



[DATE]

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

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

**SAMPLE LETTER:  
Provider to Prescribing Clinician  
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 [Prescribing Clinician Name],

I am writing today to inform you that starting [date], we can no longer care for patients who are customers of [Insurance Company Name]. [Insurance Company Name] requires our practice to purchase medications from specialty pharmacies, a practice known as “white bagging”, and we are financially unable to administer medications to patients who are customers of insurance companies that mandate this practice.

**Specialty pharmacy mandates preclude timely care.** Like you, we are dedicated to getting patients the right care at the right time. However, specialty pharmacies are middlemen who disrupt and delay the treatment process. We have found that issues related to shipping, including incorrect quantities of drugs and drug waste, are rampant and dangerous within the specialty pharmacy model. From receiving less volume than ordered to shipping delays with no explanation, we feel that our reputation is now on the line and has led to patients missing treatments and dealing with resulting disease flares.

**The administrative burden and cost associated with specialty pharmacy requirements is unsustainable for our practice.** As a fellow provider, I’m sure you can understand the struggles associated with keeping a practice financially secure. Specialty pharmacy mandates impose a particularly difficult strain on our practice by requiring us to dedicate inordinate resources, staff bandwidth, and time. Our practice has spent countless hours trying to get in touch with specialty pharmacies after a mistake has been made or when there has been a communication breakdown between the insurance company and the pharmacy. We are an infusion provider, and yet we are forced to play a logistics management role that delays us from caring for patients.

**Like you, we aim to put patients first.** At [Practice Name], we pride ourselves on providing the highest quality of care at the lowest cost for our patients. However, we will have to close our doors if we are forced to abide by wasteful and dangerous specialty pharmacy requirements. We are asking patients who are customers of [Insurance Company Name] to contact [Insurance Company Name] immediately to see if any changes can be made to their plan.

If the choice to use a specialty pharmacy was made by their employer, we recommend contacting their employer’s HR department directly and asking for assistance in changing their plan to allow us to continue caring for them. We ask that you assist us with this messaging for any of your patients who receive



infusions at our practice. It would also be incredibly helpful if you were able to reach out to **[Insurance Company Name]** and let them know the harm caused by these mandates. The National Infusion Center Association (NICA) has excellent template letters available on their website for your use.

Thank you so much for your help and understanding!

Sincerely,

**[Signature]**

[Your Name]

[Your Contact Information, if desired]