**Wholesalers unite for independents**

Thirty independent wholesalers nationwide have agreed to combine their clout to help their 15,000 independent pharmacy customers become profitable by offering new services and negotiating market-share rebates from drug manufacturers. Each wholesaler put up $50,000 to fund the Wholesale Alliance, said Harvey Tanenbaum, the Kinray Inc. executive v.p. who chairs the new group's marketing committee. “We want to make retail pharmacy profitable again,” he said. “If we don’t, our customers won’t be around, so we won’t be around.”

**NBC eyeing workload issue**

The NBC-TV news-magazine *Dateline* is researching the possibility of a prime time look at whether the pharmacist’s increasingly heavy workload is leading to more medication errors and endangering the public. “That could be a good story for us,” said an associate producer who contacted *Drug Topics*, which did a recent cover story on the issue. She added that she would like to contact R.Ph.s willing to discuss their workload experiences and issues, “hopefully on camera.”

**Legislation targets Rx plans**

Health insurance plans could not economically penalize patients who get their Rx from a community pharmacy rather than through mail order if a bill sponsored by Rep. Nita Lowey (D, N.Y.) becomes law. The measure would require public and private plans alike to provide equivalent benefits to both mail-order and local pharmacy patients. That is, if the plan makes a fixed or percentage contribution to the cost of an Rx or requires a co-pay, it must be the same for patients using either type of pharmacy.

**Co-pay stays in New York**

The Pharmacists Society of the State of New York lost its appeal at the state’s appellate court to overturn the state’s requirement that pharmacists collect co-pays from Medicaid patients. Community pharmacists in the state said that they have met widespread resistance to the co-pay from Medicaid recipients who cannot be denied their Rxs if they say they are unable to pay at the time of service. The co-pay is $2 for brand-name drugs and 50 cents for generics. PSSNY’s executive director, Craig Berridge, said the society will now seek recourse through the state legislature.