

# SpendMend Pharmacy - 340B Staff Augmentation

*Do you wish you had another pharmacy expert on your team...  
without adding an FTE?*

## SpendMend By The Numbers

**400+**

Clients Served  
Since 2013

**1,300+**

Audits  
Completed

**5+**

Years Performing Monthly  
Compliance Support

**85+**

HRSA Audits  
Supported

## SpendMend Pharmacy 340B Compliance



Are you worried there is not enough day to day attention on your 340B program? Do you wish you had another pharmacy expert on your team without adding an FTE to your department? Look no further.

SpendMend Pharmacy, leveraging the expertise of Turnkey Pharmacy Solutions, can be your added expert. Our team consists of healthcare experts including many pharmacy leaders from a variety of health care settings. Our 340B staff augmentation solution can deliver an industry leading 340B expert to your team to help you manage your daily, weekly, monthly, and quarterly 340B compliance tasks. Our expert staff have all come from CEs and have experience administering a 340B program.

## Why Should You Consider Temporary Staff Augmentation?



- HRSA audits are critical, and you can't risk non-compliance
- You cannot get approval for a new FTE in Pharmacy
- No time to recruit a new FTE with the right 340B skillset
- Key team-member left department or on extended leave
- No team-members on staff with the necessary experience
- Nobody on staff to properly train the new staff member

## SpendMend Mission

At SpendMend, we strive to help hospitals and clinics improve patient care through the delivery of innovative cost savings solutions, insightful transaction analysis, and improved visibility across business relationships.

## Why Is 340B Compliance Important?

The 340B Program requires drug manufacturers to sell outpatient drugs at a discount to CE's for their drugs to be covered by Medicaid. Failure to maintain participation in the program can cost pharmacies an estimated range of 20-50% on annual drug costs.

Audit findings by HRSA over an 8-year span include the following 1,536 items:

**561**

Failures to maintain eligibility-related requirements (e.g., covered entities' oversight of contract pharmacies).

**546**

Diversions of drugs to ineligible patients (e.g., patients' health records are not maintained by the covered entity).

**429**

Duplicate discounts for prescribed drugs that may have been subject to both the 340B price and a Medicaid rebate.



*"Using a Turnkey expert on staff to help manage all of our 340B compliance tasks was a no-brainer. It's cheaper, faster and easier than adding staff. And the audit experience and monthly summaries make it a breeze."*

**-B.J. Ott, CEO, Community Clinic of Maui, Inc.**

## Benefits of Staff Augmentation



Ensure compliance with HRSA guidelines



Gain insight on the best practices of leading pharmacies



Expand 340B compliance to include industry leading 340B optimization



Benefit from a combined 250 years of pharmacy experience



## Getting Started

Every staff augmentation relationship is customized to the client. Call us to discuss how you can leverage one of our experts to join your staff and simplify your 340B program oversight.