

A Balanced Approach to Preferred Networks Pays off Big for APRx Elevate Members



Our competitors like to boast to independent pharmacy owners that their PSAOs participate in a lot more preferred networks than does our **Elevate Provider Network**, the PSAO of **AmerisourceBergen**. More is automatically better, it would seem.

AmerisourceBergen instead models and evaluates payer contracts with a balanced strategy that differentiates member access from provider preference, considers both access and margin, and is better for your pharmacy.

Elevate members receive an average of \$6-\$7 more per generic prescription on Aetna claims than do members of its two largest PSAO competitors.

That's why Elevate member pharmacies realize an average of \$6-\$7 more per Aetna/Coventry/First Health generic prescription than its two largest competitors' pharmacies. And fewer generic claims were paid at a loss for Elevate members accepting standard rates than for members of PSAOs electing Aetna's preferred rates.

New CMS policies added transparency to the reimbursement concessions that pharmacies must accept to join Aetna's preferred network. Confronted with the magnitude of those concessions, some PSAOs are rushing to provide limited "bailouts" to reimburse their customers, and are requesting emergency meetings with Aetna to manage the impact of unsustainable reimbursements.

Elevate's Balanced Approach

The Elevate Provider Network carefully considers the assumptions of preferred networks, taking a deeper look at the math behind those assumptions. **That methodology produces an inescapable conclusion: Participating in preferred networks with reimbursement rates that are too aggressive results in profit losses that are unsustainable for independent pharmacies.** Copay incentives motivate only a limited number of patients to move to preferred pharmacies, and will not offset the impact of generics dispensed at a loss.

Elevate takes the balanced approach, maintaining access to patients while negotiating a better Generic Effective Rate (GER) than what is initially offered. It carefully and selectively considers the plans at the preferred or standard level based on the terms of participation and patient incentives—ensuring APRx members remain profitable. Elevate reviews claims and submits reimbursement challenges as appropriate to ensure members get the maximum payment possible. **In Aetna's case, participating in the standard network means access to the same number of lives as in the preferred network, but at more sustainable rates.**

Sustainable reimbursement rates are necessary for pharmacies to take care of patients and operate profitably. **That is Elevate's balanced approach in action—the right balance of competitiveness, profitability and access to patient lives.**

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APRx & NM Members Launch Advocacy Council

Legislative and regulatory advocacy for independent pharmacists in New Mexico has taken a big step forward with the formation of the APRx-backed New Mexico Pharmacy Business Council (NMPBC).

The APRx Board of Directors voted in December to create NMPBC to advance the advocacy interests of independent pharmacists in the state. NMPBC is overseen by a 5-member Board of Directors and is jointly funded by APRx and New Mexico shareholders. The five Board members are:

- David Lansford, R.Ph. | Clovis | Chairman
- Danny Cross, R.Ph. | Carlsbad | Vice Chair
- Ashley Seyfarth, R.Ph. | Bloomfield | Sec.-Treasurer
- Neal Dungan, R.Ph. | Carlsbad
- Harvey McCroskey | R.Ph. retired | Santa Fe

Like the highly successful Texas Pharmacy Business Council, NMPBC is an independent subsidiary of APRx that focuses solely on legislative and regulatory advocacy. The five-member NMPBC Board sets legislative policy and goals and has already hired its own well-respected lobbyist, Minda McGonagle.

"Our growth in New Mexico reached the point where we want to commit significant resources to focused advocacy for independents there," APRx President Mike Gohlke said.

Clovis pharmacist David Lansford, who owns Roden-Smith Pharmacy and serves as the city's mayor, said a top concern of the new group is the economic viability of independent pharmacies in the state.

"The economic environment for independents is increasingly more challenging here," Lansford said. "The New Mexico Pharmacy Business Council is poised to strengthen the viability of the Independent Pharmacies here in New Mexico."

NMPBC hosted a Jan. 23 Albuquerque reception attended by 60 independent pharmacists and supporters at the New Mexico Pharmacists Association Mid-Winter Meeting. Board members and McGonagle attended, as did APRx staff, NMPHA Executive Director Dale Tinker and ex-State Rep. John Heaton, a former pharmacist and owner in Carlsbad.



Nathan Rawls and Marissa Lansford of APRx (left) present \$5,000 to NMPHA leaders: Outgoing President Patrick Griego (center), Incoming President Michael Raburn and Executive Director Dale Tinker (right).



About 60 pharmacists and other guests attended NMPBC's July 23 reception in Albuquerque.



