AIP Mission Statement
To advance the concept of pharmacy care. To ensure the economic viability and security of Independent Pharmacy. To provide a forum for Independent Pharmacy to exchange information and develop strategies, goals and objectives. To address the unique business and professional issues of independent pharmacies. To develop and implement marketing opportunities for members of the Academy with emphasis on the third party reimbursement market. To provide educational programs designed to enhance the managerial skills of Independent Pharmacy Owners and Managers; and, To establish and implement programs and services designed to assist Independent Pharmacy Owners and Managers.

Compounding’s Corner

B ale Coker, RPh, MPH, Compounding Section Chairman

UAP’s annual meeting, Compounders on Capitol Hill, is just around the corner. It is scheduled for June 14-15 at the Renaissance Downtown Atlanta Hotel. A conference call has been scheduled for April 26 to discuss our finances and continuing support for IAP through attendance at this event.

There are three pharmacy champions that I want to commend, one posthumously. All who knew Barry Bilbro knew what a compassionate and kind person he was. He was also very passionate about pharmacy compounding. All the years I’ve been to Compounders on Capitol Hill, I think Barry only missed a couple of them. Barry, you will be missed, brother.

I want to commend the work Buddy Farrow is doing on behalf of the pharmacy profession and pharmacy compounding. It will be great to spend some time with him in Washington, D.C. He will be the opening keynote speaker this year, which should be another incentive to get as many Georgia Compounding Pharmacists in attendance as possible. Wouldn’t it be great to send home a picture of twenty or more Georgia Pharmacists with Buddy?

Last but not least, I want to commend the continuing great work of Shawn Hodges of Innovation Pharmacy. Shawn and his attorney team keep a close watch on Federal and State issues affecting our ability to serve our patients. Shawn has also stepped up to the plate big time by his leadership at UAP. In the span of a few months, Shawn accepted the challenge of chairing the UAP Legislative Committee, and now has accepted an even greater challenge of chairing the GMPAC Committee. Please join me in commending Shawn for his tireless energy and passion for pharmacy compounding.

Keep INDEPENDENTS INDEPENDENT

Don’t forget, if you have a desire to sell your pharmacy or if you have an interest in buying a pharmacy, please contact Jeff Lurey at 404-419-8102.

We have been quite successful during the past several years at keeping independents interested in buying a pharmacy, please contact Jeff Lurey at 404-419-8102.

If you change wholesalers please be sure to let us know.

Please contact Verouschka Betancourt-Whigham “V” at vbwhigham@gpha.org or 404-419-8102. Thank You.

Drew Miller, RPh, CPhm. Chairman

Scott Meeks, RPh, Chairman Elect

E. Laird Miller, RPh. Secretary

Ira Katz, RPh. Immediate Past Chairman

Scott Breuning, CAE

Hugh Chancey, RPh.

Ben Cravens, RPh.

Carolyn Florence, RPh.

Kevin Florence, Pharm.D.

George Lourakis, RPh.

Pamela Marques, Pharm.D.

Mae McCord, RPh.

Fred Sharpe, RPh.

Tim Short, R.Ph.

Chris Thurmond, Pharm.D.

Lindsey Walker, RPh.

AIP STAFF

Jeff L. Lurey, R.Ph.

Executive Director of AIP

Verouschka Betancourt-Whigham

Manager of AIP Member Services

Rhonda Brown

Member Services Representative

Charles D. Boone

Member Services Representative

Amanda Gaddy, R.Ph.

Director of Clinical Services

Melissa Metheny

Member Services Representative

Gene Smith

Member Services Representative

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Attention Independent Pharmacy Owners

We have an exclusive membership offer for your employees who are not currently GPhA members – and who haven’t been a member in the past 12 months. **Sign up your employee pharmacists for a GPhA membership and get up to five months of their membership free!**

We know you care about your employees: They’re your team and you want the best for them: the CPE, the best networking opportunities, the best leadership training.

Enroll your team before May 31, 2016, and get up to five months of GPhA membership at absolutely no cost. You pay just $195 per pharmacist for membership through August 31, 2017.

