STATE OF INDIANA	)	**BEFORE THE INDIANA**
	) SS:	**COMMISSIONER OF INSURANCE**
COUNTY OF MARION	)	
		CAUSE NO.: 24836-PB26-0601-008
IN THE MATTER OF:	)	
	)	
ProCare Pharmacy Benefit Manager, Inc.	)	
1267 Professional Parkway	)	
Gainesville, GA 30507	)	
	)	
Respondent.	)	
	)	
Type of Agency Action: PBM Enforcement	)	
	)	
License Number: 3976438	)	

FINAL ORDER

The Pharmacy Benefit Manager Division of the Indiana Department of Insurance ("Department"), by counsel, Samantha Aldridge, and ProCare Pharmacy Benefit Manager, Inc. ("Respondent"), a licensed pharmacy benefit manager, signed an Agreed Entry which purports to resolve all issues involved in the above-captioned cause number, and which has been submitted to the Commissioner of the Indiana Department of Insurance ("Commissioner") for approval.

The Commissioner, after reviewing the Agreed Entry, which levies a two thousand dollar ($2,000) civil penalty against Respondent for failing to timely report material changes to the Department, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry attached, as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED by the Commissioner as follows:

1. Respondent shall pay a civil penalty in the amount of two thousand dollars ($2,000) to the Department within thirty (30) days after the date of this Final Order.

2. Failure to timely pay the civil penalty may result in the Department taking further administrative action against Respondent's license.

8/6/26
Date Signed

Holly W. Lambert, Commissioner
Indiana Department of Insurance

Distribution:
Samantha Aldridge, Attorney
ATTN: Dan Fetz, Insurance Investigator
Indiana Department of Insurance
311 W. Washington St. STE 103
Indianapolis, IN 46204-2787

ProCare Pharmacy Benefit Manager, Inc.
ATTN: Barbara Rambo
1267 Professional Parkway
Gainesville, GA 30507

STATE OF INDIANA	)	**BEFORE THE INDIANA COMMISSIONER OF INSURANCE**
	) **SS:**	
COUNTY OF MARION	)	
		CAUSE NO.: 24836-PB26-0601-0008
IN THE MATTER OF:	)	
	)	
ProCare Pharmacy Benefit Manager, Inc.	)	
1267 Professional Parkway	)	
Gainesville, GA 30507	)	
	)	
Respondent.	)	
	)	
Type of Agency Action: PBM Enforcement	)	
	)	
License Number: 3976438	)	

AGREED ENTRY

This Agreed Entry is executed by and between the Pharmacy Benefit Manager Division of the Indiana Department of Insurance ("Department"), by counsel, Samantha Aldridge, and ProCare Pharmacy Benefit Manger, Inc. ("Respondent"), to resolve all issues in the above-captioned cause number. This Agreed Entry is subject to the review and approval of Holly W. Lambert, Commissioner of the Indiana Department of Insurance ("Commissioner").

WHEREAS, Respondent is a pharmacy benefit manager ("PBM"), holding license number 3976438 since January 24, 2024;

WHEREAS, on December 9, 2025, as part of Respondent's application for license renewal, Respondent submitted its current list of health plans, which notified the Department of six (6) health plans for the first time;

WHEREAS, Respondent began providing PBM services to the six aforementioned health plans on January 1, 2025, March 1, 2025, and July 1, 2025, respectively;

WHEREAS, Respondent failed to timely disclose six (6) health plans to the Department within sixty (60) days of beginning to provide PBM services to the health plans;

WHEREAS, on December 9, 2025, as part of Respondent's application for license renewal, Respondent submitted its current list of administrative actions;

WHEREAS, on August 19, 2025, Respondent entered into a Consent Order with the Arkansas Insurance Department for reimbursing pharmacies below NADAC that resulted in a civil penalty;

WHEREAS, Respondent failed to disclose the August 19, 2025 Consent Order to the Department within sixty (60) days of occurrence;

WHEREAS, 760 IAC 5-6-1 states, in part, that the Commissioner may levy a civil penalty against a pharmacy benefit manager's license for violations of this article;

WHEREAS, Respondent's conduct is in violation of 760 IAC 5-2-4, an insurance administrative code which states, a pharmacy benefit manager licensee must keep current the information required to be disclosed in its application by timely reporting all material changes to the Department. If there is a material change in the information required by the application, the licensee must provide updated information to the Department within sixty (60) days of the change;

WHEREAS, CEO Barbara Rambo, is authorized to act on behalf of Respondent and obligate it to perform in accordance with this agreement; and

WHEREAS, the Department and Respondent (collectively, the "Parties") desire to resolve this matter without the necessity of a hearing.