David Lansford



The reception, which was supported and funded by American Pharmacies, provided a forum in which the new group introduced its leaders, and shared its values and commitment to protecting the business model of independent pharmacy in New Mexico. The group discussion included the current 30-day fiscal session of the New Mexico Legislature and the upcoming 90-day regular session in 2017.

APRx Donates \$5,000 to NMPHA

To further demonstrate its strong commitment to pharmacy advocacy in New Mexico, APRx donated \$5,000 to NMPHA. APRx Key Accounts Manager Nathan Rawls and Business Development Manager Marissa Lansford presented a ceremonial check to NMPHA leaders on Jan. 24 during the second day of the group's 2016 Mid-Winter Meeting.



Business Dynamics Plus Family Fun at June Retreat

Our 2016 Shareholder Retreat is a summertime spectacular June 9-11 at the family-friendly La Canterna Hill Country Resort in San Antonio, which blends ranch-themed luxury with fun for all ages. From swimming, golf and a spa to fine dining, upscale shopping and Fiesta Texas next door, La Canterna has it all.

2016 Registration Fees

The 2016 Retreat is 3 months earlier this year, and early discount rates end on April 9, 2016. Register early and avoid the fee increases that kick in April 10!

3-Day Conference w/Thursday CE Through 4/9/16:

Shareholder/Member & 1 Guest	\$150
Non-member & 1 Guest	\$225
Vendor/Exhibitor & 1 Guest	\$225

2-Day Conference (No Thursday CE) Through 4/9/16

Shareholder/Member & 1 Guest	\$100
Non-member & 1 Guest	\$150
Vendor/Exhibitor & 1 Guest	\$150

CE Created for YOUR Needs

From websites/social media to front-end retailing to financial planning, we've got CE sessions that make a difference in your independent practice and profits.

35+ Exhibitors & Expert Consults

Our show keeps growing and we're expecting 36+ top-quality exhibitors this year. AmerisourceBergen experts will be on hand to conduct free breakout sessions to help you with reimbursement issues, network participation, front-end and other challenges.

\$239 Rooms & First Night Free!

The luxurious 498-room La Canterna Resort sits atop soaring ridges west of San Antonio with spectacular views of the Hill Country and downtown skyline.

Two championship golf courses—including the renowned Arnold Palmer course—wind through majestic live oaks and limestone creeks. The seven-story property has two water slides and five pools for kids of all ages. It is a short, free shuttle ride to Fiesta Texas next door and to the nearby Shops at La Canterna.

The \$239 group rate for a deluxe king or double includes in-room wifi. (Kids stay free if extra bedding not needed!) Register for the Retreat and book your hotel room by April 9, and the first night of your stay is on us! Book your room online at <https://gc.synxis.com/rez.aspx?Hotel=60706&Chain=5156&arrive=6/8/2016&depart=6/12/2016&adult=1&child=0&group=AMF0616A> or call 855-499-2960 and use group rate code AMF0616A.

Tee It Up for Fun & Prizes

We invite you to join our Shareholder Retreat Golf Tournament on Friday, June 10. The foursome scramble kicks off at noon at the scenic La Canterna Golf Club with a \$75 entry fee and \$600 in prizes.

If you have a preferred foursome, let us know when you register online. Don't have a foursome—don't worry, we'll group you.

Register, Connect & Learn More:
<https://aprxretreat.eventbrite.com>



Audit Help Available to Elevate Network Members

Members of the Elevate Provider Network receive many benefits: help desk support, centralized payment processing and, of course, contract negotiation services. A lesser-known benefit is audit assistance, with both professional and educational support provided.

Audit assistance includes pre- and post-audit services. Elevate has subject matter experts to help guide its member pharmacies through the audit process. Additionally, Elevate staff may contact PBM auditors to help with audit issues or just to ask questions.

Elevate Provider Network monitors recent audit trends from numerous PBMs and maintains a list of helpful tips and guidelines that can minimize audit impacts.

For example, here are some common audit triggers:

- High claim volume
- High compound submissions rate
- High claim reversal rate
- High DAW-1 submission on multisource brands
- Incorrect DEA/NPI numbers
- Quantity vs. day supply
- High controlled substance dispensing

The Elevate Provider Network has created an in-depth audit kit with the above information and more. If you are an Elevate Provider Network member and would like to request a copy the audit kit or just have audit-related questions, please email elevate_audits@amerisourcebergen.com.

Also, please refer to American Pharmacies' comprehensive audit assistance document: What You Need To know About Audit Reform. It is available online at Aprx.org/Issues & Advocacy/Audits.

