



Community Benefit Program

Wellpartner strongly encourages all our clients to establish and maintain Community Benefit Programs for uninsured, cash or low insured members of its communities. We manage these programs with strict qualification methods and support for multi-tier subsidy levels. Our systems are designed to prevent diversion and provide all necessary audit support.

Wellpartner's 340B Confident solution can be configured to adjudicate Community Benefit Program patient prescriptions on behalf of the Covered Entity itself. Covered Entities can then set a reduced or no-cost price point for such claims. The value of reduced-cost claims can be tracked, qualified and reported as a Patient Credit line item on 340B Confident vouchers, and reported as entity subsidy on Wellpartner Clarity.

How it Works!

- ✓ Prescriptions (Patient Eligibility) must be designated as 340B-eligible by the prescriber. Wellpartner recommends that clinics indicate the Patient Group on the prescription (pre-printed message, stamp, printed voucher, patient card, etc.) to help the pharmacy identify the prescription for submission to the Wellpartner BIN #017515. For e-prescriptions, we recommend that the prescriber enter "340B and the Patient Group" in the SIG (instructions) field.
- ✓ Covered Entities must provide Wellpartner with a list of eligible prescribers, generally employed or contracted providers with prescribing authority. We ask for a full update at least monthly to ensure that only eligible prescribers are on file. This update should include eligibility and termination dates for all prescriber, and NPI/DEA #'s.



Covered Entities must also define the various subsidy levels they want to offer their patients. The basis for these levels is usually a combination of the 340B drug cost and a percentage of the pharmacy dispensing fee and Wellpartner administrative fee. This approach ensures that Community Benefit Program patients pay an appropriate amount based on their ability to pay. **For example, an Entity may choose to set their levels at:**

- ◆ **<100% of Federal poverty level (FPL): no charge (free prescription)**
Patient pays 0% = CE pays 340B cost + fees (Admin disp)
- ◆ **100%-200% of FPL: 340B drug cost + 50% of fees**
Patient pays 50% of 340B cost + fees = CE pays 50%
- ◆ **>200% of FPL: 340B drug cost + 100% of fees**
Patient pays 100% of 340B cost + fees
- ◆ **Patient pays 340B cost = CE pays fees**
Above are common subsidy coverage levels, but Wellpartner can adapt to any kind of program a CE requires.



Pharmacies send prescription data for Community Benefit Program patients to Wellpartner using a unique BIN (#017515 - the BIN identifies where the claims should be electronically routed for adjudication).

- ◆ Patient ID (999999999)
- ◆ No PCN
- ◆ 8 digit patient group (created by Wellpartner)

Wellpartner "adjudicates" the claim and makes sure the prescriber is on the list provided by the Entity. We then apply the correct subsidy level based on the Patient Group entered by the pharmacy. The pharmacy receives an electronic message with the amount to be collected from the patient. The dispensed quantity is added to the 340B product accumulator and replenished to the pharmacy as per the standard program.

◆◆ **Wellpartner's 340B Confident solution can be configured to adjudicate Community Benefit Program patient prescriptions on behalf of the Covered Entity itself.** ◆◆



All data collected during this process is available on Wellpartner's 340 Access Reporting site called AccessIntegra™ and in audit data extracts. The Patient Group is provided so that Covered Entities can perform internal audits and ensure that only eligible prescriptions and correct subsidies are being provided under their Community Benefit Program.

Implementation

- 1 A Community Benefit Program Form is signed by all Parties (Wellpartner, Covered Entity, and Contract Pharmacy) prior to implementing a Community Benefit Program. The form explains the subsidy level(s) - what the patient coverage will be, how the CBP prescriptions will be marked, and what the Admin Fee and Dispensing Fees will be calculated as.
- 2 Well partner recommends the same Community Benefit dispensing fee across all Contract Pharmacies that will be participating, if possible. The more subsidy levels and different dispensing fees, the more patient groups to implement and manage.
- 3 Once set-up is complete in Wellpartner's system and in our PBM's (ProCare) system, Wellpartner's Operations Team will reach out to Contract Pharmacy(s) to train on how to adjudicate CBP claims, and process a test claim. Operations makes sure the claim pays correctly in the Pharmacy's system and that the financials are accurate.
- 4 Operations lets the Pharmacy know to reach out to 877.626.4670 or Operations@wellpartner.com for any rejections, questions or concerns.



To learn more, call 877.626.4670 or email us at operations@wellpartner.com.

Wellpartner: Who We Are

As your strategic partner, we're committed to providing a complete 340B service suite that creates value, and gets it right.

Wellpartner is the authority in 340B program management offering innovative technology and the broadest set of 340B services. By staying ahead of industry changes, Wellpartner provides a seamless, easy-to-use solution for covered entities currently or considering participating in the 340B Drug Program.

Our experience is your advantage. Our processes are finely-tuned towards achieving the best results for our customers, whether it is contracting, providing our fully accredited specialty pharmacy services, ensuring program compliance, aligning specialty network access, maximizing claims capture, or driving program value. Wellpartner is focused on excelling at these tasks, since we share the same goal as our covered entity customers — to preserve resources, in order to serve those who need it most.

Wellpartner | When it matters most

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