Rx Office Hours:

IMPORTANT

To ensure a high-quality audio experience for all, please:

• Connect to audio using your phone (NOT your computer.)
• Enter your personal Attendee ID (located in the left-hand box, below the access code) when dialing in.

If you have already clicked on “Call Using Computer”, please log off this site completely and re-enter, this time clicking only on “I will call in.”
Pharmacy Access Office Hours

October 18, 2018

Focus Topic: How Apexus Can Support your Pharmacy Operations

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Today’s Agenda

- Operational updates
- Brief presentation on “focus topic” – How Apexus can support your pharmacy operations
- Open Q&A
- Link to two-question evaluation https://www.surveymonkey.com/r/V22YNZZ

Please use the Chat Box during the session to ask questions, add info, etc. There will be time for Q&A at the end.

These slides can be downloaded at:

Or you can:
- Google “NACHC 340B”
- Scroll about halfway down the page, and look under “Office Hours” then “Oct 2018”
OPERATIONAL UPDATES

Colleen Meiman
Senior Policy Advisor
National Association of Community Health Centers
cmeiman@nachc.org
A NEW Regulation on Ceiling Prices & Fines on Manufacturers

• The Obama Administration issued a final regulation in its last weeks, and the Trump Administration delayed its effective date 5 times.
  – This reg would have:
    • made “penny pricing” official
    • allowed HRSA to fine manufacturers who “knowingly and willingly” overcharge for 340B drugs.

• The Trump Administration is finalizing a new proposal, to replace the Obama one.

• The new version is currently under OMB/ White House review; there will be a period for public comment after it is published.
No more “gag clauses” on pharmacists

• “Gag clauses” on pharmacists prohibit them from telling patients when the cash price of a drug is less than their insurance copayment.

• Earlier this month, a law was signed that would officially ban them.
A New Twist in Private Insurance Contracts

• Some private insurers are not only reimbursing 340B-only pharmacies at significantly lower rates than other pharmacies, but may also effectively prohibit 340B-only pharmacies from participating in their “preferred” networks that offer lower copays for patients.

• How does this happen?
  • To be in a preferred network, a pharmacy must participate in the insurer’s Quality program
  • To participate in the Quality program, the pharmacy must be reimbursed under the insurer’s regular system.
  • But 340B pharmacies are reimbursed under a different (lower) system.
Call for topics and speakers for 340B Coalition 2019 Winter Conference

Dates:
January 30 – February 1, 2019

Location:
San Diego, CA

• 340B Health has engaged Sue Veer to develop and coordinate 2 CHC Expert Sessions for the upcoming 340B Coalition Winter Conference
  • 90 minute educational sessions in addition to CHC Roundtable session
  • Target audience – all community health center attendees and may include other grantee types connected to the health center community

• Goal: Programming relevant to health center CEs

• Speaker benefits:
  • Conference registration waived
  • No reimbursement for travel expenses
  • Speakers may be asked to serve on general session panels

• Please send topics of interest to Sue at 340brx@carolinahealthcenters.org by Friday, October 26th and note any interest and availability to serve as a speaker.

• You can also suggest topics on the evaluation survey for today’s Office Hours -- https://www.surveymonkey.com/r/V22YNZZ
1. Whenever possible, please register your sites with HRSA during the regular two-week window at the start of the quarter. 

   *The extended windows should be used only when absolutely necessary.*

2. For a Mirena-like IUD at $50 each, contact MDiallo@Medicines360.org

3. FQHCs may use 330 funds to purchase Emergency Contraception, and to dispense it to their patients.
1. The Trump Administration is finalizing a new proposed regulation on ceiling prices and fines on manufacturers.

2. “Gag clauses” on pharmacists are now illegal.

3. When renewing contract changes with private insurers, check to ensure that you are not losing the ability to offer the “preferred” copayments to patients.

4. Submit ideas and speakers for the next 340B Coalition conference to Sue Veer at 340Brx@carolinahealthcenters.org or in the 2-minute evaluation at https://www.surveymonkey.com/r/V22YNZZ
Looking Ahead

Thursday November 15, 2:00 – 3:00 Eastern
*Focus Topic:* Dashboards for Tracking Pharmacy Performance

Thursday December 20, 2:00 – 3:00 Eastern
*Focus Topic:* ??? Options include:
- *Working with community pharmacies*
- *Pharmacy Oversight Committees*
- *Working with the OPA database*
Focus Topic:
HOW APEXUS CAN SUPPORT YOUR PHARMACY OPERATIONS

Presenter:
Kris Klein-Bradham and Karen Glueck
Apexus
Apexus Answers Call Center 888-340-BPVP (2787)
Q and A Session with Apexus

Caron Glueck, Manager Apexus Answers and Kris Klein-Bradham, Manager, 340B Compliance and Education Support
Purpose of Today’s Presentation

• Discuss the scope of roles between NACHC and Apexus, the HRSA Prime Vendor
• Discuss commonly asked questions by Community Health Centers to Apexus Answers
• Apexus Answers background and commonly asked questions
• Address some previously asked questions and corresponding answers/resources that Apexus can address
• Open discussion, as time allows
NACHC and Apexus Roles
NACHC and The Prime Vendor’s Focus

• NACHC was founded in 1971 and serves as the leading advocacy organization representing health centers nationwide. NACHC, through research/analysis and collaborating with 340B stakeholders, demonstrates the benefit and superior care that health centers provide to legislators and the federal government.

