

<b>Operational Policy</b>		
SUBJECT: <b>Specialty Drugs Shipped from Pharmacies to Providers and Facilities</b>	DEPARTMENT: <b>Pharmacy</b>	
ORIGINAL EFFECTIVE DATE: <b>03/23</b>	DATE(S) REVIEWED/REVISED:	
EFFECTIVE DATE: <b>3/1/2023</b>		
APPROVED BY: <b>Oregon Region Pharmacy and Therapeutics Committee</b>	NUMBER: <b>ORPTCOPS145.0223</b>	PAGE: <b>1 of 8</b>

**SCOPE:**

Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”).

**APPLIES TO:**

<u>Fully Insured</u>						
<u>Individual</u>	<u>Small Group</u>	<u>Large Group</u>	<u>Self-Insured</u>	<u>Medicare</u>	<u>Medicaid</u>	<u>Ayin</u>
<input checked="" type="checkbox"/> Oregon On Exchange	<input checked="" type="checkbox"/> Oregon On Exchange (SHOP)	<input checked="" type="checkbox"/> Oregon	<input checked="" type="checkbox"/> ASO	<input type="checkbox"/> Medicare	<input checked="" type="checkbox"/> Medicaid	<input checked="" type="checkbox"/> YCCO
<input checked="" type="checkbox"/> Oregon Off Exchange	<input checked="" type="checkbox"/> Oregon Off Exchange (SHOP)	<input checked="" type="checkbox"/> Washington				<input type="checkbox"/> WHA
<input checked="" type="checkbox"/> Washington On Exchange						<input type="checkbox"/> TPA
<input checked="" type="checkbox"/> Washington Off Exchange						<input type="checkbox"/> PBM
<input type="checkbox"/> APPLIES TO ALL ABOVE LINES OF BUSINESS						

**POLICY:**

The Company allows prescribing providers and facilities to order a specialty medication for a specific patient that will be distributed from the pharmacy to the prescribing providers office or facility, where it will then be prepared and administered to the patient. This is referred to as “white bagging”.

Instead of the traditional buy and bill method, white bagging may benefit a prescribing provider or facility by:

- Decreasing administrative burden of ordering, receiving, and storing expensive medications
- Eliminating up-front acquisition costs of drugs and subsequent billing for drugs, as billing and reimbursement will be between the Company and the contracted specialty pharmacy
- Convenient delivery of medication to the prescribing provider’s clinic or facility

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Additionally white bagging allows for improved safety and quality

- The specialty pharmacist will be checking the dose, strength, drug interactions, and indications.
- Specialty pharmacists are an additional resource for the healthcare personnel to call if they have any further questions about the drug
- Shipping of medications will be directly from the pharmacy to the providers office or facility and will be packaged consistent with manufacturer recommendations.

White bagging is voluntary, but providers that utilize this service are motivated to bring medications to their patients while keeping their business operations running optimally.

This intent of this policy is to define which medications and what pharmacies are eligible for white bagging.

**DEFINITIONS:**

**Facilities:** In general, any location where healthcare is provided. Health facilities range from small clinics and doctor's offices to urgent care centers and large hospitals with elaborate emergency rooms and trauma centers.

**Prescribing provider:** This is a health care provider who can write a prescription for a medication to diagnose, treat, or prevent a medical condition.

**Prior Authorization:** Is a process to review a prescription drug for coverage before it is dispensed. The prior authorization process is initiated by the prescribing medical provider. Many factors – including the potential for serious health risks, FDA-approved indications and cost- effectiveness – are considered before making the decision to require prior authorization of a prescription medication. A limited number of medications require prior authorization review; any medications requiring prior authorization are indicated as such in the Providence formulary.

**Reimbursement:** The action of paying back money to the pharmacy or provider who have already provided the medication or service.

**Specialty Medication:** Specialty medications are high-cost prescription medications used to treat complex and chronic conditions. Specialty medications sometimes require special handling and administration (typically injection or infusion), and patients using a specialty medication may need careful oversight from a health care provider who can watch for side effects and ensure that the

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medication is working as intended. For further information about Specialty Medication definitions, please refer to the “Specialty Drug Definition and Benefit Administration” policy (ORPTCOPS061)

**White bagging:** The medication is purchased through a specialty pharmacy and shipped to the prescribing provider's office or facility for administration. “

**PROCEDURE:**

This policy is subject to applicable state laws and regulations.

Table 1. lists medications that are suitable for distribution from the pharmacy to a prescribing provider or facility to administer. The infusible medications must have simple admixture steps.

Medications that can be self-administered will follow the “Self-Administered Drugs Exclusion Policy” (ORPTCOPS144)

Prescribing providers or facilities

May order a specialty medication from the Company’s contracted preferred Specialty pharmacies (see Appendix 1 for specialty pharmacy contact information). These specialty pharmacies are independent contractors and contracted to provide services to members of the Company.

The prescribing provider or facility will be responsible for a well-trained staff to admix and administer the medication safely to the patient. The specialty pharmacy will be able to answer any questions they may have regarding specialty medication.

