



## We're fighting...

- ★ To end onerous retroactive pharmacy DIR fees both legislatively in Congress and in the Courts through **NCPA v. Becerra**
- ★ To enhance PBM state regulations through the unanimous 8-0 **Rutledge v PCMA** Supreme Court Victory
- ★ Through a comprehensive multi-state PR campaign to uncover PBM lies
- ★ To defend a state's right to regulate PBMs in **PCMA v. Wehbi**
- ★ To ensure fair Medicaid reimbursement rates in Washington state

# NCPA's Formula for Advocacy Success



### Members like YOU

Yes, you. Not only do you vote, but you have influence with your dollars. When community pharmacists band together – when we pool our voices and our relationships and our checkbooks – we can get stuff done in the advocacy space.



### Comprehensive approach

Sometimes the quickest way to right a wrong isn't through Congress, state legislatures or regulatory agencies. Sometimes it is with the courts; NCPA will fight for it's members on any playing field necessary to create a better pharmacy model. NCPA's Legislative/Legal Defense Fund focuses on issues ranging from PBM abuses to your ability to practice to the full extent of your training.



### An effective NCPA advocacy team

Your NCPA advocacy team is highly respected, and thanks to the funding you provide for NCPA's Legislative/Legal Defense Fund, they have a track record of success in representing your interests.



### Influence and protection for community pharmacists nationwide

*Investments from corporate funds may be tax deductible as a business expense. Investments are not tax deductible as charitable contributions for federal income tax purposes.*



Please return this investment form  
to NCPA via:

★ Fax: 703.683.6375

★ Mail:

NCPA LDF

100 Daingerfield Road  
Alexandria, VA 22314

★ Online: [www.ncpa.org/ldf](http://www.ncpa.org/ldf)



## Add my support to NCPA's advocacy efforts!

I want to help support NCPA's advocacy efforts from the State House to the White House and from Congress to the courts. Please add my Legislative/Legal Defense Fund investment to those of my owner-manager/  
pharmacist colleagues and use it to advance our profession.

NAME

NCPA MEMBER # (IF KNOWN)

PHARMACY NAME

EMAIL

HOME ADDRESS

CITY

STATE

ZIP

TELEPHONE

FAX

CELL

**One-time investment amount by:**

Check

Credit Card

\$5000

\$2500

\$1000

\$500

\$250

Other amount: \$ \_\_\_\_\_

**Credit card information**

Visa

MC

AMEX

Discover

CARD #

EXP. DATE

CARDHOLDER NAME

CARDHOLDER SIGNATURE

**Monthly investment of \$\_\_\_\_\_ by credit card**

**You may also invest online at [www.ncpa.org/ldf](http://www.ncpa.org/ldf). See disclosures on the other side of this card.**