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## FOR IMMEDIATE RELEASE

### RWC-340B Responds to Senate Bipartisan Request for Information on 340B

WASHINGTON, DC – On July 28, 2023, Ryan White Clinics for 340B Access (RWC-340B) responded to a Request for Information (RFI) issued by a Bipartisan Senate Workgroup comprised of Senators Thune (R-SD), Stabenow (D-MI), Capito (R-WV), Baldwin (D-WI), Moran (R-KS), and Cardin (D-MD). RWC-340B applauds their request for bipartisan solutions to “provide stability and appropriate transparency to ensure the 340B program can continue to achieve its original intent of supporting entities serving eligible patients.”

“We are encouraged by these Senators’ focus on ensuring that the 340B program is not altered in a way that harms patient access to care, “ said Shannon Burger, president, RWC-340B. She added, “Millions of people and communities are healthier because of the care 340B makes possible.”

In its detailed response to the RFI, restating RWC-340B’s [Statement of Principles](#) RWC-340B’s comments focused on ensuring that Congress recognizes the essential role that Ryan White Clinics play in public health and safety and ensuring the following:

- The legislative intent of the 340B program should not be reinterpreted, re-envisioned, or stated any differently than it already is.
  - The 340B program should not be restructured as only a patient drug assistance program or focus only on low-income and uninsured patients because doing so would mean that RWCs no longer have the resources to provide more comprehensive care to all people living with HIV/AIDS.
  - Taxpayers should not bear any burden for an untested new construct for the 340B program to relieve drug companies of their responsibility to provide discounted medications to safety net providers.
- Narrowly defined limits on access to 340B drugs, by disease state or condition, are unacceptable.
- Policymakers and/or the courts must stop manufacturers from dictating the rules for the 340B contract pharmacy program.
- Onerous reporting requirements are unnecessary and will force RWCs to take time away from patient care and community service.
- PBMs must be prohibited from siphoning off 340B savings.
- A national clearinghouse should be established to reduce the risk of duplicate discounts on Medicaid drugs.
- Congress should not nullify state laws that are protective of the 340B program.



RWC-340B asked the Senators to consider the following policy requests as they determine a path forward on improving and protecting the 340B program.

- Urge HRSA to finalize and implement the administrative dispute resolution process (ADR) program.
- Clarify HRSA’s regulatory authority to audit manufacturers.
- Codify Covered Entities’ right to use contract pharmacies and states’ rights to regulate them.
- Protect covered entity discretion in how program savings is used.
- Urge CMS and states to adopt the Oregon duplicate discount clearinghouse model.
- Enact the PROTECT Act, H.R. 2534.
- Increase and expand manufacturer audits.
- The 340b program should not be re-envisioned as a mandatory direct-to-patient discount on drugs.
- Refrain from imposing patient entitlement or transparency requirements.

*RWC-340B is a national association of HIV/AIDS health care providers that receive funding under the Ryan White CARE Act and participate as “covered entities” in the federal 340B drug discount program. Ryan White clinics rely on 340B savings to provide critical services that would otherwise be uncompensated, ranging from free or discounted medications to critical wrap-around support services for people living with HIV including primary care, case management, dental and behavioral health, and other support services.*