

Richmond Times-Dispatch

[Letter: Spanberger should veto SB 271 and HB 483](#)

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As a practicing community oncologist in Winchester, I support efforts to make prescription drugs more affordable. My patients face crushing health care costs daily, and I see firsthand how financial stress compounds cancer diagnoses. I appreciate the General Assembly's intent to address affordability. But good intentions alone do not make good policy — especially in cancer care, where lawmakers must avoid creating new barriers.

Gov. Abigail Spanberger recognized this risk, proposing amendments to SB 271 and HB 483. Her changes thoughtfully addressed concerns from physicians and community oncology practices statewide. With those amendments rejected, the bills return to her unchanged.

This distinction is critical. Community practices like mine must purchase, store, prepare, and administer expensive therapies before reimbursement. Policies ignoring these real costs put practices in an unsustainable position, leading to fewer services, reduced options, consolidation and patients shifted to costlier hospital systems.

The drug policy debate too often misses this. Affordability matters greatly — but does the proposal cut patient costs or just shift burdens while risking access? Virginia should target true drivers like insurance design and pharmacy benefit managers, not unproven policies promising savings that may never reach patients.

Solutions must include front-line physicians, pharmacists and practices. Governor Spanberger was right to improve these bills. Without changes, she should veto SB 271 and HB 483.

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