



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2267		DATE: 2/28/2024
COMMITTEE: Special Committee on Public Policy		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: ALEX TUTTLE		PHONE NUMBER: 636-751-5022
REPRESENTING: TUTTLE & ASSOCIATES		TITLE: TUTTLE & ASSOCIATES
ADDRESS: 62069 ALLEE RD		
CITY: CALIFORNIA		STATE: MO
		ZIP: 65018
EMAIL: aletutt@gmail.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/28/2024 2:18 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		
Testimony in support of HB2267 on behalf of Hannibal Regional Healthcare System.		



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: AMY WEBER		PHONE NUMBER: 816-517-3901	
BUSINESS/ORGANIZATION NAME: FITZGIBBONS HOSPITAL		TITLE: DIRECTOR OF PAYOR, PUBLIC & GOVERNMENT RELATIONS	
ADDRESS: 2305 S. 65 HWY			
CITY: MARSHALL		STATE: MO	ZIP: 65340
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: AMY WICKMAN, PHARMD		PHONE NUMBER: 573-458-3885	
BUSINESS/ORGANIZATION NAME: PHELPS HEALTH		TITLE: ONCOLOGY PHARMACIST	
ADDRESS: 1060 W. 10TH			
CITY: ROLLA		STATE: MO	ZIP: 65401
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: ANDREW DAWSON		PHONE NUMBER: 660-826-8833
BUSINESS/ORGANIZATION NAME: BOTHWELL REGIONAL HEALTH AND CITY OF SEDALIA		TITLE: HOSPITAL TRUSTEE/MAYOR
ADDRESS: 601 E. 14TH STREET		
CITY: SEDALIA		STATE: MO
		ZIP: 65301
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: ANGELA BROCKS		PHONE NUMBER: 314-488-8641	
BUSINESS/ORGANIZATION NAME: FOUR RIVERS COMMUNITY HEALTH CENTER		TITLE: DIRECTOR OF PHARMACY SERVICES	
ADDRESS: 1081 EAST 18TH STREET			
CITY: ROLLA		STATE: MO	ZIP: 65401
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCAT		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/28/2024 11:56 PM
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: BRENT HEMPHILL		PHONE NUMBER:
REPRESENTING: MOSAIC LIFE CARE		TITLE:
ADDRESS:		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL: meagan@brenthemphill.com	ATTENDANCE: Written	SUBMIT DATE: 2/28/2024 2:50 PM
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: BRENT HEMPHILL		PHONE NUMBER:
REPRESENTING: BJC HOSPITAL		TITLE:
ADDRESS:		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL: meagan@brenthemphill.com	ATTENDANCE: Written	SUBMIT DATE: 2/28/2024 2:49 PM
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: CARA HOOVER		PHONE NUMBER: 573-356-9698	
REPRESENTING: SSM		TITLE:	
ADDRESS: PO BOX 2322			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL: cara@heartlandpolicyadvisors.com	ATTENDANCE: Written	SUBMIT DATE: 2/28/2024 2:39 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			
Support HB 2267			



