

## HOUSE BILL No. 1473

### Prescription drug transparency report

**1. Hospital defined.** For purposes of this section, "hospital" means an acute care institution licensed and operating in this State as a hospital under (NDCC section).

**2. Report on participation in federal 340B drug program.** Beginning January 1, 2026, each hospital participating in the federal drug pricing program under Section 340B of the federal Public Health Service Act, 42 United States Code, Section 256b, referred to in this section as "the 340B program," shall provide an annual report to N.D. Department of Health and Human Services. NDDHHS shall post the report on its publicly accessible website. Each hospital shall report in a standardized format as agreed upon by NDDHHS and the hospitals, and include, at a minimum, the following information in the report consistent with the annual reporting of hospitals voluntarily participating in the good stewardship program of the American Hospital Association:

A. A description of how the hospital uses savings from participation in the 340B program to benefit its community through programs and services funded in whole or in part by savings from the 340B program, including services that support community access to care that the hospital could not continue without savings from the 340B program. The reporting must include annual charity care, prescription assistance programs, investments in healthcare workforce development, total annual costs in excess of Medicaid payments and Medicare payments, examples of subsidized services and the hospital's low-income and uninsured volume (also known as hospital disproportionate share, or DSH);

B. The annual estimated savings from the 340B program to the hospital, comparing the acquisition price of drugs under the 340B program to group purchasing organization pricing. If group purchasing organization pricing is not available for a drug under the 340B program, the acquisition price for that drug must be compared to a price from another acceptable pricing source;

C. A comparison of the hospital's estimated savings under the 340B program to the hospital's total drug expenditures;

D. A description of the hospital's internal review and oversight of the 340B program, which must meet the federal Department of Health and Human Services, Health Resources and Services Administration's program rules and guidance for compliance; and

E. Total aggregated payments made by hospitals to contract pharmacies for 340B program services.

**3. Reporting.** NDDHHS shall produce and post on its publicly accessible website a report that includes a summary of the aggregate information received from hospitals required to report under subsection 2. NDDHHS shall annually provide a report to the interim Health Care Committee.