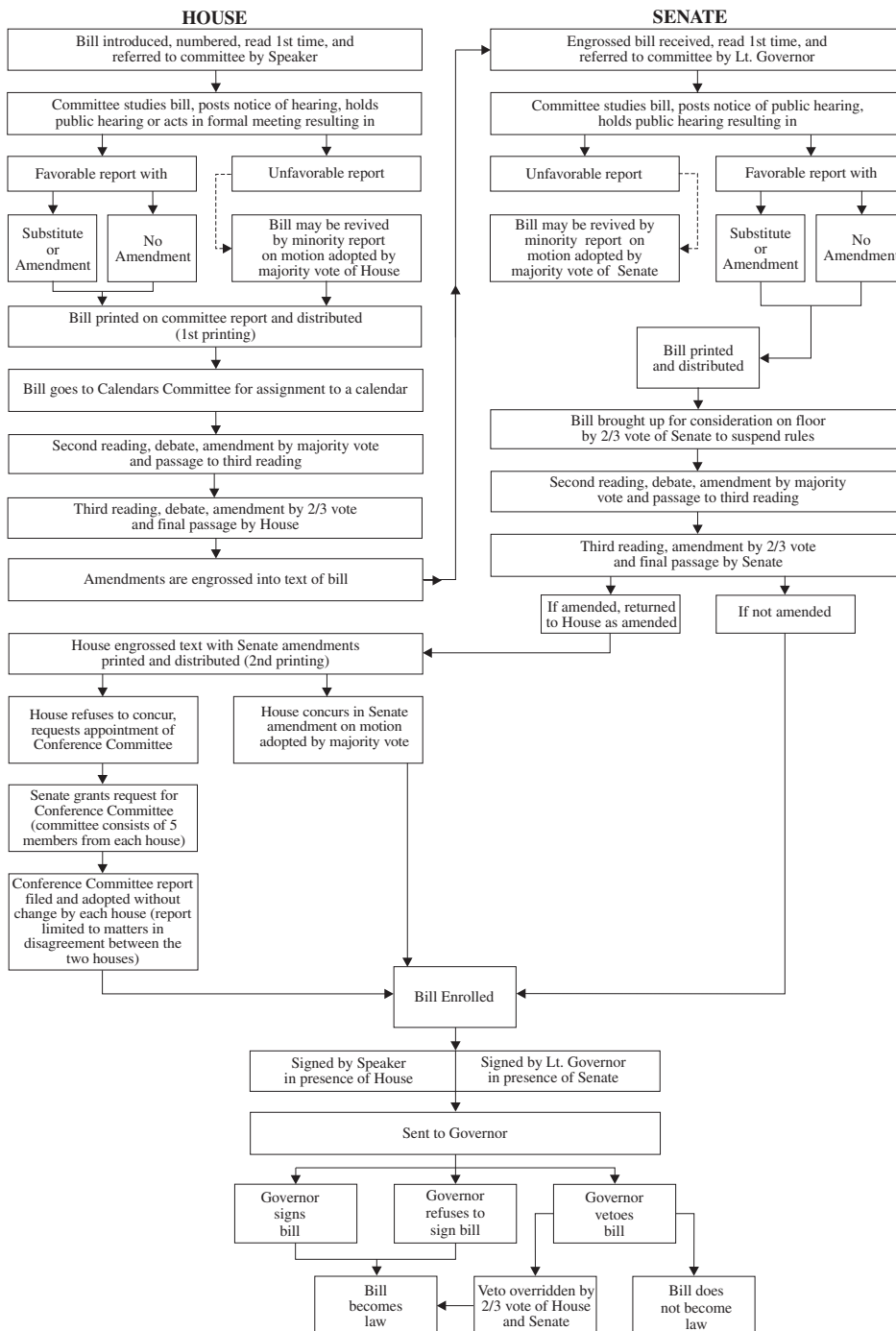
Caption: Rel. to the proof req. to impose payment holds in certain cases of alleged fraud by Medicaid providers.

Intent: Would require the HHSC commissioner & the OIG to define standards for what constitutes an ongoing significant financial risk to the state and a threat to the integrity of Medicaid.



