

COMMUNITY PHARMACY FOR THE FUTURE

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**RxPlus Mission**

**RxPlus Pharmacies, Inc. exists for the economic, professional, and political benefit of community pharmacy and the health and well being of the community**

**If you find any errors or omissions, or if you have any comments regarding the Website, you can fill out the email form following the "Contact Info" button of the homepage!**



**Howard's Pharmacy**

Attending Yakima Community College in the 1960s, Dave Thome did not consider pharmacy an immediate career choice. Howard's Pharmacy, which Dave and son Joel now own and operate, was a typical small town pharmacy in Selah, WA. The pharmacists and the pharmacy weren't connected then. Howard's was just their hometown pharmacy. Dave and his sister, Louise, grew up in rural Selah as farm kids. Louise went off to the University of Washington and entered the School of Pharmacy. Then the school recruited Dave bringing another Thome to a pharmacy career. That example - an aunt and a dad in retail pharmacy - led Joel, who describes himself as more interested in "shop class and physical education than English or chemistry," to select pharmacy for a high school career presentation, although his interests then also included being a DJ and a gourmet chef.



Dad Dave returned to eastern Washington to operate the farm, which is still in the family, after his father died during his last year in pharmacy school. Dave managed the farm and worked in retail pharmacy. Dave worked for a short time in the 1970s at Howard's Pharmacy before moving to several chain pharmacies and a few other independent stores in nearby Yakima. But the lure of helping patients combined with his entrepreneurial streak led Dave back to Selah 12 years ago when Howard's Pharmacy went on the market. "I always wanted to own my own pharmacy," says Dave. "This gave me an opportunity to try that and most of the time I'm glad I did."

He likes the independent decision-making and controlling his own destiny - at least to the point that is possible in today's highly regulated pharmacy world. "Serving patients today is very complicated with insurers and regulations" for the many different programs patients have. It is also very competitive. "We don't offer the \$4 generics and we lose some. But we're a traditional pharmacy with health and other products and we're quite busy," Dave adds. Still, political issues worry father and son. Washington's decision to reduce pharmacy reimbursements by 6% this year concerns both.

RxPlus' involvement and willingness to tackle the political issues," is a particular plus to Dave. He cites the efforts in that area as an important part of why he is a member. Both list the importance of RxPlus and it's help in organizing others to argue against the reimbursement changes and helping craft arguments for legislators to oppose changes as important.

"Organizations like RxPlus understand pharmacy's role, the politics of our current situation, and the future

of pharmacy. If more pharmacies were able to participate in RxPlus, more positive change for the future of pharmacy would certainly result," Joel says. Dad agrees. He also points to the value-added help RxPlus offers its members in dealing with contracts, the organization's scholarship program and other business factors as important membership reasons.

Joel earned an RxPlus Scholarship as a student at the University of Washington where he followed family tradition, graduating in June 2005. Dave believes the scholarship program not only was helpful to Joel, but that it and the new scholarship foundation are integral to ensuring the next generation of young pharmacists is ready to own and operate community pharmacies across the country. "The organization is really interested in helping independent pharmacy survive and promoting to politically and through the universities," Dave adds.

Joel points out that the scholarship "allowed me to concentrate on my schooling and my internship" rather than worrying about adding more to his school loan debt. Generally, the Thome family is optimistic about the future of independent pharmacy. "Despite the continued growth and increased competition from large corporate pharmacies, we are able to survive as an independent pharmacy because of the quality of service we provide as well as the wonderful community to which we provide our service," Joel says.

I work as an independent pharmacist because I refuse to accept any less for our profession. Pharmacists can provide a type and degree of service to their patients and prescribers I view as irreplaceable by other health professionals."

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## **President's Message**

The stock market has fallen to levels seen twelve years ago, and unemployment is now over 8%. Economic recovery seems to keep fading out of reach. Although the economic outlook still seems grim, we are very lucky to be in a business that has, so far, been somewhat recession proof. With all the economic gloom, I feel fortunate that my pharmacy business has actually grown. Not to say that independent pharmacy doesn't have it's own problems, but I rest a little easier at night knowing that RxPlus and NCPA are working on my behalf at the state and federal levels. There are two very critical issues on the national level that we all need to get involved in:

H.R. 1204 - *Community Pharmacy Fairness Act of 2009* would level the playing field between more than 23,000 community pharmacies and PBM's by creating a narrow anti-trust exemption.

