



**OPA DATABASE GUIDE**  
**FOR**  
**PUBLIC USERS – GETTING STARTED**

**AUGUST 2012**  
**VERSION 4.2**

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# GETTING STARTED

**Objectives:**

- Accessing HRSA OPA 340B Program
- Familiarization of HRSA 340B Homepage

## ACCESSING 340B OPA SYSTEM

### DETAILS

**Accessing HRSA OPA 340B System**

- Accessing the HRSA 340B OPA System **only** requires a URL; no User ID or Password is necessary.
- Three business functions of the 340B System: Covered Entities, Contract Pharmacies, and Manufacturers.
- Home links to the **HRSA OPA 340B Homepage**.
- Reports links to a landing page for with a list of specific reports in the three business areas.

**Public User**

1. Enter this URL: <http://opanet.hrsa.gov/opa/default.aspx>, and **HRSA OPA 340B Homepage** displays.



**Bookmarking this URL provides quick access.**

2. Click on an applicable link and the appropriate screen displays.

### EXAMPLE

**HOMEPAGE FEATURES**

**DETAILS**

**EXAMPLE**

**Homepage Features**

- Each menu heading provides a drop-down with essential links.

**Menu Bar**

- Provides links to helpful sites, including Forms, Reports, Contacts, Acronyms, etc.

**Useful Links**

**Main Selection Boxes**

- Same essential links are available for each program area.

**What's New**

- Provides announcements and alerts pertaining to enhancements to the 340B Database.

**Important Notifications**

- Provides links to Webinars and information for contacting OPA.

The screenshot shows the HRSA Office of Pharmacy Affairs homepage. At the top is the HRSA logo and navigation tabs: Home, Covered Entities, Contract Pharmacies, Manufacturers, and Reports. A 'Useful Links' section on the right lists: Help, Reports, User Guides, Forms, Termination Codes, Archived Medicaid Exclusion Files, Covered Entity Acronyms, Notes, and Contacts. Below the navigation are three main selection boxes: 'Covered Entities' (with links for Search, Search Medicaid Exclusion File, Register a Covered Entity, Register an Outpatient Facility, and Submit Change Request), 'Contract Pharmacies' (with links for Search and Register a Contract Pharmacy), and 'Manufacturers' (with links for Search and Register a Manufacturer). A 'What's New' section contains a list of updates from 2008 to 2009. An 'Important Notifications' section features a 'NOTICE REGARDING THE 340B REGISTRATION PERIOD' with a table of registration periods and start dates. A footer contains the HHS Privacy Policy Notice, U.S. Department of Health and Human Services (HHS) contact information, and a link for 'Questions, Comments, or Suggestions'.

**Footer**

- Provides email and phone contact information to OPA.
- Provides link for submitting feedback to HRSA pertaining to the site and its content.

HOMEPAGE FEATURES

DETAILS

EXAMPLE

- Need Help? provides links for quick access to Frequently Asked Questions, Pharmacy Service Support Center, etc.
- User Guides link provides access to helpful user guides for each business area with step-by-step instructions.
- Questions, Comments, or Suggestions link provides format for submitting emails direct to OPA.
- Public Users are not required to use login credentials for the 340B System; therefore, the Login link is not needed.

Need Help?

**FOR DIRECT ASSISTANCE**

Please call 1-800-628-6297 or e-mail [Pharmacy Services Support Center](#) for technical assistance

Please visit our [Frequently Asked Questions](#) page for information in this site.

Find forms including the 340B Change Form (to submit changes to the OPA Database) at the [340B Forms](#) page.

The Office of Pharmacy Affairs will announce [Database Enhancement Announcements](#) to the 340B database as they occur.

**MEDICAID EXCLUSION FILE** - users may now go to the Covered Entity dropdown or Covered Entity window and use [Search Medicaid Exclusion File](#) to generate a list of Medicaid Provider Numbers and NPI Numbers for covered entities that have indicated to OPA that they are billing Medicaid for drugs purchased at 340B prices. The [Medicaid Exclusion Tutorial](#) provides more information about why the Office of Pharmacy Affairs needs to know whether the entity intends to fill Medicaid prescriptions with 340B-purchased drugs.

For help with an acronym, visit the [Covered Entity Database Acronym](#) page.

