



**COUNTY OF DURHAM, NORTH CAROLINA
BOARD OF COUNTY COMMISSIONERS
Agenda Action Form**

ITEM:

Budget Ordinance Amendment No. _____ for Increased Funding of \$425,000 for 340B Medication Reimbursements

DATE OF BOCC MEETING: September 12, 2016

REQUEST FOR BOARD ACTION:

The Board is requested to approve Budget Ordinance Amendment No. _____ for increased funding in the amount of \$425,000 for 340B medication reimbursements with the funding source being the recognition of a portion of the Medicaid Cost Settlement Funds received in fiscal year 2017 above what was budgeted in the original budget.

Between 8/22/13 and 12/9/14, pharmaceutical vendor (Cardinal Health) erroneously used 340B discount medication pricing as the rate for charges to the County for the Detention Center. This compliance issue was reported to the Office of Pharmacy Affairs (OPA). OPA recommended contacting each individual drug manufacturer (approximately 80+) to reimburse each one for the discounts received in error through Cardinal Health.

The County received Medicaid Cost Settlement Funds in excess of what was in the original budget this fiscal year. Therefore, we are requesting in the budget amendment the recognition of a portion of these excess funds as the funding source for this increase.

The Board of Health has approved this amendment.

ALIGNMENT WITH STRATEGIC PLAN:

This amendment aligns with Strategic Goal 2: Health and Well-being for All. This agenda action will keep Durham County Public Health in compliance with 340B in order to continue receiving needed medication discounts for qualifying drugs for Family Planning, STD and the Tuberculosis clinics.

RESOURCE PERSONS:

Gayle B. Harris, MPH, Health Director

COUNTY MANAGER'S RECOMMENDATION:

The County Manager recommends that the Board approve Budget Ordinance Amendment No. _____ for increased funding in the amount of \$425,000 for 340B medication reimbursements with the funding source being the recognition of a portion of the Medicaid Cost Settlement Funds received in fiscal year 2017 above what was budgeted in the original budget.

County Manager: _____



		Motion	Yes	No
() Approved	Foster	_____	_____	_____
() Denied	Howerton	_____	_____	_____
	Jacobs	_____	_____	_____
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