

340B Drug Discount Program

2018



Hospital Issues

340B Hospitals

The Aroostook Medical Center Blue Hill Memorial Hospital **Bridgton Hospital** C.A. Dean Memorial Hospital Calais Regional Hospital Central Maine Medical Center **Down East Community Hospital** Eastern Maine Medical Center **Houlton Regional Hospital Inland Hospital** LincolnHealth MaineGeneral Medical Center Maine Medical Center Mayo Regional Hospital Millinocket Regional Hospital Mount Desert Island Hospital Northern Maine Medical Center Pen Bay Medical Center Penobscot Valley Hospital Redington-Fairview General Hospital **Rumford Hospital** Sebasticook Valley Health St. Mary's Regional Medical Center **Stephens Memorial Hospital**

Waldo County General Hospital

The 340B drug discount program is an increasingly important factor in bolstering hospital finances in Maine.

The 340B Drug Discount Program was created in 1992 and provides eligible hospitals with access to discounted drug prices for their patients receiving outpatient hospital services. Eligible hospitals include those that provide a disproportionate amount of care to low-income patients, Critical Access Hospitals (CAHs), Rural Referral Centers, Sole Community Hospitals (SCH) and Children's Hospitals.

How it works: The 340B Drug Discount Program requires pharmaceutical manufacturers to provide prescription drugs to qualifying hospitals and other covered entities at or below a "340B ceiling price" established by the federal Health Resources and Services Administration. These prescription drugs are then provided to all hospital patients except those patients on the Medicaid program. Medicaid patients are covered under a similar drug discount program administered by state Medicaid agencies.

In 2010, the Affordable Care Act made all CAHs, SCHs and Rural Referral Center Hospitals categorically eligible to participate in the 340B Drug Discount Program. By extending these benefits to these small rural hospitals, approximately one-third of all U.S. hospitals now participate in the 340B program, yet pharmaceuticals purchased at 340B pricing account for only 2% of all medicines purchased in the United States each year.

This program produces significant savings for these safety-net hospitals, generally between 20% and 50% of the drug's cost.

Maine has 16 CAHs and 3 SCHs. The Affordable Care Act's extension of the 340B program saves these hospitals approximately \$15 million per year.

To be clear, this discount program was created to help lower costs for hospitals so that they can continue to provide all the services they do for their communities. There is some misunderstanding or even misrepresentation of what the 340B program was intended to do. It was designed to help hospitals, and it has succeeded in doing that.

Why help hospitals? Maine hospitals use the benefit that they derive from the 340B program to provide many types of activities that benefit their communities. Here are some examples of these activities:

- Health professional education such as post-graduate residencies and on-site training for physicians such as the Maine Track Physician Training Program led by Maine Medical Center and offered by seven other hospitals in Maine.
- More than \$210 million in charity and other unpaid care to lower income patients.
- Disaster planning and emergency preparedness at every hospital. An example of this is the Ebola
 outbreak that the country prepared for in 2014. Hospitals spent millions of dollars on supplies,
 staff training and general preparedness to provide the proper care to patients and to keep their
 communities safe.
- Community-based health clinics to provide important preventative care out in the community. These clinics, which every hospital offers, can be in schools, lower income areas of their community, or in association with long-term care facilities.
- Important services to our patients struggling with the opioid epidemic. Examples include naloxone and other life saving treatments delivered in the Emergency Room and medication assisted treatment such as suboxone and methadone. A very high percentage of these services are provided to uninsured patients unable to pay. The treatment services also require hospitals to purchase expensive prescription drugs and are very labor intensive and for physician practices to provide.

Any significant changes to the 340B Drug Discount Program would have a negative impact on hospitals and the low-income patients who benefit from this important program. It is especially important to retain 340B eligibility for the nation's rural hospitals that benefited from the changes in the Affordable Care Act.

Understanding 340B: The 340B program is complicated and the aggressive lobbying against it by the pharmaceutical industry has created unnecessary confusion. Hospitals are committed to transparency and compliance within the 340B Drug Program.

Under current law, hospitals are required to be audited by the federal government to assure that they remain in compliance with all 340B laws and regulations. Unfortunately, the number of audits that the federal government performs on pharmaceutical companies is extremely limited so there is no real way to know if these companies actually provide these important prescriptions at the prices that are required. Additional funds should be made available to The Health Resources and Service Administration for more compliance audits of pharmaceutical companies in addition to the audits of 340B hospitals.

2018

MHA Member Hospitals

Acadia Hospital, Bangor

The Aroostook Medical Center, Presque Isle

Blue Hill Memorial Hospital, Blue Hill

Bridgton Hospital, Bridgton

Calais Regional Hospital, Calais

Cary Medical Center, Caribou

Central Maine Medical Center, Lewiston

C.A. Dean Memorial Hospital, Greenville

Down East Community Hospital, Machias

Eastern Maine Medical Center, Bangor

Franklin Memorial Hospital, Farmington

Houlton Regional Hospital, Houlton

Inland Hospital, Waterville

LincolnHealth, Damariscotta & Boothbay Harbor

Maine Coast Memorial Hospital, Ellsworth

MaineGeneral Medical Center, Augusta & Waterville

Maine Medical Center, Portland

Mayo Regional Hospital, Dover-Foxcroft

Mercy Hospital, Portland

Mid Coast Hospital, Brunswick

Millinocket Regional Hospital, Millinocket

Mount Desert Island Hospital, Bar Harbor

New England Rehabilitation Hospital of Portland

Northern Maine Medical Center, Fort Kent

Pen Bay Medical Center, Rockport

Penobscot Valley Hospital, Lincoln

Redington-Fairview General Hospital, Skowhegan

Rumford Hospital, Rumford

St. Joseph Hospital, Bangor

St. Mary's Regional Medical Center, Lewiston

Sebasticook Valley Health, Pittsfield

Southern Maine Health Care, Biddeford & Sanford

Spring Harbor Hospital, Westbrook

Stephens Memorial Hospital, Norway

Waldo County General Hospital, Belfast

York Hospital, York



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