H.R. 616 - exempting pharmacy from DMEPOS accreditation was introduced on January 21st this year. Governmental Affairs Director Brad Young addresses the bill in his column in this issue. Please contact you Congressman in Washington about both of these bills and ask them for their support. If you need talking points and contact information please refer to <http://www.rxplus.com>. RxPlus has provided sample letters in Word format that you can also use for talking points in a phone call to your Congressman. We have a link to the NCPA Congressional lookup web page. As always, if you have any ideas about how we can be greater service to you, don't hesitate to call!

David Lamb  
Co-President

## **Executive Director's Message**

It's hard to believe that spring is here already! We are working on a number of projects for you, some that I touched on last month as well as getting ready for our annual meeting August 21st-23rd. Kathy has some great CE planned that will encompass both the clinical as well as the business side of your pharmacy. Because of the response of members wanting to get into the immunization arena we will be putting on an immunization class again this year in conjunction with the other CE classes. We hope you can join us for this fun filled educational networking meeting. We promise not to let you down. We hope you are enjoying our weekly Profit Minute. Thanks to all of you who have sent in your ideas. That is what the program is all about, "people sharing ideas with other people". As you may be aware we award \$100 to the best idea each month based on the responses we get back from our members. Congratulations to our first two winners, Stan

Callas and Kari McDonald. If you have an idea you would like to share please don't be shy. We need your ideas. Something that has come to our attention again, is the cash discount cards that are becoming more predominant everyday. If you don't already have your own discount card you may think about it. We have worked out an agreement with MaxCare to provide our stores with the "RxAdvantage Discount Card". The initial cost of the cards and a marketing kit is \$35 which includes 100 cards. The transaction fee is .50 rather than the \$4-\$5 fees you are seeing from other cards. You can also use the templates for these cards to compete against the \$4 generic programs if you would like. This is only an option and you determine what you want your pricing to be. You can use their templates or use your own. Your wholesalers may have an option for you as well. For more information on the RxAdvantage card please call 877-557-5707 and let them know you are an RxPlus member.

## GOVERNMENTAL AFFAIRS REPORT

**Federal Issues:** Congressmen Jerry Moran (R-KS) and Marion Berry (D-ARK) have introduced legislation that would exempt pharmacists from a CMS accreditation requirement necessary to sell Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). H.R. 616 was introduced on January 21, 2009, and has fifteen cosponsors. If you have not already done so, call your Congressman and urge them to cosponsor H.R. 616! NCPA is starting the process of getting legislation introduced to address the ongoing problems of AMP reimbursement and Business Negotiation Rights. It will take some time to lay the groundwork with the new administration and new Congress.

**Colorado: The Budget** With the looming budget shortfall in the current year, Colorado Medicaid was facing cuts to provider rates. We were told to expect pharmacy to be cut by about \$3 million over the last three months of the current budget year. Now that the president has signed the stimulus package, Colorado will receive extra federal matching funds, and the **cuts have been eliminated from the budget, but only for the current year. The budget starting July 1, 2009 cuts pharmacy by \$8 million. Brand drugs would go from AMP -13.50% to AMP -14.5% and generics would be cut from AMP -35% to AMP -45%.**

**Bills: HB 1061: Health Care Transparency** by Rep. Anne McGihon (D-Denver) and Sen. (D-Thornton). We testified in support of the bill. It has passed the House. The bill started out to require health insurance health companies to disclose to the Division of Insurance the nature of business relationships with intermediary entities that set standards of care, select in-network providers, negotiate or set reimbursement rates, obtain insurance contracts for health care providers, and issue credentials to providers. The bill was brought to Rep. McGihon by the physical therapists. As amended, it now just requires any intermediary to follow the same standards, guidelines, medical policies, and benefit terms of the carrier. It is no longer transparency. Now that other professions are being directly impacted by PBM-like practices, we may be able to work with them on future legislation.

