

September 18, 2023

The Honorable John Barrasso, M.D.  
United States Senate  
307 Dirksen Senate Office Building  
Washington, D.C. 20510

The Honorable Michael Burgess, M.D.  
United States House of Representatives  
2161 Rayburn House Office Building  
Washington, D.C. 20515

The Honorable Greg Murphy, M.D.  
United States House of Representatives  
407 Cannon House Office Building  
Washington, D.C. 20515

Dear Senator Barrasso, Congressman Burgess, and Congressman Murphy,

On behalf of The US Oncology Network (The Network), which represents more than 10,000 oncology physicians, nurses, clinicians, and cancer care specialists nationwide, I write to express strong support for S.2764/ H.R. 5391, the Protecting Patient Access to Cancer and Complex Therapies Act, which would hold providers harmless from adverse impacts resulting from the law's prescription drug negotiation provisions.

The Network is one of the nation's largest and most innovative networks of community-based oncology providers, treating more than 1.2 million cancer patients annually in more than 450 locations across 28 states. The Network unites over 2,300 like-minded physicians around a common vision of expanding patient access to the highest quality, state-of-the-art care close to home and at lower costs for patients and the health care system.

The Inflation Reduction Act's drug negotiation provisions direct the Secretary of Health and Human Services to negotiate a Maximum Fair Price for certain drugs without market competition in Medicare Parts B and D. The provisions also alter the manner in which providers are reimbursed for administering those medications and could result in unintended consequences to patient care. While we appreciate efforts to reduce patient out-of-pocket costs that often lead to financial toxicity, healthcare providers will be stuck in the middle of the IRA's negotiation process, which could ultimately threaten patient access to care.

The community-based setting offers cancer patients access to high-quality, cost-effective care in a location convenient to their home, family, caregivers, and support systems. Over the past decade, rising financial pressures have contributed to the closure of many community oncology practices, leaving patients with few options but to receive care in a less convenient, more costly setting. Today, providers are facing numerous challenges related to rising inflation, workforce shortages, the long term effects of the COVID-19 pandemic, and Medicare payment reductions.

The IRA's drug negotiation provisions are unprecedented and wide ranging. They will have downstream impacts on providers, creating additional uncertainty and reimbursement pressures. If care continues to shift from the community setting to more expensive hospital settings, costs will increase for patients, the Medicare program, and the overall U.S. health system, which is the opposite of the IRA's intent.



The Protecting Patient Access to Cancer and Complex Therapies Act would ensure patients receive the benefit of lower prescription drug costs without unfairly penalizing providers. This important legislation removes physicians from the middle of the price negotiation process and preserves patients' access to treatments and therapies they need. On behalf of the nation's leading community cancer care providers, we appreciate your recognition of the financial pressures facing independent providers today and thank you for your leadership on this issue.

Sincerely,

Marcus Neubauer, MD  
Chief Medical Officer  
The US Oncology Network