A Patient's Journey: How 340B-Driven Consolidation Impacted Carol's Care



The ability to purchase and profit from deeply discounted drugs gives 340B-eligible hospitals an incentive to buy up smaller clinics, turning them into 340B offsite facilities. This consolidation shifts patients to more expensive hospital-owned settings.

Let's take a look at what this could mean for a 340B patient.



Carol is a retiree and proud grandmother of six, and she lives with her retired husband on a ranch in Arizona. She was recently diagnosed with rheumatoid arthritis — commonly known as RA. She relies on regular infusions that slow progression of her disease and keep it in remission, while improving her physical functioning and quality of life.

Shortly after being diagnosed with RA, Carol found an infusion clinic in her town where she could regularly receive her treatments. She likes how convenient the clinic is and finds the care provided to be very hands-on.





When Carol heads to her infusion center for her regular appointment, she finds it looks different. She checks at the front desk and learns the big hospital a town over has purchased the clinic. She thinks nothing of it but notices that her care seems less personalized. What's worse, the bill she receives for her treatment is much higher than when the infusion clinic was independent.

Learn more about the 340B program and how we can make it work for patients: 340Breform.org