



National Family Planning & Reproductive Health Association

Operational Responses to COVID-19: 340B and Pharmacy Considerations and Resources

340B Considerations

The Health Resources & Services Administration (HRSA) is providing information and resources related to 340B and COVID-19, which can be found at <https://www.hrsa.gov/opa/COVID-19-resources>. Key points are highlighted below but you are strongly encouraged to refer to the HRSA [webpage](#) for the most up-to-date information.

Questions

For questions about specific circumstances, contact Apexus, the 340B Prime Vendor. They will coordinate with HRSA to provide answers and information.

- Phone: 1-888-340-2787 (Monday – Friday, 9:00a.m. – 6:00p.m. ET)
- Email: apexusanswers@340bpvp.com

Meeting the Patient Definition

Patients receiving 340B drugs must still meet the current patient definition, which requires that the individual:

- 1) have an established relationship (as documented in a medical record) with the covered entity;
- 2) receive health care service(s) from a health care professional employed by the covered entity (or who provides care under contractual or other arrangements for the covered entity); and,
- 3) receive health care service(s) consistent with the grant that makes a covered entity eligible for 340B.

However, in the context of COVID-19, HRSA has outlined important updates and flexibilities. The guidance below (emphasis added) is directly [from HRSA's webpage](#):

“During this time, an abbreviated health record may be adequate for purposes of the 340B Program. The record should identify the patient, record the medical evaluation (including any testing, diagnosis or clinical impressions) and the treatment provided or

prescribed. For purposes of 340B Program eligibility, **the record may be a single form or note page.** It is the recorded information that creates a record. For example, under these circumstances the patient may be without insurance cards or identity papers and providers may not have access to documented medical histories. **In the current public health emergency, HRSA believes that self-reporting of identity, condition, and history are adequate for purposes of 340B recordkeeping requirements.**

In addition, **in a situation where volunteer health professionals are providing health care,** emergency documentation should be generated to make the relationship between the provider and the covered entity clear and to make clear the covered entity's responsibility for providing care. This documentation should recognize the emergency nature of the situation, the name and address of the volunteer, and his/her relationship to the clinic, and should be kept on file by the covered entity."

Telehealth & 340B

In providing 340B drugs to a patient served through telehealth, HRSA advises that covered entities outline the use of telehealth in their policies and procedures and continue to ensure auditable records are maintained for each eligible patient who is dispensed a 340B drug.

Pharmacy Benefits

If you are typically limited in how many cycles of contraceptives you can dispense to patients at once, check for waivers to your state's regulations or Medicaid program requirements. Some states are waiving policies that typically prohibit "early refills."

This [resource from Power to Decide](#) from August 2019 documents the twenty states that have policies requiring insurers to cover a 6- or 12-month supply of contraceptives.

This document was prepared by the National Family Planning & Reproductive Health Association (NFPRHA). It is intended for informational purposes and does not constitute legal or financial advice or NFPRHA's endorsement of a specific product.

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