

May 13, 2017

Dear OSHP Board of Directors,

The OSHP BOD will be discussing the proposed merger of OSHP and OSPA into the Oregon Pharmacy Association at your May 15 meeting. The OSHP Past Presidents want to take this opportunity to share our concerns as you consider whether this important matter should be endorsed by the BOD and referred to the membership for vote. The 22 signatory Past Presidents are in agreement that the proposed merger of the organizations is not in the best interest of OSHP, although we continue to welcome collaboration between the two groups since strengthening our existing relationship and programs with OSPA benefits all members.

We recognize and appreciate the good work of the two task forces in exploring the potential for a merger. Moving this from broad discussion at the leadership level to a more concrete study of this perennial question was necessary and timely. However, we feel there are still questions beyond combining organizational structures and finances that were not addressed in the OSHP/OSPA proposed merger document. OSHP members have tightly held values concerning credentialing and privileging, technician scope of practice and training, and residency training. Fundamental differences from our OSPA colleagues exist concerning organizational mission, goals, priorities, and our core values.

The Past Presidents that attended the Open Forum at the OSHP Annual Seminar 2017 appreciated the dialogue and opportunity to hear the pros and cons presented by other attendees. We continued to discuss this matter at the Past Presidents' breakfast Sunday and since that time via online dialogue with an expanded group of Past Presidents that were unable to attend the seminar this year.

Our major areas of concern are:

Lack of a compelling argument to merge

- We did not hear a "call to arms" that can only be met through a merger. We can continue to collaborate on legislation, advocacy, and education without combining organizations.
- We already offer member pricing at each other's seminars.
- A trial joint Fall Seminar as outlined in the merger proposal could be tried as a testing ground before proceeding further.

Disaffiliation from ASHP

- The disbanding of OSHP requires disaffiliation with ASHP.
- Re-affiliation with ASHP is not guaranteed. It was shared with the Past Presidents that there has not been a new ASHP affiliate in approximately 10 years and some recent states that were in the process of merging decided not to complete that process.
- Members need to be informed of the many hidden resources this partnership with ASHP provides that could be jeopardized if ASHP will not recognize the merged organization for affiliation.

A potential merger could put the interests of OSHP at financial risk

- OSHP is currently in a strong financial position and OSPA is in a weaker financial position ("Three year average gross profit margin of 0% for OSPA and 4% for OSHP"). While mergers and consolidations can reduce overhead costs, the BOD has fiduciary responsibility to seriously consider the income projections and what OSHP can reasonably gain that we aren't already achieving separately. The projection of 15% in a merged organization is dependent on many variables that should be more thoroughly explored and tested for sensitivity.

- Sponsorships from health-system focused partners could dwindle if they no longer perceive a favorable ROI for exhibiting or sponsoring with a less aligned audience.
- We have been enjoying an upswing in membership the last couple years. We are concerned that this trend might be reversed. The budget plan calls for 90% retention of members to meet budgetary goals. Membership dues are still one of the largest income drivers and this is at risk in a merger.
- We did not find sufficient detail about OSPA membership prospects and retention to know if the projections are likely to prove accurate. Is their organization growing or shrinking? The BOD should consider comparisons for each organization for the last 3 years in addition to the combined organization means presented in the discussion and App B when making projections.
- The merged organization calls for separate and joint finances managed by respective Treasurers and the Board of Directors. If one academy underperforms the bottom line will be impacted and the other academy will also suffer.