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: CASEY BURTON		PHONE NUMBER: 573-458-2043	
REPRESENTING: PHELPS HEALTH		TITLE:	
ADDRESS: 1000 WEST TENTH STREET			
CITY: ROLLA		STATE: MO	ZIP: 65401
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: CHANCE HEPOLA		PHONE NUMBER: 580-235-6751	
BUSINESS/ORGANIZATION NAME: COX HEALTH		TITLE: GOVERNMENT RELATIONS MANAGER	
ADDRESS: 3801 S. NATIONAL AVENUE			
CITY: SPRINGFIELD		STATE: MO	ZIP: 65807
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: CRAIG THOMPSON		PHONE NUMBER: 660-890-7103	
BUSINESS/ORGANIZATION NAME: GOLDEN VALLEY MEMORIAL HEALTHCARE		TITLE: CHIEF EXECUTIVE OFFICER	
ADDRESS: 1600 N. SECOND STREET			
CITY: CLINTON		STATE: MO	ZIP: 64735
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: DARINDA DICK		PHONE NUMBER: 816-582-1130	
BUSINESS/ORGANIZATION NAME: WESTERN MISSOURI MEDICAL CENTER		TITLE: CHIEF EXECUTIVE OFFICER	
ADDRESS: 403 BURKARTH ROAD			
CITY: WARRENSBURG		STATE: MO	ZIP: 64093
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: JODIE GREGG		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: JOHN BARDGETT		PHONE NUMBER: 636-530-9392
REPRESENTING: UNIVERSITY HOSPITAL KC		TITLE:
ADDRESS: 16141 SWINGLEY RIDGE ROAD, SUITE 110		
CITY: CHESTERFIELD		STATE: MO
		ZIP: 63107
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: JORGEN SCHLEMEIER		PHONE NUMBER: 573-634-4876
REPRESENTING: MISSOURI PHARMACY ASSOCIATION, MISSOURI PRIMARY CARE ASSOCIATION, PREFERRED FAMILY HEALTH		TITLE:
ADDRESS: 213 E. CAPITOL AVE.		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: KATHI HARNESS		PHONE NUMBER: 573-634-5200
REPRESENTING: ST. LUKE'S HEALTH SYSTEM		TITLE:
ADDRESS: PO BOX 2302		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: KATIE REICHARD EIKEN		PHONE NUMBER:
REPRESENTING: MO PRIMARY CARE ASSOCIATION		TITLE:
ADDRESS:		
CITY: JC	STATE: MO	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: MARIAH HOLLABAUGH		PHONE NUMBER: 417-328-6684	
BUSINESS/ORGANIZATION NAME: CITIZENS MEMORIAL HOSPITAL		TITLE: DIRECTOR OF PHARMACY	
ADDRESS: 1500 N. OAKLAND			
CITY: BOLIVAR		STATE: MO	ZIP: 65613
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: ROB MONSEES		PHONE NUMBER: 573-999-9652
REPRESENTING: MISSOURI HOSPITAL ASSOCIATION		TITLE:
ADDRESS: PO BOX 60		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: RYAN KRUGER		PHONE NUMBER: 417-522-6862
BUSINESS/ORGANIZATION NAME: JORDAN VALLEY COMMUNITY HEALTH CENTER		TITLE: DIRECTOR OF PHARMACY
ADDRESS: 440 E. TAMPA ST		
CITY: SPRINGFIELD		STATE: MO
		ZIP: 65809
EMAIL: ryan.kruger@jordanvalley.org	ATTENDANCE: Written	SUBMIT DATE: 2/28/2024 12:55 PM
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In support of HB 2267.		



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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: SCOTT CROUCH		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME: OZARKS COMMUNITY HEALTH CENTER		TITLE:
ADDRESS:		
CITY: HERMITAGE		STATE: MO
EMAIL:		ZIP:
ATTENDANCE:		SUBMIT DATE: 2/28/2024 12:00 AM
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: TOM GREENLEE		PHONE NUMBER: 573-882-8700	
BUSINESS/ORGANIZATION NAME: UNIVERSITY OF MISSOURI HEALTH CARE		TITLE: SENIOR DIRECTOR OF PHARMACY SERVICES	
ADDRESS: 1 HOSPITAL DRIVE			
CITY: COLUMBIA		STATE: MO	ZIP: 65212
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: TONIANN RICHARD		PHONE NUMBER: 816-807-7774	
BUSINESS/ORGANIZATION NAME: HCC NETWORK		TITLE: CHIEF EXECUTIVE OFFICER	
ADDRESS: 819 S. BUSINESS HWY 13			
CITY: LEXINGTON		STATE: MO	ZIP: 64067
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: WILL MARRS		PHONE NUMBER: 417-848-8561	
REPRESENTING: MERCY		TITLE:	
ADDRESS: 817 SOUTH PICKWICK AVENUE			
CITY: SPRINGFIELD		STATE: MO	ZIP: 65804
EMAIL: willmarrs@gmail.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/28/2024 12:06 PM	