Register Now for 2016 ThoughtSpot Conference



Registration is open for the annual tradeshow sponsored by AmerisourceBergen and Good Neighbor Pharmacy. The conference takes place July 27-30 at the MGM Grand Hotel in Las Vegas and offers:

- **Education** – CE, certificate courses & seminars on many topics
- **Buying Opportunities** – Exhibitors offering special pricing incentives for Branded, Generic, OTC & other products.
- **Networking events & programs** designed to drive interaction and relationship-building.

ThoughtSpot 2016 opens July 27 with the General Session from 5-7 p.m., followed by the kickoff party at the MGM Grand pool with live music, fabulous food and relaxed mingling with your peers. CE sessions are scheduled daily and the Exhibit Hall is open from 9 a.m.–5 p.m. on July 29 and from 10–4 on July 30. The closing night party is 7-10 p.m. on Saturday, July 30.

Registration packages—which include hotel, meals and all events & CE for you and one guest—range from \$1,494 for three nights to \$1,845 for five nights. Register at <http://thoughtspot2016.com> or email thoughtspot@amerisourcebergen.com for more information.

Don't Miss APRx Town Hall Meeting During ThoughtSpot

American Pharmacies will once again share its powerful value proposition with attendees in a town hall meeting that highlights our economic value, legal activities and strong commitment to advocacy via Texas Pharmacy Business Council and New Mexico Pharmacy Business Council. We'll provide the time and location when details are finalized.



Know Your audit rights under the law!

Texas has some of the toughest audit protections in the nation as a result of TPBC's HB 1358, which took effect Sept. 1, 2013. The law established fair and reasonable standards for pharmacy audits conducted by health plans and PBMs.

The law does not apply to audits under Medicaid, Medicare, CHIP, TRICARE, workers' comp, or self-funded health plans under ERISA. Audits under these plans are governed by federal law and regulations.

APRx Plaintiffs Take CVS Appeal to Supreme Court

The six APRx pharmacies that sued CVS Caremark for alleged trade secret misappropriation and RICO violations in 2010 have taken their long-running lawsuit to the last available avenue of appeal.



On Dec. 21, the six pharmacies filed a petition for a writ of certiorari with the U.S. Supreme Court, asking it to overturn lower-court rulings that the plaintiff pharmacies must bring their claims against pharmacy giant CVS Caremark only in a private arbitration.

The petition highlights the lack of uniformity among lower courts across the country in applying the correct legal standard to arbitration issues like ours. Different courts across the country are applying different legal standards in similar cases, so this is an issue ripe for clarification by the U.S. Supreme Court.

Partnership With ABDC Driving Growth & Success

A Message FROM THE President



Valued Shareholders,

It's just a little more than a year since we signed a landmark six-year contract with AmerisourceBergen that is propelling us into an era of unprecedented growth and prosperity. The powerful economics of our sole-source contract, coupled with the expertise and hard work of our staff and the support of ABDC, is producing rapid growth—and, most importantly—**tremendous economic benefits for you, our shareholders.**

For the second straight fiscal year, **we are delivering outstanding year-end rebates** to you on top of monthly rebates and purchasing incentives that are second to none. In 2015, we more than doubled our shareholder base in New Mexico and Oklahoma. Our rapid expansion in the Land of Enchantment triggered our creation of the New Mexico Pharmacy Business Council in partnership with our members there. Like Texas Pharmacy Business Council, NMPBC is proof of **our unwavering commitment to the strongest advocacy for our members.**

You can read on page one about how the **analytical expertise and strategic foresight of ABDC's Elevate team** is delivering far better reimbursements for Elevate members in some major health plans compared to the members of some other PSAOs. ABDC proves at every turn that its resources and its commitment to APRx are changing the game. From their signage offer to our members to their business coaching and their unique generics offering for APRx, **they are committed to our collective success.**

You can consult AmerisourceBergen's experts about their programs during special breakout sessions at our **2016 Shareholder Retreat**. This year's event moves to a family-friendly June date at the beautiful La Cantera Resort in San Antonio. Please join us there for a tremendous time of learning, connecting and celebrating!

On behalf of our Board of Directors and staff, thank you for your continued membership and support, which empower and motivate everything we do.

Mike Gohlke, President
American Pharmacies

At TPBC Request, AG Opinion Sought on AWP Enforcement

At TPBC's request, two powerful pharmacy allies in the Legislature have asked Texas Attorney General Ken Paxton to rule on the validity of the state's **Any Willing Pharmacy Law**, which has been unenforced since 1991.

