

(CE NAME) 340B Narrative

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TEMPLATE PREVIEW

340B Narrative Template (2023)

340B Narrative

CE Name 340B universe consist of [list areas where 340b drugs are utilized] (i.e., in-house pharmacies, contract pharmacies, referrals, and clinic administered 340B drugs). In-house pharmacies are [closed/open door pharmacies] and maintain a [manual/virtual inventory system] and uses a third-party administrator (TPA) (list all TPAs). Clinic administered 340B drugs are tracked [electronically/Manually] and recorded in the _____.

Medicaid is [carved in/out] in [all/some] CE Name 340B universes except the contract pharmacy where it is carved out. To ensure CE NAME continues to meet all 340B program requirements, prevent diversion and duplicate discounts, annual recertification in completed timely, _____ audits (monthly, quarterly) is done for contract pharmacies; and _____ audits for clinic and inhouse pharmacies.

Audits are done to ensure patients meet 340B eligibility requirements by receiving primary care from a CE NAME eligible provider at CE NAME 340B eligible locations. _____ audits are done to reconcile clinic administered drugs. CE NAME also adheres

to its 340B policies and procedures and ensures pharmacy staff complete an annual 340B training. CE NAME promptly addresses any audit findings and notifies HRSA and manufacturers through a good faith disclosure when required.

Claims, purchases and clinic administrations processed from (audit period) _____ to _____ was downloaded from the various portals for this audit, and all claims were included. Purchasing data and invoices were downloaded from all suppliers, 340B purchasing accounts only.

Software Methodology — Reporting Crosswalk

(List Unique Report Titles From TPA Audit Reports and definitions)

Understanding TPA Name Audit Report

(Example below Is 340b Basic)

Field	Definition
340Basics ID, Order ID	TPA Assigned Member ID
Claim ID	Member insurance ID
Claim Type	Which type of insurance was used by the patient. Third party is commercial, Cash is uninsured
BIN Number	The routing number of the insurance carrier
Group Number	The group number of the patients insurance carrier

Field	Definition
Processor Control Number	The PCN of the patients insurance carrier
Carve in	Medicaid FFS of Managed Medicaid that requires a modifier
Rx Number	The number assigned to the claim by the pharmacy software
Refill Number	The number of times this Rx has been filled
Qty Dispensed	The number of pills, mls, etc. dispensed at part of the RX to the patient
Qty Replenished	The number of pills, mls, etc. sent back to the pharmacy based upon availability and trigger points
Total Claim Amount	The sum of the insurance payment and patient copay
340B Price*	Cost to replace the medication at 340B
Doc Number*	Purchase Order Number or other Replenishment Document Number – if missing no order generated OR 340Basics does not place an order for the pharmacy.
Reimbursement Amount*	The total amount paid by health plans.
Patient Copay*	The total \$ amount of copay collected from the patient/member.
Dispensing Fee*	Dispensing Fees paid or due by the Covered Entity to the pharmacy for the prescriptions.

Field	Definition
Additional Dispensing Fee*	Any additional dispensing fees owed to the pharmacy.
340B Capture Date	The date claim was captured by 340B.

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quantum5dconsulting.com | info@quantum5dconsulting.com | (410) 921-3989

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