

**Good Samaritan Health & Wellness Center**  
Policies and Procedures

Subject: 340b Medication Program Compliance                      Policy #: 6.3

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Approved by: Board of Directors

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## 6.3 340b Medication and Program Compliance

**OBJECTIVE:** To ensure compliance with federal regulations regarding the 340b medication program.

**PROCEDURES:**

1. Pharmacist will verify each individual prescription qualifies for the 340b medication program by review of the patient chart. The pharmacist will verify on each prescription that the prescriber is an eligible prescriber of our entity (if provider is not a GSHWC provider, then pharmacist will ensure all referring providers are contracted providers and have appropriate contractual documentation in patient chart and will also follow up on subsequent refills to ensure patient referral notes are charted in our patient charts)
2. Monthly reports can be printed out and filed.

Any discrepancies or errors will be reported to CEO in addition to filing all errors with HRSA per Apexus 340b PVP guidelines.