



## Questions for Discussion -340B Interest Group Call May 20, 2014

### **Nonprofit Hospital Eligibility**

We anticipate that the rule could propose to tighten hospital eligibility by tightening the requirement for private, non-profit hospitals to have “a contract with a State or local government to provide health care services to low income individuals who are not entitled to benefits under title XVIII of the Social Security Act or eligible for assistance under the State plan under this title [Medicaid].”

Discussion questions: If you are private, non-profit, what is the nature/form of your contract with the state or local government?

### **Patient Definition**

We know that OPA is going to look to tighten the definition, and we cannot predict the exact restrictions, so we know this is an area where we are going to need feedback when the proposed rule is issued. However, we would like to understand how you are working with providers outside the hospital to provide discounted drugs to individual whom you consider your patients.

Discussion questions: Do your employees get 340B discounts at your pharmacy (or contract pharmacy)? If so, what is the nature of medical service received by the employees at the hospital and the records maintained by the hospital? Is it an initial screening, an annual wellness exam, or the same standard applied to any patient?

Do you work with a prison system to provide medical services and use 340B drugs for the prisoners? What is the nature of that arrangement (is a hospital employee providing services at the prison, etc.)?

Are you involved in other similar arrangements? Schools, health departments, etc.?

### **Oncology and 340B**

We know use of 340B for oncology drugs has been a focus for anti-340B groups.

Discussion questions: Do you use 340B for oncology services? Are the services within hospital-based facilities? Is there anything unique about oncology services that we should consider if raised in the rule?