Rep. Todd Hunter of Corpus Christi filed the initial request and was subsequently joined by **Sen. Charles Schwertner** of Georgetown, and both lawmakers' letters have now been combined into a single request. TPBC legal counsel assisted both legislators in preparation of their AG requests. **An official opinion from the AG's office is due by July 25, Paxton stated in his reply letter.**

The Fifth U.S. Circuit Court of Appeals ruled in 1997 that ERISA pre-empts the Texas AWP law. **However, the U.S. Supreme Court ruled in 2003 that ERISA did not pre-empt Kentucky's AWP law, and a 2008 Fifth Circuit decision reinforced that ruling. Despite those rulings, Texas Department of Insurance does not enforce the law.**

Insurance plan designs increasingly restrict patient access to pharmacies, and TPBC strongly believes that network adequacy requirements are an insufficient to guarantee patient access to quality pharmacy care.



Rep. Hunter

"Network adequacy standards are no substitute for AWP and simply don't protect patient access to pharmacy care," TPBC Executive Director Michael Wright said. "We certainly hope that Attorney General Paxton agrees that there is no legitimate legal barrier to enforcing this law."

TPBC has worked with TDI extensively since 2013 to identify enforcement challenges, and we filed legislation last year that would strengthen the AWP law.

In his letter to Paxton, Hunter said the 2003 Supreme Court decision effectively reversed the 1997 Fifth Circuit ruling: "the Texas AWP law is and has been enforceable....It is clear to me that the long term benefits of enforcing the existing Texas AWP law will benefit Texas patients and taxpayers."

Requests for AG opinions can be submitted only by a sitting chair of a legislative committee. **Hunter chairs the powerful House Calendars Committee and Schwertner chairs the Senate Health & Human Services Committee.**

A longtime ally of TPBC and independent pharmacy, Hunter **carried our groundbreaking prompt pay and audit bill in 2011 and our HB 1358 in 2013, which created some of the nation's strongest audit protections. Hunter, like Schwertner, has twice been honored with TPBC's Champion of Texas Pharmacy Award.**



Argus Loses Bid to Dismiss Trans Fee Enforcement Case

A state judge has denied Argus' Motion for Summary Disposition of charges brought against it in a TDI enforcement action triggered by TPBC's referral of transaction fee violations by the giant PBM.

Administrative Law Judge Sarah G. Ramos denied the PBM's motion in a Jan. 29 ruling that cited the amicus brief that APRx submitted in support of TDI. The judge also ordered Argus and TDI to submit preferred dates and prepare for a hearing on the merits of the case.

TDI filed an enforcement action against Argus four weeks after TPBC provided evidence in June of allegedly illegal transaction fees being charged by the PBM. **A license revocation hearing was held Dec. 4,** at which Argus aggressively contested TDI's charges and sought a Summary Disposition, asserting that the 2003 law prohibiting the direct or indirect assessment of transaction fees by health plans does not apply to PBMs.

In rebuffing Argus, Judge Ramos cited APRx's brief: "... PBMs operate exclusively under the health benefit plans to which Code §1213.005 applies, because PBMs would have no authority to manage claims without such plans. ... The term "indirectly" in §1213.005 would serve no purpose and its plain meaning would lead to an absurd result if PBMs were allowed to charge a fee for each transaction while the insurers were prohibited from doing so."

She concluded: "The ALJ denies the motion ... because Argus acted as an agent for insurers, was not exempt from the prohibition against collecting a fee for adjudicating claims, and collected those fees from pharmacies."

TPBC Wins a Small, Quick Victory with Medicaid FFS Pricing Update

When Michael Wright learned from a shareholder on Jan. 21 that there had been an across-the-board price increase on Vyantse products and that Texas Medicaid Fee For Service had not updated its prices on the drug, **he acted quickly to address the inequity.**

Wright called Texas Vendor Dug to report the pricing issue, and received a return call the next day informing him that the prices had been updated. Some APRx members have already reversed underpaid claims on Vyantse and have received corrected reimbursements!

Updated Facts on Medicaid Re-enrollment CMS Extends Provider Deadline to September 25

Provisions in the Patient Protection and Affordable Care Act require the periodic enrollment revalidation of all providers participating in the Medicare and Medicaid health insurance programs. **Texas Medicaid providers that enrolled before January 1, 2013, must re-enroll in the program by September 25, 2016. NOTE: CMS just announced a six-month extension of the previous March 24 re-enrollment deadline.**



Failure to meet the revalidation deadlines can result in the suspension or cancellation of your billing privileges in these programs.

To comply with federal law, all Medicaid providers are required to re-enroll at least every three to five years:

- DME providers are required to revalidate enrollment information at least once every three years; and
- All other provider types must revalidate enrollment at least once every five years. During re-enrollment, provider screening will be repeated.

