340B Drug Pricing Program: Hospital Registration Instructions
UPDATED JULY 2015

In order to participate in the 340B Program, eligible hospitals must register in the 340B database during one of the quarterly registration periods. HRSA/OPA verifies hospital eligibility electronically as well as manually. If OPA needs additional cost report documents, the hospital will receive an alert during the registration process. Also, hospitals with delegated governmental powers must submit evidence of those powers to OPA. **Requested documents must be submitted the same day the registration is submitted, or the registration will be deleted without being reviewed.** If the hospital is unsure if they received an alert to submit documents, OPA encourages the hospital to submit documents, as outlined below, to avoid having the registration deleted. To submit documents, follow the instructions in section 3 below.

1. **REVIEW MEDICARE COST REPORT INFORMATION**

   HRSA determines a hospital's 340B eligibility from information on its latest filed Medicare cost report through an automatic data feed with the Centers for Medicare and Medicaid Services (CMS). Registrants will need to have the documents listed below available during the registration process to confirm that information received from CMS is current and complete. If alerted at any time during the registration, the hospital must submit these documents to OPA as described in section 3 below.

Hospital Type	Minimum DSH %	GPO Exclusion	Wksheet S	Wksheet S-2	Wksheet S-3	Wksheet E, Part A
Disproportionate Share (DSH)	>11.75%	Yes	Yes	Yes	No	Yes
Critical Access (CAH)	N/A	No	Yes	Yes	No	No
Freestanding Cancer (CAN)	>11.75%	Yes	Yes	Yes	No	Yes
Pediatric (PED)	>11.75%	Yes	Yes	Yes	Yes	No
Rural Referral Center (RRC)	≥8%	No	Yes	Yes	No	Yes
Sole Community (SCH)	≥8%	No	Yes	Yes	No	Yes

   In addition to above worksheets, outpatient facility registrations must also submit:
   - ☐ Worksheet A – identify the cost center line(s) that reflect the clinic(s) being registered
   - ☐ Worksheet C – identify the cost center line(s) that reflect the clinic(s) being registered
   - ☐ Working trial balance - identify the specific costs and revenue of the clinic(s) being registered, as shown in the example.

2. **PREPARE FOR CERTIFICATION OF OWNERSHIP STATUS (applies to new/parent hospitals only)**

   Registrants must be owned/operated by a unit of state or local government, a public or private non-profit hospital that has a contract with a state or local government to provide health care services to low-income individuals who are not entitled to benefits under Medicare or eligible for State Medicaid, or a public or private non-profit hospital that has been formally granted governmental powers. Hospitals reporting eligibility via government contract or a grant of governmental powers may also be required to provide verification of non-profit status (e.g., articles of incorporation or IRS determination of tax exemption/Form 990); all hospitals must provide either:
   - ☐ Name, title, e-mail address and phone number of a government official (GO) who can certify the hospital's ownership/operation or contract status. The same individual cannot be listed as both the hospital's AO and the GO. **The registration will be deleted if the GO does not respond to the system-generated certification email within five business days of submission.**
   - ☐ Documentation of the formal granting of governmental powers, including a description of the powers and the identity of the granting entity (see HRSA's OPA website for additional information).

3. **COMPLETE THE ONLINE REGISTRATION FORM**

   Registrations must be signed and submitted electronically by the hospital's Authorizing Official (AO), who must be a senior managing official that has the authority to legally bind the hospital into an agreement with the Federal government (CEO, CFO, COO, Executive Director, President, Vice President, Administrator, or similar). The AO should designate a separate primary contact for operational issues. The primary contact must be an employee of the covered entity; consultants and other third parties cannot be listed.

   HRSA has established specific e-mail addresses and fax numbers for each hospital type; please e-mail or fax all required documents to the appropriate address or number for your hospital type. **Hospitals MUST include their Medicare provider number in the subject line of the e-mail or prominently on the fax cover sheet.**

Registration Type	E-mail address	Fax
Disproportionate Share Hospitals	340BRegistrationDSH@hrsa.gov	301-443-6571
Critical Access Hospitals	340BRegistrationCAH@hrsa.gov	301-443-6572
Sole Community Hospitals	340BRegistrationSCH@hrsa.gov	301-443-6573
Rural Referral Centers	340BRegistrationRRC@hrsa.gov	301-443-6574
Freestanding Cancer Hospitals	340BRegistrationCAN@hrsa.gov	301-443-6575
Pediatric Hospitals	340BRegistrationPED@hrsa.gov	301-443-6576

   HRSA does not require original signed documents, but registrants may utilize courier services in lieu of e-mail or fax:

   Health Resources and Services Administration
   Attn: Office of Pharmacy Affairs
   5600 Fishers Lane, Mail Stop 8W05A
   Rockville, MD 20857