**Purpose:** The purpose of this tool is to provide a list of responsibilities commonly assigned to the role of 340B Analyst, as shared by leading practice sites. This can serve as a resource when developing a job description for staff responsible for oversight of 340B-related activities.

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| **Position Title Examples** | |
| 340B Compliance Analyst | Analyst – 340B |
| 340B Contract Pharmacy Analyst | Pharmacy Inventory Compliance Technician |
| 340B Program Analyst | Purchasing Agent |

1. **Policy and Procedure Development**
   * Maintain up-to-date policies and procedures on 340B purchasing processes.
   * Develop systems and processes to limit program liabilities and provide proper audits to identify risk and prevent duplicate discounts and diversion.
   * Review 340B Program policies and procedures on an ongoing basis and offer contributions and changes to ensure 340B compliance.
2. **Education**
   * Develop proper 340B quality assurance training for employees as appropriate.
     + Assign staff to [340B University OnDemand](https://www.340bpvp.com/education/340b-u-ondemand/) training based on their role/responsibility.
   * Provide proactive education to staff on policies and procedures related to inventory management and 340B procedures.
   * Expand professional development through related classes and seminars, current publications, and regional/national association membership participation.
3. **Self-Audits**
   * Be involved in any and all 340B Program audits.
   * Perform audits on a scheduled basis; may involve presenting and resolving reconciliation issues as they arise during the monitoring and reconciliation process.
   * Perform monthly audits of contract pharmacies.
   * Perform monthly self-audits of 340B pharmacy operations.
   * Ensure compliance with 340B Program requirements for qualified patients, drugs, and locations.
   * Monitor and audit state Medicaid claims to ensure compliance to prevent potential duplicate discount rebates.
   * Using Excel or a comparable data management program, filter out non-eligible transactions, including, but not limited to, drugs used to treat patients during inpatient care, Medicaid patients, drugs provided free by manufacturers, those provided at non-eligible locations, or prescriptions written by non-eligible providers.
   * Evaluate patient eligibility for qualified and non-qualified patients in mixed-use areas and clinics by reviewing patient medical records, insurance plans, and, if applicable, hospital status.
   * Ensure that facilities maintain adherence to 340B Program regulations and guidelines.
   * Develop and foster working relationships with internal working counterparts (IT, internal audit, results, accounting, and others) to facilitate productive exchanges of information to improve program efficiency and promote program compliance. Provide data, information, and reports as needed for other business units within the organization.
4. **Program Enhancement/Optimization**
   * Develop a thorough understanding of the 340B Program and improve the overall efficiency, value, and internal support of the 340B Program.

Assess opportunities for cost savings and system improvements to yield higher compliance.

* + Continue to build knowledge of the health care and pharmacy services industry; use that knowledge to identify ways, and make recommendations, to improve the 340B Program.
  + Evaluate and implement cost savings opportunities.
  + Assist all customers to clarify requirements and propose sourcing options; evaluate and recommend the best sourcing solution.

1. **Reporting**
   * Develop reports that can be used to educate staff and assist management in tracking the overall financial impact to the organization. Build other reports, as appropriate, to monitor and improve 340B Program compliance and performance.
   * Maintain copies of reports for compliance and audit purposes.
   * Collaborate with the Pharmacy, Compliance, and 340B Oversight Council to develop monthly, quarterly, and yearly audit metrics.
   * Construct appropriate financial metrics to assess areas of improvement.
   * Develop and update 340B Program reporting packages detailing volume, financial value, and other reporting metrics as needed.
   * Use provided tools to monitor prescription data, patient data, hospital data, payer data, site of care, and, if required, ICD-10 codes. Summarize and report results to the appropriate individuals.
   * Monitor, report, and analyze contract pharmacy 340B activities; provide financial reports to hospitals or other covered entities relative to financial impact and liabilities; make recommendations that would improve efficiency.
   * Perform covered entity-specific gross financial analysis and make recommendations to improve program performance. Track financial impact over time, identify root causes of adverse trends, and make recommendations to improve the program’s financial stability.
   * Review and refine monthly 340B cost savings reports detailing purchasing and replacement practices, as well as dispensing patterns.
2. **Purchasing/Inventory Duties**
   * Oversee all aspects of the inventory purchasing process for applicable pharmacies.
   * Procure supplies, equipment, services, and merchandise; request price quotes; facilitate purchasing proposals and contract negotiations.
   * Process requisitions and issue purchase orders; expedite deliveries; resolve receiving and invoicing issues or problems.
   * Manage existing contracts and supplier relations.
   * Manage drug selection, procurement, and inventory control.
     + Manage purchasing, receiving, and inventory control processes.
     + Continually monitor product par levels to effectively balance product availability and cost-efficient inventory control.
     + Ensure appropriate safeguards and system integrity.
     + Perform annual inventory and monthly cycle counts.
   * Monitor ordering processes, integrating the most current pricing from wholesalers.
   * Analyze invoices, shipping, and inventory processes.
   * Comply with all track-and-trace legal requirements of the Drug Supply Chain Security Act for purchasing and distribution of drug products.
3. **Split-Billing or Third-Party Administrator Duties**
   * Develop a thorough understanding of the split-billing/third party administrator systems and the functions to be performed.
   * Educate others involved in the purchasing process to ensure proper operation and compliance.
   * Provide each buyer with information needed to place orders using the appropriate accounts (e.g., WAC, GPO, and 340B and non-340B) to replenish inventory in the mixed-use inventory setting.
   * Coordinate purchasing for dual or multiple split inventories within pharmacies.

*This tool is written to align with Health Resources and Services Administration (HRSA) policy, and is provided only as an example for the purpose of encouraging 340B Program integrity. This information has not been endorsed by HRSA and is not dispositive in determining compliance with or participatory status in the 340B Drug Pricing Program. 340B stakeholders are ultimately responsible for 340B Program compliance and compliance with all other applicable laws and regulations. Apexus encourages all stakeholders to include legal counsel as part of their program integrity efforts.*

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