American Cancer Society
Cancer Action Network
555 11th Street, NW, Suite 300
Washington, DC, 20004

February 15, 2017

The Honorable David Wilson
Chair, Senate Health & Social Services Committee
Alaska State Senate

The Honorable Shelley Hughes
Alaska State Senate

Re: Support for SB 32

Dear Senators Wilson and Hughes,

The American Cancer Society Cancer Action Network of Alaska (ACS CAN) is an organization dedicated to leveraging the power of government to end suffering and death from cancer and ensuring that investments in research and medical innovation remain a priority. Biologic drugs have provided cancer patients and their physicians with access to improved therapeutic options.

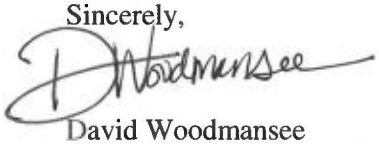
Biosimilars and interchangeable biological products offer potential for increasing accessibility and affordability as they provide competition for biologic drugs in a similar way that generic drugs do for brand-name drugs. The U.S. Food and Drug Administration (FDA) ensures the safety and efficacy of all drugs and biologics. While a biosimilar may be highly similar to an FDA-approved biologic drug, because of the complexities of biologic manufacturing, it is not possible for a biosimilar to be an exact copy of the originator drug. FDA is also the sole entity responsible for deeming a biosimilar drug interchangeable. Interchangeable biosimilar versions of some intravenous cancer drugs are currently in the FDA approval pipeline.

ACS-CAN of Alaska was pleased to work collaboratively in the months leading to session with Senator Hughes and representatives of fellow patient organizations and members of the health care team – physicians, pharmacists, and others – to explore legislation for Alaska that would supply the guidance needed to ensure safe and effective treatments for patients throughout the state, while providing the potential to lower cost burdens for cancer patients. We believe that SB 32 strikes the right balance and, therefore, urge its passage.

We understand there is an amendment under consideration that would require "prior consent," in essence requiring a pharmacist to gain additional consent from a prescriber who has already authorized substitution in a valid prescription. This would impose an unnecessary administrative burden on pharmacists and prescribers that would conflict with federal law, potentially delay the dispensing of needed medication to patients with serious illnesses, and defeat the purposes of the underlying bill. We join our fellow patient organizations and other health care stakeholders in urging any such amendment not be adopted.

Thank you for your consideration in supporting this important legislation.

Sincerely,



David Woodmansee
Director, State and Local Campaigns
American Cancer Society Cancer Action Network, Inc.

CC: Members, Senate Health & Social Services Committee