The prescribing provider or facility can bill for the administration of the medication only. The prescribing provider or facility may not bill for the full cost of the medication because they did not purchase it or dispense from their own supply (as would be the practice of buy and bill).

- For correct processing of the administration claim; however, the prescribing provider must include the HCPCS billing code for the medication with a billed amount of \$0.01, so that the administration can be tied to the drug that was administered.

Specialty Pharmacy

The specialty pharmacy will bill PHP under the member’s medical benefit because the medication will be administered in the healthcare setting. The specialty pharmacy that dispensed the medication to the providers office or facilities will submit a claim for reimbursement of drug costs to the Company directly.

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Medications are subject to cost-sharing and utilization management, as outlined in formulary and/or benefit documentation

- If prior authorization is needed, the specialty pharmacy will submit forms/chart notes on behalf of prescriber for the prior authorization. If the specialty pharmacy does not have access to the clinical information (e.g., chart notes), they will inform the prescribing provider that they will need to submit a prior authorization for the prescribed medication.

The specialty pharmacy will dispense (ship out/deliver) the prescribed medication to the prescribing provider or facility with patient-specific labeling (after authorization is approved, if applicable).

- The specialty pharmacy must package the drug for delivery to ensure product integrity and temperature control of the medications in transit.
- The drug shipment will not include the IV bags, lines, and other administrative supplies. These will need to be issued/supplied by the prescribing provider or facility.

To mitigate wastage, the specialty pharmacy will need to do the following two steps when dispensing:

1. If the drug is to be admixed or compounded, it is their responsibility to send out a dosage that is the smallest amount possible above the prescribed amount. This will be monitored and addressed with the specialty pharmacies if wastage discrepancies are noticed.
2. Verify the date of administration in the provider's office with the member, as the claim will be processed at the time of dispense (not the date of administration at the provider's office). The drug will not be able to be returned after dispense if not used for that specific member.

#### **REFERENCES:**

1. American Society of Health System Pharmacists. Key Elements of White Bagging Policy. Mar, 2021 <https://www.ashp.org/advocacy-and-issues/key-issues/other-issues/additional-advocacy-efforts/key-elements-of-white-bagging-policy>
2. Commonwealth of Massachusetts Report to the Massachusetts Legislature. View of Third-Party Specialty Pharmacy Use for Clinician Administered Drugs. July 2019 [https://cdn.ymaws.com/www.mashp.org/resource/resmgr/files/white\\_bagging\\_Brown\\_bagging.pdf](https://cdn.ymaws.com/www.mashp.org/resource/resmgr/files/white_bagging_Brown_bagging.pdf)
3. National Association of Boards of Pharmacy (NABP). White and brown bagging: Emerging practices, emerging regulation. April 2018. <https://insidehealthpolicy.com/inside-drug->

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[pricing-daily-news/law-firm-forms-coalition-hospitals-against-%E2%80%98white-bagging%E2%80%99](#)

4. Injectable Drugs Administered in the Physician’s Office, Coding Policy 21.0
5. Specialty Drug Definition and Benefit Administration Operational policy, ORPTCOPS061

**Appendix 1. Contracted Specialty Pharmacies eligible for White Bagging**

Credena Health Specialty Pharmacy

- Phone: 855-360-5476
- Fax: 503-215-8455

Accredo Health Group

- Phone: 877-222-7336
- Fax: 866-579-4655

**Table 1. Specialty medications eligible for White Bagging**

<b>Brand Name</b>	<b>Generic Name</b>	<b>HCPCS Code</b>	<b>Specialty Pharmacy with Access to Medication</b>
Actemra®	tocilizumab	J3262	Credena Health Specialty Pharmacy Accredo Health Group
Adakveo®	crizanlizumab	J0791	Credena Health Specialty Pharmacy
Aldurazyme®	laronidase	J1931	Credena Health Specialty Pharmacy Accredo Health Group
Apretude®	Cabotegravir	J7039	Credena Health Specialty Pharmacy Accredo Health Group
Aralast® NP, Prolastin-C®, Zemaira®	alpha-1 proteinase inhibitor	J0256	Accredo Health Group
Benlysta®	belimumab	J0490	Credena Health Specialty Pharmacy Accredo Health Group
Cabenuva®	Cabotegravir and rilpivirine	J0741	Credena Health Specialty Pharmacy Accredo Health Group