IT IS, THEREFORE, NOW AGREED by and between the Parties as follows:

1. The Commissioner has jurisdiction over the subject matter and the Parties to this Agreed Entry.
2. In order to avoid formal litigation in this matter, Respondent has determined that it is in Respondent's best interest to enter into this Agreed Entry. As such, Respondent acknowledges that Respondent executes this Agreed Entry with full realization of its contents and effects.
3. This Agreed Entry is executed knowingly, voluntarily, and freely by the Parties. The Parties agree that the terms of this Agreed Entry constitute final resolution of this matter.
4. Respondent knowingly, voluntarily, and freely waives the right to a public hearing on this matter, including the right to appear in person before the Commissioner, present evidence, cross-examine witnesses, and present arguments.
5. Respondent knowingly, voluntarily, and freely waives the right to judicial review of this matter or otherwise appeal or challenge the validity of this Agreed Entry.
6. Respondent knowingly, voluntarily, and freely waives, releases, and forever discharges all claims or challenges, known or unknown, against the Department, its Commissioner, employees, agents, and representatives, in its individual and official capacities, that arise out of or are related to the Agreed Entry or Final Order, including but not limited to any act or omission as part of the underlying audit, investigation, negotiation, or approval process.
7. Respondent shall pay a civil penalty in the amount of two thousand dollars ($2,000) to the Department within thirty (30) days after the Commissioner signs

the Final Order adopting this Agreed Entry. Failure to timely pay the civil penalty may result in additional administrative action against Respondent's license.

8. Respondent has carefully read and examined this Agreed Entry and fully understands its terms.

9. Respondent has had the opportunity to have this Agreed Entry reviewed by legal counsel of Respondent's choosing, at Respondent's own expense, and is aware of the benefits gained and obligations incurred by the execution of this Agreed Entry. Respondent understands and agrees that the Department cannot give Respondent legal advice.

10. Respondent has entered into this Agreed Entry knowingly, voluntarily, and freely and has not been subject to duress, coercion, threat, or undue influence.

11. This Agreed Entry constitutes the entire agreement between the Parties, and no other promises or agreements, express or implied, have been made by the Department or by any employee, director, agent or other representative thereof to induce Respondent to enter this Agreed Entry.

12. The Department agrees to accept Respondent's compliance with the terms of this Agreed Entry as full satisfaction of this matter and warrants and represents that so long as Respondent complies with the terms of this Agreed Entry, the Department will not bring any further action against Respondent based on the facts that gave rise to this Agreed Entry.

13. In the event the Department finds there has been a breach of any of the provisions of this Agreed Entry, the Department may reopen this matter and pursue alternative action pursuant to Indiana Code § 27-1-24.5-28 and 760 IAC 5-6-1.

14. Respondent waives any applicable statute of limitations for purposes of any enforcement of the terms and conditions of this Agreed Entry.

15. Respondent acknowledges that this Agreed Entry may be admitted into evidence in any judicial or administrative proceeding against Respondent to enforce the terms and conditions contained herein.

16. Respondent understands that this Agreed Entry resolves only the matter pending with the Department and does not affect any criminal prosecution or civil litigation that may be pending or hereinafter commence against Respondent.

17. This Agreed Entry does not in any way affect the Department's authority in future audits, investigations, examinations, negotiations, or other complaints involving Respondent.

18. It is expressly understood that this Agreed Entry is subject to the Commissioner's acceptance and has no force or effect until such acceptance is evidenced by the entry of a Final Order by the Commissioner.

19. Should this Agreed Entry not be accepted by the Commissioner, it is agreed that presentation to, and consideration of this Agreed Entry by the Commissioner, shall not unfairly or illegally prejudice the Commissioner or Respondent from further participation in or resolution of these proceedings.

20. If this Agreed Entry is accepted by the Commissioner, it will become part of Respondent's permanent record and may be considered in future actions brought by the Department or any other regulator against Respondent. It is further understood that, if accepted by the Commissioner, this Agreed Entry and resulting Final Order are public records pursuant to Indiana Code § 4-21.5-3-32 that may

not be sealed or otherwise withheld from the public and may be reported to the National Association of Insurance Commissioners and published on the Department's website as required.

21. Respondent acknowledges that this is an Administrative Action Respondent may be required to report to other jurisdictions in which Respondent is licensed and on future licensing applications.

7/30/26
Date Signed

Samantha Aldridge, Attorney 35162-49
Indiana Department of Insurance

7/28/2026
Date Signed

Barbara Rambo, CEO
ProCare Pharmacy Benefit Manager, Inc.

STATE OF GEORGIA)
) SS:
COUNTY OF Gwinnett)

Before me a Notary Public for Gwinnett County, State of GEORGIA personally appeared, Barbara Rambo on behalf of ProCare Pharmacy Benefit Manager, Inc., and being first duly sworn by me upon oath, says that the facts alleged in the foregoing instrument are true.

Signed and sealed this 28 day of July, 2026.

Kathryn Heppner
Signature

Kathryn Heppner
Printed

My Commission expires: July 12, 2029

County of Residence: Gwinnett

OFFICIAL SEAL
Kathryn Heppner
NOTARY PUBLIC-GEORGIA
Gwinnett COUNTY
My Comm. Expires July 12, 2029

Return executed originals to:
INDIANA DEPARTMENT OF INSURANCE
ATTN: Dan Fetz, Senior Investigator
PBM Division, Suite 103
311 West Washington Street
Indianapolis, IN 46204-2787