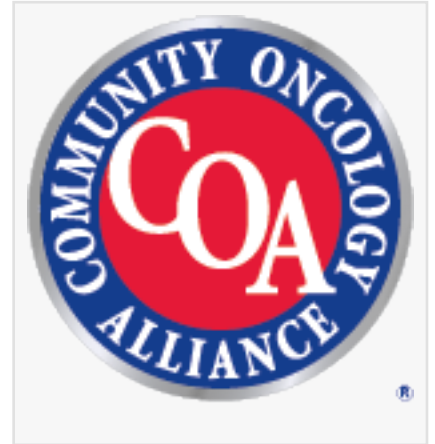


COA Supports 340B Drug Discount Accountability Act

HR 6240 Will Provide HRSA With Proper Funding for Program Oversight and Fulfill Longstanding Bipartisan Proposal

WASHINGTON, DISTRICT OF COLUMBIA, UNITED STATES, July 2, 2018 /EINPresswire.com/ -- The Community Oncology Alliance (COA) supports the introduction of the "340B Drug Discount Accountability Act" ([HR 6240](#)) by Representative Chris Collins (R-NY). This legislation will ensure that the Health Resources and Services Administration (HRSA) receives additional financial and staff resources needed to properly oversee and administer the program.



If passed, hospitals would report their total 340B drug purchases and pay a small 0.1% user fee to HRSA. This would be used for program oversight, audits, and improved monitoring of program compliance. Grantees and non-hospital covered entities would be exempt. The bill would also give HRSA "direct-hire authority" for new employees to implement and conduct the oversight.

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Jeff Vacirca, MD, president of COA

“Improving oversight of hospitals participating in the 340B program is something that the bipartisan administrations of President Trump and Obama, independent government watchdog agencies such as the OIG and GAO, and numerous independent experts have all called for. Providing HRSA with the resources and authority it needs to do its job just makes sense,” said Jeff Vacirca, MD, FACP, president of COA and CEO of NY Cancer Specialists in New York. “As physicians on the front lines of the cancer care system in America, community oncologists see the clear impact that the 340B program is having on patients, raising costs, and reducing choice.”

“340B is a critically important program and it must be

strengthened so that it helps patients in need. This is particularly true given the numerous independent reports that have shown that some hospitals are taking advantage of the program’s lax oversight to enrich themselves at the expense of patients,” said Ted Okon, executive director of COA. “Rep. Collins’ 340B Drug Discount Accountability Act will substantially bolster the ability of HRSA to do that, and finally implement an idea that policymakers, from both sides of the aisle, have been proposing for years.”

COA firmly believes that the 340B Drug Discount Program is vitally important and must be maintained, for both grantees and safety-net hospitals. However, more than a decade of explosive growth in the corporate hospital sector has left a program rife with abuse. The unwitting victims are cancer patients left with less provider choice and forced to receive their care in the much more expensive hospital setting. COA has produced two important briefs on the issue, including [a look at 340B program data from 25 years of research](#) and [how abuse of the program is hurting cancer patients](#).

COA looks forward to working with Congress and the administration on strengthening the 340B program for generations of patients in need. Legislation under consideration by Congress, such as the 340B Drug Discount Accountability Act, 340B PAUSE Act, and 340B HELP Act, have the potential to finally achieve the long overdue and necessary oversight of hospitals participating in this important government program.

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