



February 2, 2024

United States House of Representatives Committee on Oversight and Accountability

Attn:

Congressman James Comer, Chair
Congressman Jamie Raskin, Ranking Member

Re: Delinking Revenue from Unfair Gouging (DRUG) Act

Submitted via email

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Dear Chairman Comer and Ranking Member Raskin:

OneOncology was founded by community oncologists, for community oncologists, with the mission of improving the lives of everyone living with cancer. Our goal is to enable community oncology practices to remain independent and to improve patient access to care in their communities, all at a lower cost than in the hospital setting. OneOncology supports our platform of community oncology practices through group purchasing, operational optimization, practice growth, and clinical innovation. Our approximately 1,000 cancer care provider partners care for 641,000 patients at more than 350 sites of care nationwide, including approximately 238,000 Medicare beneficiaries per year (inclusive of Medicare Advantage) and approximately 166,000 traditional Medicare beneficiaries per year. Our fifteen OneOncology partner practices combined to offer approximately 700 clinical trials and enrolled approximately 2,000 patients in clinical trials during 2022. OneOncology physician investigators participate in trials beginning at Phase I development of early novel therapies and continuing through late phase trials that lead to new therapies that significantly enhance the lives of patients and families impacted by cancer and blood disorders. Clinical trials in the community oncology setting play a critical role in drug development by including more diverse patient populations than trials conducted exclusively at academic centers.

OneOncology greatly appreciates the interest of the United States House of Representatives Committee on Oversight and Accountability Committee (OAC) in considering *H.R. 6283 - Delinking Revenue from Unfair Gouging (DRUG) Act*, and OneOncology supports the policy objectives of this legislation, specifically:

- Requiring Pharmacy Benefit Managers (PBMs) to charge flat fees for their services, and de-linking the pricing of their services from a percentage of total pharmaceutical spending managed by the PBM. Requiring PBMs to charge clear and transparent flat fees is critical to

reducing perverse incentives that PBMs frequently exploit to garner higher fees for their services by intentionally driving higher drug costs for consumers and health plan sponsors.

- Banning “spread pricing.” In this context spread pricing refers to the common practices of PBMs which, in effect, allow them to retain profits from charging health insurance plan sponsors higher prices for a drug relative to the price that the PBM has negotiated with the drug manufacturer for the same drug. Spread pricing is antithetical to the pharmaceutical price transparency regulations that began to take effect throughout 2021.
- Banning “patient steering.” In this context patient steering refers to the common practices of PBMs in which PBMs encourage or require patients to use pharmacies that are affiliated with the PBM instead of a community pharmacy of the patient’s choice. Such patient steering frequently involves creating financial disincentives for patients to use a community oncology practice pharmacy relative to a pharmacy that is affiliated with the PBM. Unlike PBM-affiliated pharmacies, community oncology practice pharmacies, also known as medically integrated specialty pharmacies, are overseen by clinical pharmacists who work alongside the patient’s medical oncologist, have real-time access to the electronic health record and provide better-coordinated management of comorbidities, laboratory results, treatment side effects, and response to therapy. Studies have shown that medically integrated specialty pharmacies improve medication adherence and mitigate patient financial toxicity by helping patients access various sources of financial assistance.

Each of these policy objectives noted above have a long history of bipartisan legislative support. Similarly the principles of price transparency included in this proposed legislation have been championed by both parties during their control of the executive branch. OneOncology fully supports these objectives of HR 6283 and appreciates the OAC’s consideration of this bill.

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You may contact me at any time with any questions regarding these comments.

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