How a Bill Becomes Law

The Texas Legislative Process



Major Session Dates & Deadlines

Each regular session, the Texas Legislative Council publishes a calendar, "Deadlines for Action Under House & Senate Rules," that shows end-of-session deadlines established under House and Senate rules. Those deadlines are generally determined at the start of each regular session.

The deadlines listed below are established by state law:

Wednesday, Nov. 9, 2016
Prefiling of legislation for the 85th Legislature begins.

SESSION BEGINS

January 10, 2017 – 85th Legislature convenes at noon.

Friday, March 10, 2017 (60th day) Deadline for filing bills and joint resolutions other than local bills, emergency appropriations, and bills declared an emergency by the governor.

Monday, May 29, 2017 (140th day) Last day of regular session; bill corrections only in House and Senate.

SESSION ENDS

Sunday, June 18, 2017 (20th day after final adjournment) Last day governor can sign or veto bills passed during the regular legislative session.

Monday, Aug. 28, 2017 (91st day after final adjournment) Date that bills without immediate enactment or specific effective dates become law.

Advocacy Basics:

How to Communicate Effectively & Build Your Influence With Legislators

Always...

1. Know your legislator — What are his/her major causes? Any expertise in health-care or pharmacy issues?
2. Make an appointment — Legislators are often unavailable if you drop in unannounced. You often will speak with staff instead. Treat them with respect — some have considerable influence & expertise.
3. Be prepared — Know relevant facts & talking points so you will be clear, factual and to the point.
4. Be focused & specific — State your purpose up front. Address one issue at a time. Be brief & specific with your position/concerns. If you are addressing specific legislation, identify the bill number.
5. Be non-partisan & positive — Don't attack the opposition. Sell your own position instead.
6. Offer solutions — Avoid complaining. Raise your concerns, but tell your legislator what solutions you advocate.
7. Make your legislator's job easier — Leave a concise fact sheet or issue summary. Know the opposing arguments and frequently asked questions and have answers ready to go.
8. Be courteous — Thank the legislator up front for his/her valuable time. Do it again before you leave.
9. Send a prompt thank-you letter that reinforces your name, organization & issues. Include your business card.

Never...

1. Interrupt a busy legislator — call again later.
2. Exaggerate your importance or connections — Your credibility may not recover.
3. Aggressively press for an answer or commitment.
4. Present a laundry list of issues — it dilutes the value of your key focus.
5. Moralize or question motivations — Stick to facts and objectives.
6. Use jargon — Few lawmakers know what "PBM" or "MAC" mean.
7. Send form letters or e-mails — Personalize all communications.

If You Testify...

1. Identify yourself, the group you represent, the bill number and your position in support or opposition.
2. Be brief and accurate — Stick to the stated time limit. Use personal examples to make your point.
4. Do not make statements or claims you cannot substantiate.
5. Bring printed copies of your testimony with your name and contact info.
6. End by thanking the committee and chairperson.

Want More Clout?

Here's What it Takes to Have Real Influence on Lawmakers

If you want to visit your representative or senator once every few years and send an occasional email or letter, that's fine. But that level of interaction won't get you optimal access or ability to influence decisions. Here's what it takes:

Know the Issues

Keep abreast of issues affecting independents and TPBC's position on them. Be sure to read TPBC's newsletters and reports — we work year-round on pharmacy issues and will keep you in the loop.

Be Part of the Team

Use the form on the next page to join our grass roots contact network so we can coordinate our efforts with yours, provide you support and let you know when we need your help.

Be a Useful Resource

Don't call on legislators only when you want something — stay in frequent contact so they know and value you as a resource on pharmacy issues. Host them at your store and invite the media. Offer to be a personal pharmacy adviser.

Show Your Support

Nothing shows commitment and support to a legislator like a campaign contribution. **Nothing shows you are more serious about politically supporting your business model and TPBC like giving to APRxPAC. The form is on page 9.**



TEXAS PHARMACY BUSINESS COUNCIL

IT TAKES AN ARMY TO WIN A WAR!

