

March 25, 2024

The Honorable Jesse Sumner
House Labor and Commerce
Alaska State Legislature
State Capitol, 120 4th Street
Juneau, AK 99801

RE: Support for HB 226, Ensuring Timely Access to Patient Medication

Chairman Sumner,

On behalf of the Community Oncology Alliance (COA), we write to express our strong support for House Bill 226, which aims to regulate the practices of "white" and "brown" bagging in insurer and pharmacy benefit manager (PBM) policies.

COA is the only nonprofit organization in the United States dedicated solely to independent community oncology practices, which serve the majority of Americans receiving treatment for cancer. As a representative of community practices in Alaska, we firmly believe that white and brown bagging practices threaten patient safety, compromise treatment efficacy, and pose significant challenges to the continuity of care for Alaskans living with cancer.

White and brown bagging refer to the processes where insurer and PBM affiliated specialty pharmacies mail or deliver cancer medications directly to a physician's office (white bagging) or to the patient's home (brown bagging), rather than allowing the patient's oncologist to directly handle and dispense their medication. This practice is increasingly mandated by health plans and pharmacy benefit managers, under the presumption of assumed cost-savings. However, these processes raise significant concerns for community oncologists and pose substantial risks for patients that ultimately increase the financial burden of the disease.

Under white and brown bagging insurer policies, the integrity and safety of these highly specialized and often fragile cancer medications cannot be guaranteed once they leave the controlled environment of their affiliated specialty pharmacy. Improper handling, storage, or temperature control during shipping can compromise the efficacy of the drugs, ultimately impacting patient outcomes. Additionally, the insertion of untrained individuals, such as patients or family caregivers, into the drug distribution chain introduces unnecessary variables that can further compromise a patient's treatment process.

These insurer policies disrupt continuity of care and impede the ability of oncologists to make timely adjustments to treatment regimens. Because of the policies, dosage changes, which are common in cancer care, may be delayed due to the need to reorder and await delivery of new medication, often further complicating a patient's health. Furthermore, due to these mandates, any unused medications cannot be repurposed, leading to significant waste of these often exceptionally expensive drugs.

COA firmly believes that Alaskans living with cancer deserve uncompromised care, with their treatment overseen and managed by experienced local oncologists and health care teams. White and brown bagging practices undermine this principle and prioritize perceived cost savings over patient safety and quality of care.

We urge the committee to support House Bill 226 and take a stand against these harmful insurer and PBM policies. By ensuring that cancer medications are procured, stored, and administered under the direct supervision of community oncologists, our members and their practices can safeguard the integrity of these life-saving treatments and uphold the highest standards of patient care for Alaskans.

Thank you for your consideration of this critical issue. For a more in-depth look at this issue, we invite you to review the Community Oncology Alliance's [position statement on White and Brown Bagging](#). If you have any follow up questions or would like assistance on any policy issue involving oncology, we can be reached at jlee@coacancer.org.

Sincerely,

James Lee
Director, State Regulation & Policy
Community Oncology Alliance
Communityoncology.org