

Increasing Pharmacy Access for Underserved Patients

Providing discounted drugs and enhanced services to those in need

Providing access to a full range of affordable comprehensive services, including **pharmacy services, is a key component of the community health center model**. Established in 1992, the 340B Drug Discount Pricing Program provides health centers access to outpatient drugs at reduced prices, enabling them to ensure that all low-income patients have access to affordable prescription drugs.

In addition, the savings from the 340B program must be reinvested into health center activities and are integral to health centers' ability to sustain ongoing operations. In fact, many health centers report that due to their slim operating margins, without the savings from the 340B program they would be severely limited in their ability to support many of their core services and activities for their patients.

THE FACTS:

Health centers exemplify the type of safety net program that the 340B program was intended to support. By law, all health centers:

- serve only those areas and populations that HHS has designated as high need,
- ensure that **all patients can access the full range of services they provide**, regardless of insurance status, income, or ability to pay.

While every health center decides how its 340B savings can best benefit its patients, these savings often **support clinical pharmacy programs, extended evening and weekend hours, case management services and sliding fee discounts** – ultimately increasing patient access to care.

Health centers **are subject to detailed programmatic and reporting requirements as well as federal oversight** that they must adhere to, and which guide their participation in the 340B program.

THE IMPACT:

The 340B program is currently under assault on several fronts – and it is crucial that it is protected. Health centers' reliance on 340B is critical to their financial viability and their ability to provide quality comprehensive low-cost health services, including affordable medications, to their patients.

How you can help:

- Make it explicitly clear that **340B covered entities are entitled to purchase all drug manufacturers' covered outpatient drugs** at 340B pricing for eligible patients through each covered entity's contract pharmacies.
- **Prevent implementation of a 340B rebate model** by manufacturers and clarify that it would violate a material condition of the 340B Drug Pricing Program.
- **Prevent private for-profit companies from "pick-pocketing" 340B savings from health centers** to their entities, thereby, under-cutting the intent of the program for Health Centers, by granting HRSA authority to stop them. Congress must guarantee a solution by adding an "anti-discrimination" clause to the 340B statute.
- **Join bipartisan efforts to document concerns about how the 340B program is being negatively.**