



Ohio Hematology Oncology Society  
2150 W. 117<sup>th</sup> Street, #1261  
Cleveland, Ohio 44111  
614-721-2551  
[www.OHOS.org](http://www.OHOS.org)

December 4, 2024

The Honorable Brian Lampton  
Chairman, Ohio House Insurance Committee  
77 South High Street, 13<sup>th</sup> Floor  
Columbus, Ohio 43215

Dear Chairman Lampton,

I am writing on behalf of the Ohio Hematology Oncology Society (OHOS), representing over 220 oncology and hematology providers across Ohio. Our organization is dedicated to advancing the care of patients with cancer by advocating for policies that improve access to quality healthcare and remove barriers to early detection and treatment. I am providing some rebuttal statements to comments made in opponent testimony by the Pharmaceutical Care Management Association (PCMA) on November 20, 2024, on House Bill 505.

PCMA stated that, “The accreditation ensures the pharmacy’s expertise dealing with specialty drugs or another special area of pharmacy care (such as home delivery), and its overall commitment to quality and safety. As scope of practice expands for pharmacists and the medications become more complex, pharmacy accreditation will become more essential for demonstrating high expertise in caring for patient and ensuring patient safety.” Also in light of direct questioning of this witness and not providing a clear answer on the actual cost to a pharmacy of additional accreditation above that required by the State Board of Pharmacy, I am providing real-time examples of actual costs oncology pharmacies are currently facing and which House Bill 505 seeks to remedy. From Columbus Oncology, their lead pharmacist shared the response to the following questions:

1. **What are the additional costs that PBMs are putting on our pharmacies for accreditation? The cost of accreditation varies by accrediting body** – for example, ACHC and NCODA are ~\$15,000; URAC is ~\$50,000. And the “how you get accredited differs slightly re: application process, and inspection for accreditation.
2. **Do we have to be accredited by each PBM with whom we contract?** Most PBMs, my understanding is, will eventually require it; it just depends on “when you catch their attention.” Most do have a question related to it on their annual re-credentialing site.
3. **How much staff time is dedicated to the additional accreditations?** It does take a lot of staff time to ensure that policies are in place, up to date, and reviewed. I would say ~4-5 hours per month dedicated to ensuring this.
4. **How long are the accreditations valid?** Those listed above are good for 3 years.
5. **Additionally, do we have audit costs that our members pay to satisfy the PBMs for various requested documents? Are there audit costs related to the accreditation?** This I don’t know – I think it depends on how much internal time you devote to it. If you need to hire an outside consultant to get “accreditation-ready,” then yes – that can be upwards of an addition \$15-30K. I do know a lot of independent practices that do hire outside consultants for this purpose.
6. **Anything else that we need/want to share with the committee that cost us money on these matters.** I do understand that from an accreditation agency perspective, that the intent is to meet quality, financial ethics, and patient safety standards. However, given all the horror stories we get from our patients that have *come* from PBMs to us, the fact that it is the PBMs that are mandating we get accredited in order to service their patients, is quite frankly, offensive on so many levels. If they were to actually take note of what we do for our patients on a day to day basis in more of a “checklist” type of audit on a random list of patients (which they do send us anyway, at times), and note that we NEVER have take-backs because we satisfy all that we need to do, then they don’t really need the accreditation. It’s just making us jump through hoops because they can.

Mr. Chairman, while this is a summary of just one practice’s response, OHOS believes this is an indicative response to this accreditation situation. It is for this reason that we strongly support this provision in House Bill 505 and ask for members of the House Insurance Committee to favorably report House Bill 505.

Sincerely,

Michelle Weiss, CHONC  
Executive Director, Ohio Hematology Oncology Society

OHOS Board Members

*Slobodan Stanic, MD - President*  
*Shabana Dewani, MD - Trustee*

*Charles Bane, MD - Vice-President*  
*Raza Khan, MD - Trustee*