• Since 2004, Apexus, the HRSA Prime Vendor, works on behalf of the Office of Pharmacy Affairs, to provide education, technical assistance, and contracting with manufacturers and wholesalers to improve both compliance and 340B savings of all covered entities.
Roles: NACHC and the Prime Vendor

NACHC

• Legislation Advocacy
• Technical assistance on health center leadership, operations, etc.
• Trainings and tools (NACHC 340B Handbook)
• Health Center research and analysis to support CHC’s

PVP

• Support all stakeholders in 340B program
• Education through online and in-person trainings
• Technical assistance with Apexus Answers (basic and complex assistance)
• Contracting and distribution
• Tools for all entities
340B University CHC Questions

• Common Questions:
  – Discriminatory reimbursement
  – Mergers/acquisitions and inventory
  – 340B savings and use best practices
  – 340B compliance committee oversight
  – Referrals
Apexus Answers
Apexus Answers Background

• Apexus Answers is aligned with HRSA
• Staff in constant communication with HRSA to ensure that messaging is consistent
• FAQs available on 340Bpvp.com
• Tiered levels of response: can handle from basic to complex
• Average monthly interactions ~2,500
Apexus Answers Cases by Month Q3 2018

Top 5 Case Categories

- 340B Database Technical Assistance: 252
- Policy/Implementation: 214
- Eligibility/Registration: 187
- 340B PVP: 112
- Contract Pharmacy: 77
Top questions in Policy/Implementation:

- Patient Definition
  - Referrals
  - Refills
  - Provider Eligibility
- Purchasing/Inventory
  - Transfer/Share inventory with associated sites
Questions and Answers
Question #1

• I have a new C-suite member or a new employee at my CHC who isn’t very familiar with the 340B program. What do I do?

− Apexus tools appropriate here include:
  • 340B OnDemand modules
  • C-Suite Guide to the 340B Program
  • Review all CHC tools, including health center checklist
Question #2

• I am a health center with concerns about how new policies and legislation may affect my health center, what do I do?
  - Contact your local State Primary Care Association for more information and guidance
  - Enlist NACHC as a partner if large-scale or multi-state.
Open Discussion

• What Questions do you have?
Q&A

Link to two-question evaluation: https://www.surveymonkey.com/r/V22YNZZ
Q: How do we help our SFS patients that have insurance, in particular when you do not have an in house pharmacy at your FQHC? We have so many people that have such high deductibles, some with thousands of dollars in deductibles to get their premiums down, that they will never ever meet the deductible. And of course, our Sliding Fee Medicare patients once they are in the donut hole.

Please complete the two-question evaluation: https://www.surveymonkey.com/r/ZWW7QC2
Q: It seems like a lot of the changes that private insurers are making in contracts with 340B providers are targeting health centers with in-house, closed-door pharmacies. Is this right? If so, why these types of pharmacies, and not others? And does this mean we should stop thinking about creating our own in-house pharmacy?

Please complete the two-question evaluation: https://www.surveymonkey.com/r/ZWW7QC2
DIR Fees?

- Stands for “direct and indirect remuneration” fees
- Now has a “myriad of meanings, including:
  - the cost a pharmacy pays to participate in a network,
  - the adjustment of the maximum allowable cost, and
  - the contracted rate the plan reimburses the medication, and the reimbursement or fee to a pharmacy for meeting or failing to meet certain quality measures.

“It can be difficult for the pharmacy to know how much the PBM/plan will reimburse the pharmacy for a prescription when the pharmacy enters into a contract, when the claim is processed, and when the contract ends.”

Q: Pharmacies would like to have covered entities cover all fees, but other suggestions for dealing with them?

Please complete the two-question evaluation: https://www.surveymonkey.com/r/ZWW7QC2
Q: If my health center registers a new contract pharmacy arrangement on OPAIS, and HRSA requests that we send in our contract for review, what will they be looking for?

A: HRSA will review the contract to ensure it:

1. Is dated prior to the registration period
2. Lists all provider and all contract pharmacy locations, with addresses that are identical to those that were registered.
3. Includes signatures of officials from both the entity and the pharmacy.
Other Questions?

Please complete the two-question evaluation: https://www.surveymonkey.com/r/ZWW7QC2

Contact: Colleen Meiman, cmeiman@nachc.org