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340B protections help to maintain operations for struggling rural providers as many hospitals in rural Missouri face the possibility of closure. Ensuring that patients have ready access to life-saving drugs is also a crucial component of this bill which has our support.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: DUSTIN BACKES		PHONE NUMBER: 573-694-1010	
REPRESENTING: PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION		TITLE:	
ADDRESS:			
CITY:		STATE: MO	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: LOUISE PROBST		PHONE NUMBER: 314-721-7800	
BUSINESS/ORGANIZATION NAME: ST. LOUIS AREA BUSINESS HEALTH COALITION		TITLE: EXECUTIVE DIRECTOR	
ADDRESS: 8888 LADUE RD			
CITY: ST. LOUIS		STATE: MO	ZIP: 63124
EMAIL: lprobst@stlbhc.org	ATTENDANCE: Written	SUBMIT DATE: 2/28/2024 9:03 AM	

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Dear Members of the House Special Committee on Public Policy: Thank you for this opportunity to voice our strong opposition to HB 2267. The St. Louis Area Business Health Coalition (BHC) is a non-profit organization that has represented the region’s employers on issues of health care for over 40 years. While we appreciate the intent of this bill, if passed, it will burden employers and Missouri workers with even higher health care costs. Rise in Specialty Drug Costs Specialty drugs offer breakthrough treatments for serious and rare conditions, but they often come with expensive price tags. According to AARP, in 2020 the average annual cost for specialty medications was \$84,442, with some reaching millions of dollars in annual spend while requiring continuous treatment. As a result, even a small number of specialty drug prescriptions can mean dramatic increases in expenditures. For example, within the pharmacy benefit of BHC members, specialty medications represent only 1% of all prescriptions but account for upwards of 50% of overall drug spending and this does not include specialty drug spending in the medical benefit, which is a top cost concern of employers. We recognize that under the traditional buy-and-bill process, a health care provider will purchase, store, and administer these products; however, this generally occurs with huge markups on final bills. While Medicare Part B plans have capped reimbursement at the average sales price plus 6%, commercial payers face rates two to three times higher than other channels. According to an August 2023 report by PhRMA, hospitals charge between two to seven times what they pay for a drug, with an average markup of approximately 500%, and are reimbursed 200% of what they paid to acquire the drug. Considering the outlandishly high prices of these drugs, even a small percentage markup can translate to a handsome profit and create misaligned incentives. In recent years, profits from the administration of these high-cost pharmaceuticals have fueled the acquisition of physician practices by health systems and private equity. “White Bagging” Restrictions As a result of these egregious pricing practices, “white bagging” emerged as an opportunity to control the cost of specialty medications. Using this model, employers engage a pharmaceutical supplier to deliver the patient’s specific medication directly to the site of care for provider administration at the scheduled time. By removing health systems as the purchaser of these specialty medications, employers and patients are able to avoid unjust markups. Medical providers still receive a fee for administering the drug, but no longer have the incentive to profit unduly on the medications. These cost savings benefit the patient and the employer. If passed, HB 2267 would bring greater financial hardship to Missouri workers and their families. “White bagging” would not be necessary if health systems, providers, and their financiers would charge their acquisition price and a reasonable fee for procurement, storage, and administration. If the goal is to stop “white bagging,” the legislature could require Missouri providers to adhere to CMS rules on pricing and administration of specialty medication. 340B Abuses Section 340B of the Public Health Service Act allows health care organizations providing care for large

numbers of uninsured and low-income patients to obtain drugs at deeply discounted prices. Designed to support hospitals that serve high volumes of safety net patients, "340B" status has grown to include many hospitals and retail pharmacies without a predominant safety net population. In fact, many "340B" pharmacies serve large numbers of commercially insured patients, and often, claims coming from a "340B" eligible pharmacy are for a commercially insured person. Due to the steep discount required through the 340B program, pharmacy manufacturers do not offer rebates on a "340B claim." Employers contractually obligate their Pharmacy Benefit Manager (PBM) to discern whether a prescription filled from a "340B" pharmacy is an eligible "340B claim," or simply a commercial claim filed at a pharmacy serving both populations. The provisions being considered in these bills would limit a PBM's ability to refute "340B claims" to obtain and collect rebates on behalf of an employer sponsored plan. HB 2267 would allow "340B" providers to profit immensely off the backs of Missouri workers and employers by diminishing rebates, putting employers and their employees at risk of even higher spend for brand drugs. These acts are unsustainable for employers, plan members, and their families. For these reasons, the employer members of the St. Louis Area Business Health Coalition urge you to oppose the passage of HB 2267. By restricting "white bagging" and propelling the opportunity for abuses of the 340B program, this legislation will result in unfavorable cost increases for Missouri businesses, workers, and families, leading to greater concerns around affordability and access for life-saving treatments. With appreciation, Louise Y. Probst Executive Director



