

Community Oncology Files Amicus Brief with Supreme Court Supporting State Regulation of PBMs

COA and Practices Strongly Support Right of States to Step Up and Do What is Right for Vulnerable Patients

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Ted Okon, executive director of COA

The Community Oncology Alliance and several leading community oncology practices filed an Amicus Curiae brief with the Supreme Court this week supporting the rights of states to regulate Pharmacy Benefit Managers (PBMs).

In [the brief](#), community oncology strongly supports the need for states to be able to stop PBM abuses, especially those that are hurting patients with cancer. In recent years, PBMs have increasingly inserted themselves between oncologists and their patients, adversely impacting the delivery of cancer care.

“The constitution is clear that elected officials at the state level have a duty and authority to enact policies to protect the health and well-being of their citizens. Unfortunately, inaction by Congress and misguided policy by this administration have allowed PBMs to increasingly dominate our cancer care system. We applaud all the states stepping up to stop PBM abuses,” said Ted Okon, executive director of COA. “PBMs have been nothing but a plague for cancer patients, who face delays and denials in accessing their life-saving medications. Arkansas and other states must be allowed to do what is right for vulnerable patients by regulating PBMs.”

• [Read COA's Amicus Curiae brief](#) in Rutledge v. the Pharmaceutical Care Management Association.

The case before the Supreme Court is Rutledge v. the Pharmaceutical Care Management Association, and it is set to be heard in late April. The Arkansas Attorney General is Leslie Rutledge and the PCMA is the professional lobbying group that represents PBMs. The PCMA sued the state of Arkansas after it found that PBMs were violating the state's Deceptive Trade Practices Act, reimbursing pharmacies below the pharmacies' cost to acquire the medication.

The details of this case and news stories about PBMs typically focus on the adverse financial impact of PBMs on pharmacy providers, which the community oncology brief does as well. However, the brief also informs the court how “low-ball” reimbursement tactics are being used by PBMs to steer business to their own mail-order pharmacies, which is adversely impacting patient care. COA collects reports of [real-life patient horror stories](#) at the hands of PBMs and the suffering they cause by delaying delivery of critical cancer drugs, denying coverage, and arguing with physicians over proper treatment, among other abuses. These include PBM horror stories like those published in the Fresno Bee, Columbus Dispatch and STAT News.

Although Congress is considering legislation to regulate PBMs' bad behavior, the Administration has actually given PBMs more power, instead of less. These include dangerous practices like “fail-

first” step therapy and formulary restrictions, which oncologists know don’t work and actually harm patients. Community oncology has been warning that without significant state or federal action, PBM abuses will undermine the incredible, lifesaving progress the United States has made in treating cancer and reducing mortality due to the disease.

COA and community oncology practices are actively working to address the high cost of cancer drugs and services. As the frontline providers of care for the majority of Americans battling cancer, independent community oncologists are uniquely positioned to give insight into the real-world impact of policymaking on patients, providers, and the overall health care system. Community oncology practices that joined COA in this brief include Florida Cancer Specialists & Research Institute; New York Cancer and Blood Specialists; Regional Cancer Care Associates; Tennessee Oncology; Texas Oncology; and the Quality Cancer Care Alliance.

Read COA’s Amicus Curiae brief in Rutledge v. the Pharmaceutical Care Management Association at <https://communityoncology.org/wp-content/uploads/2020/03/18-540tsacCommunityOncologyAllianceInc.pdf>

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