That’s a savings of up to $130 off the regular membership rate – along with all the policy advocacy and all the benefits, starting as soon as you respond to this special offer:

Georgia Pharmacy magazine
Six free hours of CPE Weekends programming
Discounted Georgia Pharmacy Convention registration
Reduced rates on APhA certification training

The sooner you act, the more you save.

Between now and the end of August each team member can save up to $600 off the regular cost of these programs. That’s in addition to the over $700 in savings each new member get throughout the 2017 membership year – but only if you sign them up now!
Have you signed up for the Spring 2016 Regional Legislative and Regulatory Briefings?

Register today at:
http://www.gpha.org/briefings/spring2016/

Region 2
Tuesday - April 5th - 6:30 pm
Mom & Dad's Restaurant
Valdosta, GA

Region 8
Thursday - April 7th - 6:30 pm
Hog's Bones
Waycross, GA

Region 3
Thursday - April 7th - 6:30 pm
Mark's City Grill
Columbus, GA

Region 4
Thursday - April 7th - 6:30 pm
Due South Southern Cuisine
Peachtree City, GA

Region 9
Thursday - April 14th - 6:30 pm
Charlies Italian Restaurant
East Ellijay, GA

Region 10
Thursday - April 14th - 6:30 pm
Hilton Garden Inn
Athens, GA

Region 1
Tuesday - April 19th - 6:30 pm
Milhouse Steakhouse
Statesboro, GA

Region 5 & 7
Tuesday - April 19th - 6:30 pm
GPHA Offices
Sandy Springs, GA

Region 6
Thursday - April 21st - 6:30 pm
Natalia's
Racoon, GA

Region 12
Thursday - April 21st - 6:30 pm
Dean's Italian
Dublin, GA

Region 11
Tuesday - April 26th - 6:30 pm
Children’s Hospital of Georgia
Augusta, GA

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AIP Helps A Member

AIP HELPS A MEMBER RESOLVE A $24,625 AUDIT

We were able to help this AIP member resolve a $24,625 audit. Please let us know if we can help you.

Hi Jeff,

Please forward this to Amanda Gaddy and anyone else that might be able to help. I have a desk audit and we are in the discrepancy phase of the audit and I want to get the response right since there may not be another chance after this.

There are 10 claims involved and total amount is $24,625.44. This person has been on Clozaril for over 15 years. The deadline for the audit response is February 14th, so I would like to finish this up by the end of next week if possible. You can contact me by email or phone. Thanks for your help!

Hi Amanda,

I just wanted to let you know that we were successful. All the documentation plus the letter you and I worked on was accepted. I just wanted to let you know the outcome and thank you for all your help.

AIP MEMBER + AIP STAFF = SUCCESS

CAN A PHYSICIAN E-PRESCRIBE A C-II?

Yes, C-II can be e-prescribed. Here is a link to more information.

Community pharmacy health clinics result in higher spending, study concludes

A new study published on Monday in Health Affairs concludes that community pharmacy health clinics led to slightly higher spending because people used them for minor medical conditions they would typically have treated on their own. The higher use outweighed the savings that resulted when people went to a cheaper retail clinic instead of the doctor or emergency room, according to researchers. The study examined insurance claims data from Aetna for minor conditions. The researchers calculated that 59% of community pharmacy clinic visits were for services that they would not have otherwise sought, resulting in an annual net increase in spending of $46 per person. Executives at community pharmacy clinics say the study was flawed and failed to demonstrate the overall savings the clinics achieve. The study’s authors admit that the study did not offer conclusions about whether the visits to the clinics prevented hospital stays or reduced the need for a prescription, a goal for policy analysts that has the potential of reducing overall health spending. Andrew Sussman, MD, president of MinuteClinic, the clinics operated by CVS Health, notes that “these patients are not going to get better on their own,” and a clinic visit can prevent a very expensive hospital stay. Sussman cited his published research, looking at CVS’s employees and evaluating their use of the clinics, that showed overall savings, including fewer hospitalizations.