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MARK DALTON		PHONE NUMBER: 314-644-4800	
REPRESENTING: MID AMERICA CARPENTERS REGIONAL COUNCIL		TITLE:	
ADDRESS: 1401 HAMPTON AVENUE			
CITY: ST. LOUIS		STATE: MO	ZIP: 63139
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS APPEARANCE FORM

BILL NUMBER: HB 2267		DATE: 2/28/2024	
COMMITTEE: Special Committee on Public Policy			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MICHAEL HENDERSON		PHONE NUMBER: 573-893-4241	
REPRESENTING: MISSOURI INSURANCE COALITION		TITLE:	
ADDRESS: 220B E HIGH ST			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	

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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: RANDY SCHERR		PHONE NUMBER: 573-636-6200	
REPRESENTING: PHRMA		TITLE:	
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CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: rjscherr@swllc.us.com	ATTENDANCE: Written	SUBMIT DATE: 2/27/2024 4:34 PM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: RANDY SCHERR		PHONE NUMBER: 573-636-6200	
REPRESENTING: PHRMA		TITLE:	
ADDRESS: 101 E. HIGH			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: rjscherr@swllc.us.com	ATTENDANCE: Written	SUBMIT DATE: 2/27/2024 4:38 PM	

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Chairman Thompson and Committee Members, My name is Randy Scherr today representing PhRMA. Thank you for having me here today to offer testimony in opposition to House Bill 2267 specifically Section 376.414 subsection 3 on page 4. PhRMA agrees that it is important to ensure the 340B program truly benefits the safety net that helps underserved communities in Missouri and is committed to this crucial federal program, but respectfully disagrees that this legislation will serve that purpose. The federal 340B program was established by Congress in 1992 to help safety-net entities access affordable drugs to treat their low-income and uninsured patients. Due to weak oversight, the program has expanded in a way that has allowed covered entities to divert to their own benefit money intended to help patients get better care and afford their medicines. As a result, the 340B program has changed and grown dramatically since its establishment, yet charity care at 340B hospitals has declined below national averages. The 340B program is a comprehensive federal program that is governed exclusively by federal law. States do not have the authority to create new requirements that are not in the federal statute or that conflict with the statute. Significant reform is needed to ensure that the program is benefitting the patients that it is intended to serve. This reform must occur at the federal level to systemically address the problems that have permitted the program to stray from its original intent which is why PhRMA is 100 percent on the record and part of a coalition seeking reforms at the federal level. House Bill 2267 would exacerbate existing problems in the program by forcing manufacturers to ship 340B drugs and extend 340B pricing to contract pharmacies, which are not mentioned in the federal 340B statute and have become significant revenue generators for certain covered entities, profit-motivated chain pharmacies, PBMs, third-party administrators, data vendors, and other middlemen. The bill's provisions directly conflict with the federal 340B program's rules and enforcement regime and restrict manufacturers' ability to impose reasonable conditions that are allowed by the federal 340B statute on sales of covered drugs. The requirements in this bill benefit the thousands of contract pharmacies that are located out-of-state and large chain pharmacies, not patients. Missouri's 340B hospitals have nearly 1,500 contracts with pharmacies in 33 other states and Puerto Rico, including states as far away as Hawaii and Massachusetts. In addition, whether manufacturers can be required to ship 340B drugs to contract pharmacies is currently being litigated in several federal courts across the country. Arkansas and Louisiana have enacted laws similar to SB 2267 that are being challenged in federal court. Rather than policies that would enhance the bottom line of supply chain stakeholders, patients need concrete reforms that will help lower the price they pay for medicines at the pharmacy, such as making monthly costs more predictable, making cost sharing assistance count, and sharing negotiated savings on medicines with patients. PhRMA is committed to safeguarding the 340B program and supports efforts to ensure that it serves the communities that depend on it. However, we believe this legislation will not further that goal. I

appreciate your time today and respectfully ask that you remove Subsection 3 of Section 376.414 on page 4 of House Bill 2267. Thank You.Randy Scherr



