The 340B ACCESS Act
Supports Community Health Centers

To save the 340B program, health centers need a stable and dependable program with the right statutory protections. The 340B ACCESS Act builds on many fundamental requirements of safety-net providers. For example, the bill focuses on patient affordability similar to how health centers provide care to all patients regardless of their ability to pay. As health centers reach historical milestones, they deserve a modernized 340B program that supports true safety-net providers.

1. Refocuses the Intent of the Program
The 340B program is intended to support safety-net providers, like health centers, serving low-income and vulnerable patients. The 340B ACCESS Act enables health centers, whose mission is to serve underserved or otherwise vulnerable communities, to increase access to affordable drugs and health services for these communities.

2. Establishes Clear Criteria for Contract Pharmacies
The 340B ACCESS Act requires manufacturers to ship to contract pharmacies, which are not currently recognized in the statute. It preserves access to contract pharmacies, including specialty and mail order pharmacies, which would be protected for eligible community health center patients in the provider’s service area. With clear criteria on contract pharmacy arrangements and safeguards around duplicate discounts and diversion, the bill ensures bad actors are not abusing arrangements for their own profits.

3. Protects 340B Savings for Health Center Patients
Pharmacy benefit managers (PBMs) and other for-profit middlemen would be prohibited from siphoning 340B savings from grantee-covered entities. The fees PBMs can charge would also be limited to a flat, fair-market value fee.

4. Ensures Continuity of Care for Health Center Patients
Health centers are required by their grants to refer their patients for services not provided at the center. Under this bill, patients would continue to be eligible for 340B if their health center providers oversee their essential primary care services, including case management and care coordination services. Through updates to the patient definition in the 340B ACCESS Act, health centers can appropriately identify 340B patients, including through eligible referrals. As trusted providers in the community, they serve as connectors to affordable services and medications.

5. Establishes New Transparency Measures for Accountability
The bill includes new public reporting requirements to create more transparency and accountability for all 340B grantees in the program. This includes creating a neutral 340B clearinghouse to receive claims data for Medicare, Medicaid, and commercial payers in a manner that is not burdensome to entities with limited staff resources.

6. Addresses Standards for Subgrantee Eligibility
The 340B ACCESS Act reflects that all types of 340B grantee participants serve their communities as true safety-net providers. New standards and requirements for subgrantees put needed guardrails around subgrantee participation in the program. The bill specifies subgrantees’ 340B participation must be consistent with, and substantially support, the aims of the relevant federal grant.