

MTM Toolkit Co-Marketing Letter of Agreement

Executed agreements may be returned to PSW

Email: sarahb@pswi.org Fax: (608) 827-9292 Mail: 701 Heartland Trail, Madison, WI 53717

To help improve efficiency, expand pharmacy service offerings, and to assist pharmacies in implementation of medication therapy management services (MTMS), the Pharmacy Society of Wisconsin (PSW) has compiled an **MTM Toolkit CD** as a resource for pharmacists. The MTM Toolkit CD is an electronic compilation of more than 30 modifiable documents and resources.

In cooperation with the National Alliance of State Pharmacy Associations (NASPA), PSW is pleased to offer you, as a NASPA member, a co-marketing agreement to promote the MTM Toolkit CD to your association members. As this letter of agreement outlines, PSW will manage the administration of orders and will provide the product to your members at the low price of \$100 + tax and shipping. In exchange for your marketing efforts, your association will receive \$50 for every MTM Toolkit purchased in your state.

This memorandum describes the terms of agreement between the Pharmacy Society of Wisconsin (PSW) and _____ (*state association*) regarding the promotional marketing of the **MTM Toolkit CD** developed by PSW. Accordingly, _____ (*state association*) agrees to perform the corresponding duties outlined below and shall be compensated in the sum of \$50/MTM Toolkit CD sold within your state. Royalty payments will only be made to state associations that execute a marketing agreement. Payment shall be issued at least quarterly (March, June, September, December) or more frequently with high order volume.

PSW agrees to provide:

- MTM Toolkit CD product and necessary updates
- Administration of orders for MTM Toolkit CD
- Materials to assist in marketing efforts
- Compensation of \$50/MTM Toolkit CD sold to corresponding state association members

State association agrees to:

- Market the MTM Toolkit CD through the association's member communications
 - Provide PSW feedback on utilization of MTM Toolkit CD and suggestions for updates
-

Signed,

Name of Representative and Title (please print)

State Association (please print)

Address

Email

Phone number

Representative signature

Date

Christopher J. Decker, RPh
Pharmacy Society of Wisconsin

Date