



**Independent Pharmacy Alliance
Political Action Committee of New Jersey**

Chairman
Carlo Benedetti, R.Ph.
Vice Chair
Chris Socha, R.Ph.
Secretary/Treasurer
James Vizzoni, R.Ph.

Officer
Ben Hertz
Officer
Robert Pergola, R.Ph.
Officer
Anthony Reznik

IPA RxPAC - NJ

Cedar Brook Corporate Center
3 Cedar Brook Drive
Cranbury, N.J. 08512
(P): 800-575-2667/(F): 609-395-1007
E-mail: info@ipagroup.org
Web: ipa-rx.org



Follow IPA on twitter @ipapharmacies

January 2017



Sign Up for e-Monthly Update at info@ipagroup.org

RE: 2017 IPA PAC Contribution – Your annual political donation for 2017 will help stop PBM Abuses

Dear «FirstName»:

Keep independent pharmacy strong by making your annual contribution of \$365 (just \$1 a day) to IPA's New Jersey political advocacy arm, "IPA RxPAC-NJ".

With member donations, we achieved a great victory when the MAC transparency law went into effect in April 2016. Key features of NJ MAC transparency law:

- Requires PBMs to update MAC generic drug pricing every 7 days and disclose the sources utilized to determine multiple source generic drug pricing.
- All PBM contracts must include a defined appeals process, resolve appeals within 14 days and provide pharmacies with the ability to reverse and rebill approved appeals. When an appeal is approved the PBM will make the price correction effective for all similarly situated pharmacies.

2016/2017 independent pharmacy victories and initiatives include:

Jan 2016: **MAC Law:** The MAC law, which went into effect on April 2016, requires PBMs update their MAC prices every 7 days and provides a defined appeals process for pharmacies to dispute reimbursements that are below cost or low. IPA is working with the NJ Department of Banking and Insurance on enforcing the MAC law.

June 2016: **New PBM Transparency Bill:** S2353 would require PBMs to reveal the true cost of prescription drugs to their clients by disclosing the difference between how much they charge for prescription drugs versus what they pay the pharmacy. PBMs reap huge profits by marking up prescription claims through spread pricing.

July 2016: **New Pharmacy Choice Bill:** A4043 would require Medicaid managed care organizations to permit all pharmacies to dispense prescriptions for all covered medications. It will prevent unreasonable fees and terms from keeping independent pharmacies out of the specialty drug market, and gives Medicaid patients the right to choose their pharmacy of choice.

Donation Instructions: Become a "daily donor" and donate a dollar a day (\$365/year). Please mail a check to **IPA RxPAC-NJ, 3 Cedar Brook Drive, Cranbury, NJ 08512** or to make a donation by credit card, call Laura @ 800-575-2667 or fill out the enclosed donation form and fax it to 609-395-1007. Thank you for supporting this urgent cause.

Sincerely,

Anthony Reznik
Director, Government and Public Affairs



**Independent Pharmacy Alliance
Political Action Committee of New Jersey**

Chairman
Carlo Benedetti, R.Ph.
Vice Chair
Chris Socha, R.Ph.
Secretary/Treasurer
James Vizzoni, R.Ph.

Officer
Ben Hertz
Officer
Robert Pergola, R.Ph.
Officer
Anthony Reznik

IPA RxPAC - NJ

Cedar Brook Corporate Center
3 Cedar Brook Drive
Cranbury, N.J. 08512
(P): 800-575-2667/(F): 609-395-1007
E-mail: info@ipagroup.org
Web: ipa-rx.org

2017 VOLUNTARY PAC CONTRIBUTION INVOICE

More PAC Dollars Are Needed As Soon As Possible

Invoice # IPA Rx PAC-NJ 01-17

Bill To:

Date: March 7, 2017

Pharmacy Owner



Description of Service:	Amount due
Voluntary annual contribution to the IPA RxPAC-NJ for calendar year 2017 to support the \$1 per day political action agenda in New Jersey	\$365.00

Alternate Donation Amount \$ _____

PAYMENT OPTIONS

PLEASE MAIL OR FAX INVOICE WITH PAYMENT TO 609-395-1007
IPA RXPAC-NJ 3 CEDAR BROOK DRIVE CRANBURY NJ 08512

1. Check Enclosed, made payable to IPA RXPAC-NJ

2. Credit Card (please check one): Visa  MasterCard 

I authorize IPA RxPAC-NJ to a **one time charge** to the selected card for the amount indicated for payment \$ _____

Card Number: _____ Expiration Date ___/___ CVV Code _____

Name and Address as it appears on card:

Name (please print)

Signature

Address City State Zip Code

Comments:

I understand that this contribution is completely voluntary and is in no way connected with conditions of employment, advancement or compensation and, **by law, can only be used for political action.**

Partnerships and LLC's may contribute respectively by partnership or corporate checks up to the maximum of \$7,200 annually. The check must be accompanied by a signed letter allocating the contribution and the individual partner(s) or LLC corporate member to who the contribution is being attributed to, as appropriate.

Contributions are not tax deductible.