The Provider Enrollment Portal operated by the Texas Medicaid & Healthcare Partnership (TMHP) has been updated with new features that allow you to upload supporting documentation and electronically sign the agreements after you have completed them.

For additional guidance please visit the TMHP Provider Re-enrollment page at tmhp.com/Pages/Topics/ACA.aspx. For help re-enrolling, contact a TMHP provider enrollment representative at 1-800-925-9126, Option 2.

Re-enrollment Fee Requirements

TPBC sought and has received clarification from Texas HHSC on whether Texas pharmacies enrolled in Medicare must also pay a fee to re-enroll in Texas Medicaid. TPBC had heard from several Texas pharmacists who were confused and upset about having to pay the \$553 fee.

The official CMS guidance states that pharmacies that have paid the applicable fee to CMS to enroll or re-enroll as a Medicare pharmacy provider do not have to pay a fee to any state authority (Texas HHSC) when enrolling or re-enrolling in Medicaid or CHIP. **However, whether you are exempt or not from paying a Medicaid re-enrollment fee to HHSC depends on which Medicare program you enrolled in and your Medicare provider type.**

A clarification we received from Texas HHSC indicates that:

- A Texas pharmacy that is enrolled as a Medicare Part B pharmacy provider does not have to pay a fee to re-enroll in Texas Medicaid.
- A pharmacy enrolled only as a Medicaid Part B DMEPOS provider must pay the \$553 fee to re-enroll in Texas Medicaid because it enrolled in Medicare as a DME provider and not as a pharmacy provider.
- A pharmacy enrolled as a pharmacy provider in Medicare Part D must pay the Medicaid revalidation fee because it enrolled in Part D through a PBM – and not directly with CMS –and thus paid no fee for doing so.
- Also, per the CMS guidance, a Texas pharmacy that has paid a fee in another state to enroll as a Medicaid pharmacy does not have to again pay a fee to enroll as a pharmacy provider in Texas Medicaid.

American Pharmacies General Counsel Amanda Fields says a Texas pharmacy should have received a receipt from CMS after enrolling in Medicare Part B as a pharmacy provider and must submit that receipt when re-enrolling in Texas Medicaid to be exempted from paying the re-enrollment fee.

Likewise, if you received a receipt after paying a fee to enroll as a Medicaid pharmacy provider in a neighboring state, you can submit that receipt to avoid paying the applicable fee for Texas Medicaid.

For more information, please refer to the official CMS Guidance on Medicaid/CHIP Provider Enrollment.

If you are enrolled as a Medicare Part B provider or as a Medicaid provider in another state, you do not have to pay a fee to re-enroll in Medicaid in your state.

More Features, Access Added to Your APRx Member Account



You already know that your monthly wholesaler value statement is available in your online member account at www.aprx.org. But did you know that your monthly Par-Med statement is now in

your account if you buy through our secondary generics program? (Your last six months of ParMed statements are available.)

Monthly statements are also available for specialty accounts, so if you have a separate LTC, MHA, DME or other specialty wholesaler account that does not correspond to an actual retail pharmacy location, you can view and download those reports as well. Online value statements are available in portable document (pdf) format.

Statements are not available online for:

- Accounts showing zero purchasing activity; or
- Accounts for owners that have not completed the process of becoming an APRx shareholder.

Multiple Log-ins Now Allowed

In response to shareholder requests, we now allow you to grant log-in access to other employees so that they may view your value statements. **Only the primary shareholder of record can grant permission, and the shareholder retains full control of the account — others you permit to access your account cannot edit any data in your account or in turn grant account access to others.**

If you need assistance concerning online account access, retrieving online value statements or want to authorize others to access your account, please contact your Aprx sales representative or Chuck Waters at cwaters@aprx.org.

How to Access Your Online Account

- Click on the red log-in button at the top right of the home page at www.aprx.org.
- For user name, enter the email address at which you receive communications from APRx, plus your password. If you are not sure what your log-in is or have never created a password, contact cwaters@aprx.org for assistance.
- Logging in takes you to the profile screen displaying your name and stockholder information, log-in information and GPAC/Legal Defense Fund contributions.
- Click on the "My Pharmacies" tab to view a screen listing each pharmacy and specialty account you have through your wholesaler. Click on "Reports" to bring up a listing of your monthly wholesaler and ParMed value statements.



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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

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- I am not being reimbursed or compensated for making this contribution.
- I understand that my contribution is subject to the provisions of state and federal campaign finance laws.
- I understand that my contributions will continue on a recurring basis until such time that I instruct APRxPAC in writing to halt those contributions.

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