

March 4, 2026

The Honorable Gayle Manning
The Honorable Meredith Craig
House Insurance Committee
Ohio House of Representatives
Columbus, Ohio

Dear Representatives Manning and Craig and House Insurance Committee:

On behalf of Wooster Community Hospital Health System, we write to express our strong support for your proposed legislation, H.B. 682, to protect independent hospitals from the practice of white bagging in Ohio.

As a community hospital serving patients across our rural and regional communities, we are deeply concerned about the impact white bagging has on patient safety, continuity of care, and the financial stability of community-based providers. Over 7% of our most recent quarter's chemotherapy doses were impacted by this white bagging practice and approximately 5% of our other infused specialty pharmacy medications for the same period.

Patient Safety and Clinical Integrity

White bagging disrupts established safety protocols by requiring medications—often high-cost, complex oncology therapies—to be shipped from third-party specialty pharmacies directly to physician offices or hospitals. This practice removes hospital pharmacists and clinical teams from the procurement process, limiting our ability to ensure proper storage, handling, product integrity, and timely substitution when clinically necessary. In oncology and other time-sensitive specialties, even minor delays or product issues can significantly affect patient outcomes.

Timely Access to Care

Our physicians and nursing teams work diligently to coordinate treatment plans that are individualized and responsive to changing patient needs. White bagging creates administrative barriers, shipping delays, and insurance-driven restrictions that can postpone therapy. For patients facing cancer or other serious illnesses, delays are not an inconvenience; they are a risk.

Impact on Rural and Community Hospitals

Community and rural hospitals currently are struggling financially state-wide as we continue to provide essential local access to care. White bagging shifts drug procurement away from local providers, eroding a critical component of reimbursement that helps sustain infusion services and oncology programs. If these services become financially unsustainable, patients may be forced to travel long distances for treatment away from their communities, increasing hardship and widening health disparities.

Patient Experience and Accountability

When medications arrive late, damaged, or incorrect, patients often do not understand why their treatment is delayed. The hospital team remains accountable to the patient, yet lacks authority to correct supply chain failures driven by insurers or outside pharmacies. This undermines trust and increases frustration at a time when patients most need reassurance and coordinated care.

Your legislation recognizes that medication management within accredited hospitals and physician practices is not simply a purchasing function—it is an essential component of safe, integrated patient care. Preserving provider-administered drug management ensures clinical oversight, accountability, and patient-centered decision-making remain where they belong: at the bedside.

We appreciate your leadership on this important issue and stand ready to serve as a resource as this bill advances. Protecting timely, safe, and locally accessible care is essential for the patients and communities we serve.

Sincerely,



Scott A. Boyes
Chief Executive Officer



Shelly J. Huff
Chief Nursing Officer / Chief Operating Officer



Mansour Isckarus, MD
Medical Oncologist



Joseph Prah, MD
Medical Oncologist