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Neighborhood Health Care Incorporated dba Neighborhood Family Practice
Senate Health Committee
Testimony on Senate Bill 198
October 15, 2025

Chairman Huffman, Vice Chair Johnson, Ranking Member Liston, and Members of the Senate Health Committee, thank you for the opportunity to provide written testimony in support of Senate Bill 198, the Ohio 340B Pharmacy Access Act. My name is Domonic Hopson. I serve as the President and Chief Executive Officer of Neighborhood Health Care Incorporated dba Neighborhood Family Practice, a Federally Qualified Health Center (FQHC)- also known as a Community Health Center- in Cleveland, Ohio.

Founded in 1980, Neighborhood Family Practice (NFP) is a network of seven community health centers strategically located in medically underserved Cleveland west side and Lakewood neighborhoods. Neighborhood Family Practice provides integrated primary care, behavioral health, midwifery, dental, HIV, podiatry, and pharmacy services to people of all ages, regardless of their ability to pay. Seventy-two percent of our patients have incomes at or below 200% of the federal poverty level (FPL). Over the past six years, NFP has experienced a 13 percent growth in patient volume from 18,931 in 2018 to 21,853 in 2024, drawing patients from all City of Cleveland and Lakewood wards and all Cuyahoga County Districts.

Our mission is to be *a trusted partner building healthy communities by providing high-value health care for all*. We work to advance this mission by removing common barriers to health care, including cost and lack of reliable transportation. The 340B Drug Pricing Program is a vital component of this work.

The 340B program is not just a policy, it is a foundational support system for Community Health Centers across Ohio. It allows us to reinvest savings into vital services that would otherwise not be accessible to many patients. I respectfully refer to the Ohio Association of Community Health Centers' (OACHC) testimony for a full overview of the program's structure and history. Today, I'd like to share how the 340B program shapes our work at Neighborhood Family Practice and, more importantly, the impact on the people we serve.

The cost of prescription medications is a common barrier for many patients. In response, NFP opened our first in-house pharmacy in 2019. The 340B program expanded access to affordable medications for our patients. Within two years of opening our pharmacy experienced a 9% increase in prescriptions sold. In 2021, we opened a second in-house pharmacy to expand services in response to patient needs. Last year, NFP sold 57,889 prescriptions, a 26% increase over the prior year. To further increase access, medication home delivery was launched in July



2021, followed by mail delivery service in May 2024 in response to community need. Last year, 3,328 deliveries were completed, an increase of 179% from July 2021.

When Congress created the 340B program, they made their intent clear: to allow safety-net providers to “stretch scarce federal resources as far as possible, reaching more eligible patients and providing more comprehensive services.” Community Health Centers were designed to do exactly that.

At Neighborhood Family Practice, we use 340B savings to support sliding fee discounts for patients at or below 200% of the FPL, increasing access to timely, affordable and accessible health care services. 340B savings make it possible for NFP to employ clinical pharmacists, who play a key role as a member of a patient’s health care team. Our clinical pharmacists work closely with patients who have chronic conditions including diabetes, hypertension, and asthma; helping patients better understand their medical condition through education and working with patients on self-management strategies designed to meet their unique needs.

A recent chart review showed that NFP patients with diabetes who met with an NFP clinical pharmacist saw an average A1C decrease of 2.3% over a 13-month period compared to a 0.5% decrease for patients with diabetes who were not working with a clinical pharmacist. In addition, 43% of patients seeing a clinical pharmacist achieved an A1C less than 7% compared to 22% of patients not seeing a clinical pharmacist. A1C is a measurement of a person’s blood glucose control over a three-month period. The recommended A1C for the majority of people is less than 7% according to the American Diabetes Association’s *Standards in Diabetes Care 2024*.

Recently, an NFP patient who has a chronic respiratory condition was unable to fill his prescription for an inhaler due to the medication costing over \$500. He shared this information with NFP’s pharmacy team who worked with his NFP provider to change the prescribed inhaler to one with similar efficacy that cost less than \$10 with the 340B program. As a result, his respiratory condition has been controlled, and his overall health outcomes have improved. In addition, absenteeism from work, emergency department visits and potential hospitalizations were prevented.

NFP also uses 340B savings to provide delivery of medications to patients’ place of residence- by both NFP vehicle and mail delivery- at no charge to the patient. Without 340B, NFP would not be able to provide our patients with the services described in the examples above.

Unfortunately, the sustainability of this essential program is at risk. Since 2020, more than 35 drug manufacturers have imposed unilateral restrictions on the 340B program—ranging from refusing to ship medications to contract pharmacies to forcing health centers like ours to designate only a single pharmacy for all dispensing, regardless of geography or patient need. Neighborhood Family Practice has been impacted by 23 manufacturer restrictions through contract pharmacies. In addition to these restrictions there have been increased requests for

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documentation needed by manufacturers further increasing the administrative burden on NFP's already stretched resources.

NFP serves a large geographical area. Contract pharmacies help provide additional options for patients to choose from regarding location, pharmacy hours, and access to specialty pharmacy. Forty percent of NFP patients live more than 10 miles from our health center sites. The cost savings from usage of contract pharmacies helps NFP support additional services and programs such as those listed earlier. Over the past few years NFP has seen over a 50% reduction in 340B savings with our contract pharmacy relationships which are utilized to stretch the resources that we have. NFP is reaching a situation where this is no longer sustainable. Due to the manufacturer restrictions that we have been experiencing, access to these savings has decreased over the last few years as we currently have only half of the contract pharmacy relationships compared to a few years ago. These contract pharmacy restrictions have led to an increased strain in our ability to provide the same level of services to our patients and has significant potential to impact our ability to expand services in the future. As a result, access to care for patients will decline or cease to exist.

These restrictions harm our ability to serve patients efficiently and comprehensively. Patients may now be required to travel significant distances to access medications—or worse, go without. This undermines both the clinical effectiveness of treatment and the care our patients deserve. These attacks not only disrupt care, they also jeopardize the financial viability of Community Health Centers.

SB 198 is a concise, targeted bill that addresses this issue head-on. It prohibits manufacturers from limiting access to necessary medications simply because the provider is a 340B grantee. In doing so, it safeguards access to care for all Ohioans across urban, rural, Appalachia, and medically underserved areas.

This legislation closes dangerous loopholes and reaffirms the original intent of the 340B program. Though narrowly focused, SB 198 will have a wide-reaching and lasting positive impact on patients, communities, and the overall health of our state.

Thank you for your time and thoughtful consideration of this important matter. For additional information, please contact me at 216.302.5252 or dhopson@nfpmedcenter.org.

Sincerely,

Domonic Hopson, MPH, FACHE
President and CEO