**Join TPBC's Grassroots Contact Network
and Help Us Fight for Your Business & Your Patients!**

Despite our successes in the 2015 session, we have many challenges. Powerful, well-funded interests work daily to cut payments to pharmacies, stifle competition and restrict patient rights. These vital issues are often decided by elected leaders who may not know the facts or understand your role as a health-care provider.

The Texas Pharmacy Business Council is the strongest advocacy voice for independent pharmacy in Texas. But we can't succeed without your support, starting with your relationships with elected state leaders. No one has more influence than a voting constituent, so your role is critical:

- ▶ Can you testify effectively about the issues facing community pharmacy?
- ▶ Can we count on you to call, email or visit your elected officials when key issues are up for a vote?
- ▶ Can we depend on you to use any relationships or influence you have with legislators to help us defend the interests of community pharmacy and our patients?
- ▶ Can we count on you to contribute to APRxPAC, the political action committee of American Pharmacies?

Please fill out the form below to send us your contact information, including an "anytime" phone number that rings directly to you. Thanks for your support – your involvement and relationships will be a vital contributor to our success during the interim and in the 2017 legislative session.

(Please print clearly)

Name: _____ Pharmacy Name: _____

Address _____ City _____ State _____ ZIP _____

Primary Phone: _____ Alternative Phone: _____ FAX: _____

Primary Email: _____

Do You contribute to APRxPAC? YES NO – Please send me an APRxPAC contribution form

Please indicate below any elected Texas leaders with whom you have personal and/or professional relationships.

State Senator: _____ State Representative: _____

Statewide (Gov., Lt. Gov., etc.): _____

U.S. Senator: _____ U.S. Representative: _____

What independent pharmacy issues are most important to you? _____

Comments? _____

Please Fax or email this form to Michael Wright at TPBC:

mwright@txrxCouncil.org | FAX: 512-992-1391

Texas Pharmacy Business Council

823 Congress Ave. Suite 650 | Austin, TX 78701 | 512-992-1219 | FAX: 512-992-1391



Run With The PAC



APRxPAC

Join the growing pack of APRx members standing up for our political action committee in our quest to double its size this year! Donations are used to advance the political power of Texas independent pharmacy. Contributions are not deductible for federal tax purposes.

To pay by credit card, fax completed form to **512-992-1391**.

For checks, please make payable to "APRxPAC" and mail with this completed form to:
823 Congress Ave., Suite 650 | Austin, TX 78701

YES! I Want to Support APRxPAC Now

Donations to APRxPAC continue on a recurring basis until cancelled in writing.

Name: _____ Pharmacy Name: _____

Position: _____ Home Address: _____

City _____ State _____ ZIP _____

Phone: _____ FAX: _____ Email: _____

CREDIT CARD PAYMENTS: Visa MC AMEX

Monthly Contribution of: \$250 \$100 \$50 Other Amount: _____

Annual Contribution of: \$5,000 \$2,500 \$1,000 \$500 \$365 (\$1 a Day)

Card #: _____ Exp. Date: _____ Security Code: _____

Name on Card: _____ Signature: _____

QUARTERLY OR ANNUAL DEDUCTION:

I authorize American Pharmacies to deduct the contribution elected below from my rebate payment:

Annual Deduction of: \$5,000 \$2,500 \$1,000 \$500 \$365 (\$1 a Day)

Quarterly Deduction of: \$1,000 \$ 750 \$ 500 \$250

Note: Contributions made by rebate deduction are considered taxable income and you must report them to the IRS under your SSN, not your pharmacy's tax ID number.

Name: _____ Signature: _____

Please Check This Box to Verify The Following:

1. I am making this contribution with my own **personal** funds. **(Corporate contributions are not allowed.)**
2. I am a U.S. citizen or legal resident and I am not a federal contractor.
3. I am not being reimbursed or compensated for making this contribution.
4. I understand that my contribution is subject to the provisions of state and federal campaign finance laws.
5. I understand that my contributions will continue on a recurring basis until such time that I instruct APRxPAC in writing to halt those contributions.