FDA issues draft guidelines for generic abuse-deterrent opioids

New draft guidance from FDA aims to support development of generic versions of opioids with abuse-deterrent formulations (ADF). FDA also wants to ensure that generic ADF opioids are just as abuse-deterrent as the brand-name versions.

FDA Commissioner Robert Califf, MD, said: "We recognize that abuse-deterrent technology is still evolving and is only one piece of a much broader strategy to combat the problem of opioid abuse. But strongly encouraging innovation to increase access to generic forms of abuse-deterrent opioid medications is an important element in that strategy."

The new guidance encourages the industry’s efforts to develop abuse-deterrent opioids. In addition, FDA has mandated that all sponsors of brand name products with approved abuse-deterrent labeling to conduct long-term epidemiological studies to determine how their drugs reduce abuse in practice. The guidance includes recommendations about the studies that should be conducted to show that a generic opioid is no less abuse-deterrent than the brand name product, considering all potential routes of abuse. FDA will hold a public meeting later this year to discuss the new guidance as well as other issues related to the use of abuse-deterrent technology.

NCPA Asks CMS to Address Part D Plan Bids, DIRs

In comments to the Centers for Medicare & Medicaid Services (CMS) last week, NCPA offered recommendations for improving the Medicare Part D program aimed at more cost-effective delivery of the benefit and better pricing and cost transparency for pharmacies under network agreements with plan sponsors and PBMs. Specifically, NCPA urged CMS to thoroughly review the Part D bidding process and require more complete and accurate information related to preferred cost sharing pharmacies on its Plan Finder. In addition, preferred network plans should incur a financial penalty or other sanction if drugs are more expensive at preferred pharmacies after considering abusive direct and indirect remuneration fees (DIRs).

The recommendations were contained in comments filed on the annual CMS draft “call letter,” which proposes policy tweaks for the next plan year (2017). In a letter to CMS, NCPA also addressed: Enhancements to the 2017 star ratings and beyond, Part D reporting requirements for medication therapy management, access to preferred cost sharing pharmacies, tier labeling, specialty tiers, improving drug utilization review controls for opioids, and establishing mail order protocols for urgent need fills.
I received an email recently from a pharmacy student working at an independent pharmacy. He wrote about his concerns for the bad things happening in independent pharmacy now, like slow and low MAC payment updates and DIR fees. Despite the problems, this next generation of pharmacists is on fire to become independent pharmacy owners. The dream is still alive.

The dream of pharmacy ownership is one that many pharmacists can identify with. That aspiration is still going strong in thousands of staff pharmacists and pharmacy students despite the difficult environment created by PBMs.

In the 26 years since NCPA created and began offering the Ownership Workshop, over 2,000 pharmacists have gone through the program. About half of those attendees have gone on to start or buy an existing pharmacy.

I've been to a number of these Workshops over the years and the enthusiasm from these young pharmacists is off the charts! Some of the attendees are starting a new pharmacy from scratch. Some of the attendees are disgruntled chain pharmacists looking for something different. Sometimes the current owner and the aspiring owner attend the Workshop together.

No one is naïve to the challenges. No one is naïve to the risk. But the obstacles are offset by the potential for working for yourself and creating jobs while caring for the people in your community.

The Ownership Workshop is the centerpiece of the pharmacy ownership tools that NCPA offers. From the first day of pharmacy school to making the decision to ride off into the sunset, NCPA has specific tools to offer available to NCPA members at every stage of their career.

For those of you who are thinking about or know someone thinking about starting or buying a pharmacy, there will be two more Ownership Workshops this year, June 3-5 in Memphis and Oct 13-15 at NCPA’s Annual Convention in New Orleans.

800.247.5930
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Our commitment to quality means you can rest easy.

Pharmacists Mutual has been committed to the pharmacy profession for over a century. Since 1919, we’ve been insuring pharmacies and giving back to the profession through sponsorships and scholarships.

Rated A (Excellent) by A.M. Best, Pharmacists Mutual is a trusted, knowledgeable company that understands your insurance needs. Our coverage is designed by pharmacists for pharmacists. So you can rest assured you have the most complete protection for your business, personal and professional insurance needs.