

YOUR NHA ADVOCACY TEAM

Jeremy Nordquist

President

402-578-6442

jnordquist@nebraskahospitals.org

Meghan Chaffee

Chief Advocacy & Legal Officer

402-253-9784

mchaffee@nebraskahospitals.org

David Slattery

Senior Director, Advocacy

402-318-1672

dslattery@nebraskahospitals.org

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2025 KEY ADVOCACY MESSAGES



Protect the 340B
Community Benefits
Program



Reform Prior
Authorization



Stop Harmful PBM
Practices

TALK WITH YOUR SENATOR ABOUT THESE IMPORTANT ISSUES

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Protect the 340B Community Benefits Program

The 340B Community Benefits Program was created by Congress in 1992 and it requires pharmaceutical manufacturers to provide outpatient drugs to eligible hospitals at significantly reduced prices. The program's primary focus is to enable hospitals to stretch their resources and reinvest the savings into expanding services for underserved communities.

Savings from the 340B Community Benefits Program help our Nebraska hospitals provide more comprehensive care for underserved patients.

To participate, hospitals must meet certain eligibility criteria, including being designated as a nonprofit or public entity and serving a disproportionate number of low-income patients. The program is paid for with drug discounts; no state or federal tax dollars are utilized.

The 340B Community Benefits Program allows urban and rural hospitals to support important community health needs. Benefits include:

- Pharmaceutical Discounts
- Improved Patient Access
- Community Health Impact

The NHA supports legislation that prohibits drug manufacturers and wholesalers from restricting distribution of 340B drugs to contract pharmacies.



Reform Prior Authorization

Prior authorization is a process used by insurance companies to determine whether a medical treatment, procedure, or medication is covered under a patient's insurance plan. It involves a review of the medical necessity of the treatment or procedure, as well as the appropriateness of the proposed course of treatment. NHA recommends reforming prior authorization to eliminate unnecessary paperwork and delays.

Delays in prior authorization in health care can cause several issues for patients and providers. Issues include:

- Delays in Treatment
- Inadequate Patient Care
- Additional Burdensome Paperwork
- Patient Dissatisfaction



Stop Harmful PBM Practices

Pharmacy benefit managers (PBMs) continue to implement practices that limit patient choice of their preferred pharmacy and disrupt continuity of care between providers and patients, with the intent to drive business away from local pharmacies and providers. Ultimately, these PBM practices create harmful barriers to serving patients in a comprehensive and integrated manner and substantial administrative burden, adding more cost to the delivery of health care with little benefit to patient health or safety.

NHA recommends the enactment of the following policies to strengthen patient choice and access to safe, effective, and timely pharmaceuticals and limit unfair business practices by pharmacy benefit managers (PBMs) within our health care system:

- Protecting patient choice in prescription delivery
- Protecting patient choice for clinician-administered drugs (white bagging)
- Eliminating unreasonable terms and conditions in specialty contracts