CHECKLIST

Model N | truzo by Model N

Is Your 340B Strategy Ready for the Complexity of Maximum Fair Price?

As more drugs become subject to Maximum Fair Price (MFP) under the Medicare Drug Price Negotiation Program, manufacturers must navigate overlapping obligations, the risk of duplicate discounts, and evolving payment processes.

Preparing for MFP requires connecting your 340B strategy to broader pricing, discount management, and payment operations.

Use this checklist to evaluate your organization's readiness, identify potential gaps, and prioritize next steps. For each statement, select Yes, Partially, or No.

340B claims visibility

Do you have the data needed to understand where 340B and MFP intersect?

We have access to the 340B claims data needed for analysis.	Yes	Partially	No
We can identify 340B claims associated with MFP-selected drugs.	Yes	Partially	No
We can seamlessly connect relevant 340B claims information with Medicare and other pricing program data.	Yes	Partially	No
We can identify and address gaps in claims collection, data quality, or visibility that could affect MFP operations.	Yes	Partially	No

Why it matters: *Without reliable claims-level visibility, you may struggle to identify overlapping discounts and support informed MFP decisions.*

Duplicate discount controls

Can you identify and address overlapping discounts?

We have a documented process for identifying overlap between 340B and MFP.	Yes	Partially	No
We can validate relevant claims to support decisions about MFP refunds or other applicable discounts.	Yes	Partially	No
We have controls to identify duplicate discounts across 340B, Medicaid, commercial rebates, and MFP, where applicable.	Yes	Partially	No
We maintain supporting documentation for discount eligibility determinations, exceptions, and adjustments.	Yes	Partially	No

Why it matters: *As pricing programs intersect, you need defensible processes to address duplicate discounts while meeting applicable program obligations.*

MFP effectuation and payment operations

Are your processes equipped to support MFP payment requirements?

We understand MFP effectuation requirements and have established processes to meet them.	Yes	Partially	No
We can receive, process, and validate relevant Medicare Transaction Facilitator (MTF) data.	Yes	Partially	No
We have processes to support timely payments, reconciliation, and applicable reporting requirements.	Yes	Partially	No
We can investigate and resolve payment discrepancies, exceptions, and adjustments.	Yes	Partially	No

Why it matters: *There's more to MFP readiness than determining the right price. You also need operational processes to support accurate, timely effectuation and reconciliation.*

Cross-program coordination

Are your 340B and MFP strategies connected across teams and systems?

Our 340B, government pricing, market access, finance, and operations teams have clearly defined MFP responsibilities.	Yes	Partially	No
Relevant claims, pricing, and payment data can be shared across teams and systems.	Yes	Partially	No
We have visibility into how 340B and MFP activity may affect broader gross-to-net (GTN) performance.	Yes	Partially	No
We can monitor program performance and identify issues without relying entirely on disconnected manual processes.	Yes	Partially	No



Why it matters: *Managing 340B and MFP in silos makes it harder to identify issues, coordinate decisions, and understand broader financial implications.*

Ongoing MFP readiness

Can your organization adapt as MFP expands?

We have a process to monitor new Centers for Medicare & Medicaid Services (CMS) drug selections, guidance, and implementation milestones.	Yes	Partially	No
We can assess the operational and financial impact of newly selected drugs.	Yes	Partially	No
Our processes can scale to support additional selected drugs and evolving requirements.	Yes	Partially	No
We have a plan to address the staffing, technology, and process requirements associated with future MFP expansion.	Yes	Partially	No



Why it matters: *Because MFP readiness is not a one-time initiative, you need scalable processes that can evolve as more drugs and requirements are introduced.*

What's next?

Your responses can help you determine where to focus your efforts to strengthen your combined 340B and MFP strategies.

If you answered mostly	
"No" — **it's time to build a connected strategy.**	Your organization appears to lack many of the capabilities needed to manage overlapping 340B and MFP requirements effectively. Assess your claims visibility, discount validation, and payment processes to identify how people, processes, and technology can help you prepare for today's requirements.
"Partially" — **it's time to close the gaps.**	You have established some important capabilities, but gaps in visibility, coordination, or controls could create operational and financial risks. Look for ways you can increase claims intelligence, gain cross-program visibility, and establish operational controls to create a more effective discount management program.
"Yes" — **it's time to strengthen your foundation.**	You're well positioned to manage today's requirements. Now, you should focus on improving efficiencies and ensuring your processes can scale as MFP expands.

Connect your 340B and MFP strategies.

Model N and Truzo combine 340B claims collection, discount monitoring, and payment facilitation capabilities to help you strengthen controls and coordinate with evolving drug discount obligations.

Schedule a 20-minute readiness review to discuss your results, identify opportunities for improvement, and explore how to connect your 340B and MFP operations.

Contact us