The loss of a health-system focus for our members at increased membership cost

- OSHP has a very identifiable brand that has proven its value to serve a specific population. Health-system academies in other merged organizations are often underrepresented. OSHP members currently enjoy targeted CE, networking, advocacy, and a place that feels like home. We need to be able to devote all our efforts to meeting the needs of health-system pharmacists, technicians, and learners.
- OSHP has a very strong history and culture of volunteer leadership that should be maintained and fostered. If members feel disengaged in a larger organization, volunteerism will suffer.
- The trend for members seeking professional organization affiliation is a move away from umbrella groups to more specialized focus groups. Even large national organizations like ASHP (with sizable membership and financial resources) do not try to be all things to all people. Broad organizations make sense for students who are still exploring their career paths and the profession. Established and new practitioners with interest in health-system practice are looking for an organization that meets their specific needs and interests.
- Membership dues will increase for many of our members (active, associate, student). Only technician dues will decrease. Justifying this to members will be difficult without a compelling reason for merger. What additional benefits or programming can our members expect to see?
- It appears that in the new structure the New Practitioner category is going away. We need new blood in our organization and for leadership succession planning. This program has been successful as students and residents transition into practice.
- Based on membership dues in the proposal, it appears there is a plan to increase technician members. It is unclear where the "home" is for technicians other than the track at Joint Fall Seminar. Is a Technician Chapter with separate chapter meetings maintained? This has been a niche for our organization.

"One vision, one voice" for legislative activities is already being achieved

- Our shared lobbyist, the OSHP-OSPA Joint Legislative Council (OOJLC), and the Oregon Pharmacy Coalition, are valuable collaborations that should continue.
- Since our health-system membership will be diluted, our issues and voice may become diluted. Coalition and lobbying priorities may not adequately reflect health system pharmacists' priorities.
- We have key differences concerning advancement of the profession and how it should be regulated. Bringing "one voice" to the Board of Pharmacy may not be possible.

The potential for evolving governance and administrative structures

- While we recognize that an Executive Director was not part of the proposal, we are concerned that this could be a future development. OSHP's strong volunteer base and leadership pathways must be preserved. An Executive Director structure is non-negotiable since it distances our dedicated members and volunteer leaders from the

important daily work of our organization.

- Alternating community and health-system Presidents means half representation from our leadership each year.

OSHP member poll results should not be equated to member support of a merger

- An initial survey of the membership showed that the small respondent pool wanted the possibility of a merger to be examined more thoroughly. This poll may not be a good marker of the OSHP membership's stance on a merger since there is a difference between being willing to explore an idea and voting to enact it.

We would like to thank each of you for your service and leadership that has helped create the strong organization that OSHP is today. We hope that you will consider our arguments against the merger and are happy to provide further comment or insight during your meeting or in the future.

Sincerely,
The Past Presidents of OSHP

OSHP Past Presidents Signatories

Lynn Belcher, RPh

OSHP Past President 2005-2006

Michael Millard, BSPHarm, MS, RPh, FOSHP

OSHP Past President 1987-1988

Ron Brown, BSPHarm, MS, RPh, FOSHP

OSHP Past President 1975-1976

Deanna Moretz, PharmD, RPh, BCPS

OSHP Past President 2015-2016

Kristy Butler, PharmD, RPh, BCACP, FASHP, FOSHP

OSHP Past President 2007-2008

Steve Mosier, MBA, RPh, CHPHIMS, FOSHP

OSHP Past President 1999-2000

Ian Doyle, PharmD, RPh, BCPS, FOSHP

OSHP Past President 2012-2013

Michelle Murray, BSPHarm, RPh, BCPS

OSHP Past President 2014-2015

Carl Heisel, RPh

OSHP Past President 2000-2001

Helen Noonan-Harnsberger, PharmD, RPh

OSHP Past President 1988-1989

Yvette Holman, PharmD, RPh, BCPS, FOSHP

OSHP Past President 2010-2011

Mihai Onofrei, PharmD, RPh, BCPS

OSHP Past President 2009-2010

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OSHP Past President 2013-2014

Kathy Stoner, PharmD, RPh

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Margaret McGuinness, PharmD, RPh, BCOP, FOSHP

OSHP Past President 2004-2005

Ralph Thonstad, MS, RPh

OSHP Past President 1989-1990

Gerry Migaki, RPh

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Therese Wavrin, RPh

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