

## [DATE]

[Clinician Name] [123 Clinician Way] [City, State 12345]

[Your Name] [123 Employee Street] [City, State 12345]

## SAMPLE LETTER: Provider to Employer about Specialty Pharmacy Mandates or "White Bagging"

This sample letter is meant to serve as a guide, and the talking points provided are examples. Be sure to include your personal experience.

Dear [HR/Benefit Coordinator's Name],

I am writing today to express my concerns with **[Insurance Company Name]**'s decision to implement a policy requiring employees to use a specialty pharmacy for certain medications, a practice known as "white bagging." This policy could negatively impact your employees' health, quality of life. and their work performance.

As an infusion provider, I am dedicated to providing my patients with high-quality care that is also cost effective. Given that infusion offices are a more affordable site of care than hospitals, our patients receive excellent care at a lower cost. I want to continue helping your employees manage their health to maximize their productivity, improve their quality of life, and minimize the health care services they need. However, an insurance plan with a specialty pharmacy mandate will threaten your employees' healthcare requirements.

When I am free to source medications from my distributor of choice, your employees can focus on their jobs and do not have to be involved in medical administrative work - they simply arrive for their treatment appointments as scheduled. A specialty pharmacy mandate is one more thing for your employees to worry about. Under a specialty pharmacy model, your employees must be involved in making sure the drug was approved, ordered, shipped, and arrives before their appointments. There is no reason to subject your employees to these complicated processes when my office has been doing this efficiently and effectively ourselves.

**Specialty Pharmacy mandates add unnecessary waste and costs.** Under a specialty pharmacy policy, **[Insurance Company Name]**, **[Company Name]**, and your employees have to pay for their medications *before* they receive them, and even before they get shipped to my office. If for any reason a patient is not able to receive the treatment— maybe the patient's weight or condition has changed – that medication, which has already been paid for, is now *wasted*. By law, it cannot be returned, and it cannot be administered to another patient because it was already paid for specifically for the original patient. These medications cost thousands of dollars and wasting them is completely avoidable and unacceptable.

Receiving the right medication at the right time is imperative to the success of your employees' treatment. Specialty pharmacies add an unnecessary middleman to the healthcare process, increasing the risk of error, such as my office receiving different quantities or doses than were ordered. If my office is forced to use a specialty pharmacy, these issues could delay your employee's treatment resulting



in missed work, disease flare, or other serious health complications. It is crucial for patients to receive the right medication at the right time and a model like this threatens to disrupt that ability.

This policy threatens my ability to keep your employees' health conditions under control. While I understand the need for [Company Name] to reduce healthcare costs, your company's new policy is not the way to achieve that goal. Instead, it will disrupt access to office-based infusion settings. By allowing an insurer to force provider offices like mine into inefficient, wasteful workflows, providers may not be able to administer medications in office-based settings anymore. Losing access to infusion centers would force your employees to receive medication at a hospital infusion center, costing two or three times more for the same service. In some areas, another site of care nearby may not exist; in those cases, employees will travel far distances for treatment and possibly miss work or in the worst-case scenario forgo treatment altogether, resulting in disease flares and costly complications.

I urge [Company Name] to look at how this model has played out in other states and listen to the countless healthcare providers and patients who have voiced similar concerns. As you consider these points, please look closely at who will *really* benefit from a specialty pharmacy mandate – not [Company Name], and certainly not your employees or my patients. Office-based infusion centers are the most economical settings to receive high-quality, specialized infusion care; by choosing a health insurance company with a specialty pharmacy mandate, [Company Name] takes this important option away from their employees. I trust that [Company Name] wants to make the best choice for the company and its employees, and a healthcare plan requiring a specialty pharmacy mandate is not that choice.

Thank you for your time and consideration, and I look forward to your response.

Sincerely,

[Signature]

[Your Name]

[Your Contact Information, if desired]