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<b>Brand Name</b>	<b>Generic Name</b>	<b>HCPCS Code</b>	<b>Specialty Pharmacy with Access to Medication</b>
Cerezyme®	Imiglucerase	J1786	Credena Health Specialty Pharmacy Accredo Health Group
Cimzia®	Certolizumab pegol	J0717	Credena Health Specialty Pharmacy Accredo Health Group
Cinqair®	reslizumab	J2786	Credena Health Specialty Pharmacy Accredo Health Group
Crysvita®	burosumab-twza	J0584	Accredo Health Group
Cutaquig	immune globulin subq	J1551	Credena Health Specialty Pharmacy Accredo Health Group
Cuvitru®	immune globulin subq	J1555	Accredo Health Group
Elaprase®	idursulfase	J1743	Credena Health Specialty Pharmacy Accredo Health Group
Elelyso®	taliglucerase alfa	J3060	Accredo Health Group
Entyvio®	vedolizumab	J3380	Credena Health Specialty Pharmacy Accredo Health Group
Evenity®	romosozumab	J3111	Credena Health Specialty Pharmacy Accredo Health Group
Fabrazyme®	agalsidase beta	J0180	Accredo Health Group
Fulphila®	pegfilgrastim-jmdb	Q5108	Credena Health Specialty Pharmacy Accredo Health Group
Givlaari®	givosiran	J0223	Accredo Health Group
Glassia®	alpha-1 proteinase inhibitor	J0257	Accredo Health Group
Granix®	tbo-filgrastim	J1447	Credena Health Specialty Pharmacy Accredo Health Group
Hizentra	immune globulin subq	J1559	Accredo Health Group
Hyqvia®	immune globulin subq	J1575	Accredo Health Group
Ilaris	Canakinumab	J0638	Credena Health Specialty Pharmacy Accredo Health Group
Inflectra	infliximab-dyyb	Q5103	Credena Health Specialty Pharmacy Accredo Health Group

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<b>Brand Name</b>	<b>Generic Name</b>	<b>HCPCS Code</b>	<b>Specialty Pharmacy with Access to Medication</b>
Kanuma®	sebelipase alfa	J2840	Credena Health Specialty Pharmacy Accredo Health Group
Krystexxa®	pegloticase	J2507	Credena Health Specialty Pharmacy Accredo Health Group
Lumizyme®	alglucosidase alfa	J0221	Accredo Health Group
Mepsevii®	vestronidase alfa-vjbk	J3397	Accredo Health Group
Naglzyme®	galsulfase	J1458	Accredo Health Group
Neulasta®	pegfilgrastim	J2506	Credena Health Specialty Pharmacy Accredo Health Group
Neupogen®	filgrastim, excludes biosimilars	J1442	Credena Health Specialty Pharmacy Accredo Health Group
Nexviazyme®	avalglucosidase alfa-ngpt	J0219	Accredo Health Group
Nivestym®	filgrastim-aafi	Q5110	Credena Health Specialty Pharmacy Accredo Health Group
Nyvepria®	pegfilgrastim	Q5122	Credena Health Specialty Pharmacy Accredo Health Group
Ocrevus®	ocrelizumab	J2350	Credena Health Specialty Pharmacy Accredo Health Group
Orencia®	abatacept	J0129	Credena Health Specialty Pharmacy Accredo Health Group
Prolia®	denosumab	J0897	Credena Health Specialty Pharmacy Accredo Health Group
Reblozyl®	luspatercept	J0896	Credena Health Specialty Pharmacy
Remicade®	infliximab	J1745	Credena Health Specialty Pharmacy Accredo Health Group
Renflexis®	infliximab-abda	Q5104	Credena Health Specialty Pharmacy Accredo Health Group
Sandostatin® LAR Depot	octreotide depot IM	J2353	Credena Health Specialty Pharmacy Accredo Health Group
Saphnelo®	anifrolumab-fnia	J0491	Credena Health Specialty Pharmacy

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<b>Brand Name</b>	<b>Generic Name</b>	<b>HCPCS Code</b>	<b>Specialty Pharmacy with Access to Medication</b>
Simponi Aria®	golimumab	J1602	Credena Health Specialty Pharmacy Accredo Health Group
Soliris®	eculizumab	J1300	Accredo Health Group
Somatuline® Depot	lanreotide	J1930	Credena Health Specialty Pharmacy Accredo Health Group
Synagis®	Palivizumab	J3490	Credena Health Specialty Pharmacy Accredo Health Group
Tepezza®	teprotumumab-trbw	J3241	Credena Health Specialty Pharmacy Accredo Health Group
Trogarzo®	ibalizumab-uiyk	J1746	Accredo Health Group
Tysabri®	natalizumab	J2323	Accredo Health Group
Udenyca®	pegfilgrastim-cbqv	Q5111	Credena Health Specialty Pharmacy Accredo Health Group
Ultomiris®	ravulizumab-cwvz	J1303	Accredo Health Group
Uplizna®	inebilizumab	J1823	Accredo Health Group
Viltepro®	viltolarsen	J1427	Credena Health Specialty Pharmacy Accredo Health Group
Vimizim®	elosulfase alfa	J1322	Accredo Health Group
VPRIV®	velaglucerase alfa	J3385	Accredo Health Group
Xembify	immune globulin subq	J1558	Accredo Health Group
Zarxio®	filgrastim-sndz	Q5101	Credena Health Specialty Pharmacy Accredo Health Group
Ziextenzo®	pegfilgrastim-bmez	Q5120	Credena Health Specialty Pharmacy Accredo Health Group