IN CASE YOU MISSED IT: WASHINGTON HOSPITALS FALLING SHORT ON CHARITY CARE, POTENTIALLY DISCRIMINATING AGAINST LATINO PATIENTS

Columbia Legal Services (CLS) Reports Withheld Charity Care From Several Washington State 340B Hospitals

WASHINGTON – The Seattle Times recently wrote on a report conducted by Columbia Legal Services (CLS) that found a record number of hospitals are withholding charity care throughout the state of Washington. 27 of the hospitals referenced are 340B Drug Discount Program covered entities, a program which was designed to help certain health care safety-net providers that serve uninsured or otherwise vulnerable patients reduce outpatient prescription drug costs, giving entities the ability to increase uncompensated and charity care in their local communities.

MANY WASHINGTON HOSPITALS ARE TAKING ADVANTAGE OF THE SYSTEM

As the Seattle Times points out:

“Hospitals make it hard for some patients to get assistance by not following the law’s eligibility requirements. And they’re billing patients, sometimes aggressively, for care that should be free or discounted, according to the report.”

ABUSIVE PRACTICES IN WASHINGTON ARE PARTICULARLY HARMING LATINO PATIENTS

The piece continues with several instances of harmful practices, including the following:

“Hospitals have a duty to determine if a patient is eligible for charity — and must do so before attempting to collect payment. And they must translate information about financial assistance. [Washington State Hospital Association President Cassie Sauer] noted that many hospitals do have Spanish-speaking staff and offer interpreter services. [Attorney General Bob Ferguson]’s lawsuit alleges that employees of St. Joseph’s billing vendor were told to ‘never volunteer information about St. Joseph’s charity care program to patients, even if they were obviously low-income or homeless.’ Instead, the hospital’s vendor pressured low-income patients to pay upfront for treatment, according to the lawsuit — even when a patient requested a charity-care application.”
THE PROBLEM IS NATIONWIDE

The egregious examples of withheld charity care cited throughout the article shine a harsh light on what many hospitals serving vulnerable patient populations are doing throughout the country. A lack in oversight has allowed 340B hospitals to largely self-police how they conduct charity care. As a result, some hospitals, like those referenced in the CLS report, are withholding the dollars meant to go toward patient care and treatment.

The problem is nationwide: An investigation done by POLITICO found that the combined revenue of the country’s top seven hospitals (four of which are 340B hospitals) between 2013 and 2015 increased by $4.5 billion a year, while their charity care fell by almost $150 million a year -- a 35 percent decrease over that time period.

Many covered entities are providing critical services to uninsured or vulnerable patients, but at the same time, studies show that there are a number of hospitals taking advantage of the program with little to no benefit to patients. For ways that Congress and the Administration could fix the program, visit: https://medium.com/@AIR340B/fix-the-340b-program-c4e8a23f100.

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The Alliance for Integrity and Reform of 340B (AIR 340B) is a coalition of patient advocacy groups, clinical care providers, and biopharmaceutical innovators dedicated to reforming and strengthening the 340B program to ensure it directly supports access to outpatient prescription medicines for uninsured indigent patients. www.340Breform.org