



Dear PARD/Keystone Members,

House Bill 941, now known as Act 120, was passed into law. This law addresses fairness and transparency in the PA Medicaid Program. In addition, it requires that a study be done on the Medicaid prescription program. We expect this to show lack of transparency and mismanagement of the Commonwealth’s funds, as well as inappropriate pay to pharmacies. The study is in the process of being done, but pressure needs to be put on regulatory agencies to finish it. In addition, the race for the PA governor is on the horizon, and PARD is positioning itself to be heard.

We need your commitment and your participation. We will have opposition that is well funded, and we need your help. Please consider donating to PhilPAC. With a monthly contribution, consider it taking your profession and business out to lunch. Currently, we have less than 20% of membership contributing to PhilPAC. Please help us help your business with a stronger voice in Harrisburg.

We have disbursed over \$27,000 in 2021 from our PhilPAC account & it needs to be re-vitalized. Your help is crucial! At present, we have 40 members making monthly donations to PhilPAC via credit card. For 2021 we had 20 members making once-a-year donations. For 2022 we have 0 more member making once-a-year donations. If your name is not listed below, please consider adding your name; an application is included. **Personal credit card or personal check is required** to make donations to PhilPAC. **Due to state law, we cannot accept corporate checks and they will be returned.** *For monthly donations, personal credit card is preferred.*

2022 Monthly Contributors:

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2022 Annual Contributors:

Your participation would be greatly appreciated. We have made much progress for the future success of Independent Pharmacy, but we cannot discontinue our efforts now, and we urgently need your help.

Very truly yours,

Rob Frankil, R. Ph.
Executive Director

Brad Tabaac, R. Ph.
President

*more than one donation in calendar year



Thank you for your support

Store Name: _____ Your Name: _____

By State law PARD PhilPAC cannot accept corporate checks.

- Enclosed is my personal check made payable to the PARD PhilPAC in the amount of \$_____

Home address if not listed on check: _____

- I hereby authorize a monthly debit to my personal credit card in the amount of \$_____ as a contribution to the PARD PhilPAC Fund
- I hereby authorize a one-time debit to my personal credit card in the amount of \$_____ as a contribution to the PARD PhilPAC Fund

Personal Credit Card Information – VISA, MasterCard, Discover & American Express accepted

Account Number:

Expiration Date:

Security Code:

Name on account:

Amount Paid:

Signature:

Billing Address of the personal credit card being used including City, State & Zip

Email (to receive credit card receipt): _____