**HB 1084: Medicaid Audits** by Rep. Gagliardi (D-Arvada) and Sen. Tochtrop. SUPPORT. **The bill died in the House Health and Human Services Committee on Feb. 5.** The bill would have shortened the look-back time of an audit to more no than three years unless deliberate fraud is found, and extend time for response. The podiatrists brought the bill to Rep. Gagliardi. The bill died because the cost to the state.

**SB 132: Concerning Discounted Prescription Drug Programs** by Sen. Boyd (D-Lakewood) and Rep. Jim Kerr (R-Littleton). The Colorado Cares Rx mail order program instated last year has been a failure. In nine months a total of 45 people used the program to fill 240 prescriptions. The Colorado Department of Health Care Policy and Finance wants to change the program to allow the department to "make information available to the public concerning lower-cost prescription drugs." We are asking the bill sponsors to amend the bill so the department does not just provide a list of chain pharmacies, mail-order internet pharmacies, or discount cards, but instead provides information about manufacturer discount programs.

**State Net Report:** Members are encouraged to check out the Rxplus.com web site, the Member login section under Inside News: Legislative Updates, for a list of bills that have been introduced in Alaska, Colorado, Kansas, Montana, New Mexico, Nebraska, Utah, Washington, and Wyoming. You are also encouraged to log on to the Pharmacy Association in your state and look at the legislative issues being report.

### NCPA

October 11-15  
Tampa, FL

### Academy of Managed Care Pharmacy Educational Conference

October 15-18  
Kansas City, MO

### American College of Clinical Pharmacy

October 19-22  
Louisville, KY

### Pharmaceutical Care Management Association

October 26-28  
Henderson, NV

### RxPlus Strategic Planning Meeting

November 13-14  
Manitou Springs, CO

### ASCP (Senior Care)

November 19-22  
New Orleans, LA

### ASHP Midyear

December 7-11  
Orlando, FL



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## CLASSIFIEDS (ALSO SEE WWW.RXPLUS.COM)

### Full Time Pharmacist

Needed for long term care in Loveland, CO Must possess current state license, strong mgmt. & leadership skills and the desire to offer superior customer service. Previous experience in long term care a plus.

### 2 Pharmacy Technicians

Looking for 2 Pharmacy Technicians. Looking for 1 tech. to float between our 10 stores and 1 tech. for our retail store in Johnstown. Both positions are full-time (40hrs) with benefits, competitive pay and an excellent working environment. CPhT is preferred but not required. Previous Exp. & superior customer service required.

To apply for above 2 ads, send a resume and cover letter to:  
lcalkins@gooddaypharmacy.com

Or Fax to (970)461-4042

### Pharmacy for Sale

Well established full service Pharmacy, Sporting Goods, & Liquor Store. Enjoy great outdoors, close to excellent hunting/fishing. Located in Casper WY. Contact Floyd Harnigal (307) 205-1917

### Full-Time Pharmacist

Columbine Drug located in Loveland, CO. Competitive salary and benefits package. Contact Paul Hewlett @ (970) 663-4600 or columbinerx@aol.com

### Compounding Tech

Good Day Pharmacy in Fort Collins, CO has an opportunity for an experienced compounding technician. Contact Vicki @ (970) 461-1975

### Full or P/T Pharmacist

Salary and benefits are negotiable. B&B Pharmacy, Brush CO. Contact Dave Brunner (970)842-2416

### Business Opportunity

Excellent opportunity to open a New Clinic Pharmacy. Pain & Hormone Compounding, ENT & Pain Control. Located off HWY 287 in Lafayette. Contact Dr. Scott Boyd (303) 241-6043

### F/T or P/T Pharmacists

Pharmacy located in Monte Vista, Co. Is looking for a pharmacist to work 20 to 40 hours per week. Competitive salary with benefits. Great hunting, fishing and skiing less than 1 hour away. Contact Bryan Salazar @ (719) 852-9894.