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SHANNON COOPER		PHONE NUMBER: 660-890-1432	
REPRESENTING: AMERICA'S HEALTH INSURANCE PLANS & BLUE CROSS BLUE SHIELD OF KC		TITLE:	
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CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: NICHOLAS TELESCO		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME: ASSOCIATION FOR CLINICAL ONCOLOGY; MISSOURI ONCOLOGY SOCIETY		TITLE:
ADDRESS:		
CITY: ALEXANDRIA		STATE: VA
		ZIP: 22314
EMAIL: nicholas.telesco@asco.org	ATTENDANCE: Written	SUBMIT DATE: 2/23/2024 1:25 PM
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Dear Chair Thompson and Members of the House Special Committee on Public Policy, The Missouri Oncology Society (MOS) and the Association for Clinical Oncology (ASCO) write in support of efforts to prohibit mandatory white bagging and all brown bagging requirements from insurers so that patients can obtain clinician-administered drugs from their health care providers, thereby preserving timely and consistent delivery of high quality, patient-centered care. MOS is a community of oncologists, nurse practitioners, physician assistants, and other allied health professionals who provide a powerful voice for multidisciplinary cancer care teams and the patients they serve. ASCO is the world's leading professional society representing physicians who care for people with cancer. With nearly 50,000 members, our core mission is to ensure that cancer patients have meaningful access to high-quality, equitable cancer care. Traditionally, the acquisition of anti-cancer drugs is managed in the independent practice or hospital setting where chemotherapy administration is overseen by the treating physician. The practice or hospital pharmacy purchases, stores, and administers these agents under strict handling and administration standards. Although clinicians prepare detailed treatment plans, drug regimens often change on the day of treatment due to clinical circumstances. Administration may be adjusted according to criteria, such as patient weight, comorbidities, lab reports, guidelines, and other clinical data. Brown bagging and mandatory white bagging policies remove the physician's ability to control the preparation of drugs. Under a mandatory white bagging policy, insurers require physicians to obtain drugs purchased and handled by payer-owned or affiliated pharmacies, while under a brown bagging policy payers require the drug to be shipped from a pharmacy directly to the patient to bring to the provider's office for administration. Both policies require additional coordination with patients and physicians and could delay or disrupt treatment plans and decisions. Day-of treatment changes can lead to a delay in care if a physician must place a new order, requiring the patient to return on a later date to receive their treatment. This can result in significantly decreased chances of a successful clinical outcome for the patient as well as potential adverse effects on patient health, including toxic reactions. When treatment plans are modified on the day-of treatment, brown bagging and mandatory white bagging policies can also lead to waste if an unused portion of a previously dispensed drug cannot be used for a different patient. Many anti-cancer drugs are highly toxic and require special handling when discarded. The burden of unnecessary waste related to white bagging and brown bagging falls to practices and hospitals, which must dispose of drugs according to state and federal requirements. MOS and ASCO recognize that white bagging may be necessary in some settings. However, mandatory white bagging and all instances of brown bagging are not appropriate and can jeopardize the delivery of high-value, high-quality care. For these reasons, we support any efforts to prohibit mandatory white bagging and all instances of brown bagging in

Missouri. For a more detailed understanding of our policy on this issue, we invite you to read the ASCO Position Statement on White Bagging and the ASCO Position Statement on Brown Bagging by our affiliate, the American Society of Clinical Oncology. MOS and ASCO welcome the opportunity to be a resource for you. Please contact Nick Telesco at ASCO at Nicholas.Telesco@asco.org if you have any questions or if we can be of assistance. ? Sincerely,

Yifan Tu, MD
Everett E.

VokesPresident

Chair of the BoardMissouri Oncology Society
Association for Clinical Oncology