## December 7, 2018

Peter Mucchetti, Chief Audit Trust Division Healthcare & Consumer Products Section Dept. of Justice 450 Fifth St. NW Suite 400 Washington, DC 20530

Dear Chief Mucchetti:

I am opposed to the CVS Caremark/Aetna merger and have major concerns.

An insurance company should not own a Pharmacy Benefits Manager (PBM) nor should a PBM own an insurance company. By the same token, a PBM should not own pharmacies nor should a pharmacy chain own a PBM. These are blatant conflicts of interest.

CVS Caremark has been forcing patients/customers to use CVS Pharmacies and CVS mail order and CVS specialty pharmacies, thereby limiting patient access.

The CVS Caremark/Aetna merger will encourage less competition, cause small independent pharmacies to close due to loss of revenue, and cause patients/customers to lose access to local pharmacies in rural America.

This loss of revenue is due to the decreased reimbursements paid to pharmacies. CVS Caremark, already, pays pharmacies below purchase price on many medications and very little on others. It has been proven that CVS Caremark pays pharmacies a low dollar amount, but they charge the insurance company a very much higher amount. It has, also, been proven that CVS Caremark reimburses its own CVS Pharmacies much more than other non-CVS pharmacies.

So, already, CVS Caremark doesn't play fair by not reimbursing a fair dollar amount for each prescription, ignoring state laws, fairness, and determining where a patient/customer may fill/receive their medication.

A PBM and insurance company that owns the largest pharmacy chain should not be allowed to set reimbursement rates and decide which medications are allowed/covered under their plan.

The CVS/Aetna merger will encourage less competition and harm independent providers/pharmacies and their patients.

Please, reconsider and closely review the merger of CVS/Aetna. I feel upon closer scrutiny, that you will agree that this merger should never happen.

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Respectfully, Des

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