



Dear Chair Fahey and Members of the House Committee on Rules:

On behalf of 15+ patient and provider advocacy organizations, we’re reaching out to share concerns on the – 2 amendment to House Bill 4028. As written, the – 2 amendment would require a drug manufacturer to ship drugs to all contract pharmacies for 340B providers and offer 340B drug prices at those pharmacies. Essentially, this legislation would mandate that manufactures ship to *all* pharmacies with which many 340B covered entities contract.

Our organizations have collectively worked together throughout the years to improve access to affordable, innovative treatments for all patients and serve as a voice and resource for local communities. While we appreciate the intent of proponents of this bill to improve healthcare access in Oregon, **unfortunately, we feel the – 2 amendment to House Bill 4028 is premature given the movement on the federal level to fix the 340B program to ensure it meets the needs of the vulnerable communities it was created to serve.**

- Through the program, drug manufacturers provide [more than \\$90 billion in discounted product](#). Yet **only 1% of patients received a discount on their 340B prescriptions** at contract pharmacies through the program.
- Today, [growth of 340B contract pharmacies](#) is concentrated in “affluent and predominantly White neighborhoods,” and 340B contract pharmacy growth is declining in “socioeconomically disadvantaged and primarily non-Hispanic Black and Hispanic/Latino neighborhoods.” The minimal prescription discounts that are currently available through the 340B Program are not available to the patients who most need them.
- A recent [investigative piece by the New York Times](#) explores the 340B Program and how **it hurts access to healthcare by eliminating basic medical services, especially in poor and underserved areas**. The [Richmond Times Dispatch](#) did a follow-up article with legislators working on solutions to add additional oversight of federal programs and ensure not-for-profits are meeting commitments to the communities they serve.
- **The 340B Program is currently under federal investigation.** Last September, Senator Bill Cassidy opened an [investigation into how 340B revenue is spent](#) to help patients. Since then, the investigation has requested information on revenue spending from 340B [community health center entities](#) and [contract pharmacies](#). Additionally, a working group of six bipartisan Senators released a [legislative discussion draft](#) that aims to reform the 340B Program and ensure it is helping patients the way policymakers originally intended.

Efforts are underway at the federal level to address the disparities that currently exist in the 340B Program, and we urge you to wait until those changes are made before taking any action at the state level. We need to be sure the program works as originally intended – to improve access and health equity in Oregon.

Respectfully,

AiArthritis
 American Senior Alliance
 Biomarker Collaborative
 Coalition of Hematology & Oncology Practices
 Coalition of State Rheumatology Organizations
 Derma Care Access Network
 Exon 20 Group
 The Headache & Migraine Policy Forum

HEALS of the South
 Hispanic Business Alliance
 ICAN - International Cancer Advocacy Network
 Kaleidoscope Fighting Lupus
 Lupus and Allied Diseases Association, Inc.
 MET Crusaders
 Neuropathy Action Foundation
 PD-L1 Amplifieds