Committee: New York City Chapter of Health-system Pharmacists

Topic: White Bagging Mandates

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Whereas, health systems have well established medication-use policies and distribution practices in place to ensure patient safety and,

Whereas, payer-mandated white bagging circumvents health systems' medication ordering, verification, and distribution policies and,

Whereas, payer-mandated white bagging poses a patient-safety issue by contracting with payer-mandated pharmacys without access to patients' clinical status and,

Whereas, delays in patient care may be delayed due to shipping delays, integrity of medication storage, acute changes in therapy and,

Whereas, an increasing number of states have moved to prohibit or curtail white bagging (MA: Massachusetts identifies white bagging as "redispensing" which is prohibited. (247 CMR 09.01(4); LA: Many hospitals supported a bill that would block the practice of white bagging. The bill passed the Louisiana House and Senate nearly-unanimously, and was signed by Governor Edwards on June 1, 2021 (LA SB191).) and,

Whereas, national associations including the American Pharmacists Association (APhA), Hematology/Oncology Pharmacy Association (HOPA), the American Hospital Association (AHA) and American Society of Health-System Pharmacists (ASHP) are banding together to advocate with policymakers to prohibit health plans and pharmacy benefit managers from requiring white bagging of clinician-administered drugs, therefore, be it

Resolved that:

The New York State Council of Health-system Pharmacists opposes the use of payer mandated White Bagging as a means of drug distribution within health-systems

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References

https://www.marwoodgroup.com/wp-content/uploads/2021/11/White-Bagging-Whitepaper-11_24_2021.pdf