HHS Privacy Policy Notice

[Login](#) | [Help](#)

Home | Covered Entities ▼ | Contract Pharmacies ▼ | Manufacturers ▼ | Reports

340B User Guides

Some information requires the use of Adobe Acrobat Reader. It can be downloaded at the following site:

[Download Adobe Acrobat Reader](#)

**USER GUIDES** - The following documents are provided to answer common questions regarding navigation and usage of the Office of Pharmacy Affairs Database

- A guide to [Getting Started](#) in the 340B database application.
- A guide to working with [Covered Entities](#) in the 340B database application.
- A guide to working with [Contract Pharmacies](#) in the 340B database application.
- A guide to working with [Manufacturers](#) in the 340B database application.
- A guide to working with [Change Requests](#) in the 340B database application.
- A guide to [Reporting](#) in the 340B database application.
- A guide to [Recertification](#) in the 340B database application.

HHS Privacy Policy Notice

Send Us Your Comments

We value the opinions of all of our stakeholders. Please tell us what you think! We may wish to contact you to better understand your comments. Please provide your name and email below to facilitate that dialogue. In addition, if you are a current 340B participant, providing your 340B ID may help to expedite our response.

Subject:

Name:

\* Email:

340B ID:

\* Comment:

\*Denotes a required field

[Login](#) | [Help](#)

**HOMEPAGE FEATURES**

**DETAILS**

**EXAMPLE**

**Forms**

- Change requests can now be submitted online by clicking on the Submit Change Request link.
- Forms link provides access to the paper copy of the Participant 340B Change Request form.

Paper copy is available to request changes for:

- 1) Authorizing Official information
- 2) Updating Qualification Information
- 3) Covered Entity termination
- 4) Contract Pharmacy information

**Browser Session Timeout**

- Once you have accessed the 340B System, the session is active for 30 minutes unless the user is entering data.
- Reminder pop-up window displays a message that the session will be timed out in 30 seconds. To avoid this, click on the  button to keep the session open.

**340B PARTICIPANT CHANGE FORM**

If your facility is already participating in the 340B Program, please submit this form for updates to your existing profile. For assistance, call the Pharmacy Services Support Center (PSSC) at 1-800-628-6297. Email the completed form to the Office of Pharmacy Affairs at [opastaff@hrsa.gov](mailto:opastaff@hrsa.gov). You will be notified when the change has been made. To expedite the process, the "Covered Entity Authorizing Official" for your organization, should submit the change and the appropriate 340B ID number must be included. If it is submitted by someone else, a significant delay may occur and it may hamper your organization's purchase of 340B drugs until the matter is resolved.

340B Covered Entity Name: As listed on <a href="#">HRSA OPA's public Web site</a>	
340B ID: As listed on <a href="#">HRSA OPA's public Web site</a>	

**Complete only information that is to be changed**

New Entity Name:	
New Entity Sub-Division Name:	
New Physical Address:	
New Physical Address City, State, Zip:	
New Ship To Address:	
New Ship To City, State, Zip:	
New Bill To Address:	
New Bill To City, State, Zip:	
Remove/Add/Revise Medicaid # or NPI #: <i>(to be used only if billing Medicaid for 340B drugs)</i>	Indicate Remove/Add/Revise
New Authorizing Official: <i>(must be a senior managing official who can sign on behalf of an organization such as the CEO/COO)</i>	
New Authorizing Official Title:	
New Authorizing Official Phone #:	
New Authorizing Official E-mail Address:	
New Contact Person:	
New Contact Title:	
New Contact Phone #:	
New Contact Fax #:	
New Contact E-mail Address:	

*The section below is to notify OPA only of corrections to the existing Contract Pharmacy Contact Information.*

*All new Contract Pharmacy Arrangements must submit a [Contract Pharmacy Services Self-Certification Form](#) found at: <http://www.hrsa.gov/opa/contracted.htm>*

Contract Pharmacy Information: <i>(to be used only for correcting Existing Contract Pharmacy Contact Information)</i>	
Contract Pharmacy Contact Person:	
Contract Pharmacy Contact Title:	
Contract Pharmacy Phone #:	
Contract Pharmacy Fax #:	
Contract Pharmacy Email Address:	

Comments:

SUBMIT FORM TO: [opastaff@hrsa.gov](mailto:opastaff@hrsa.gov)  
Update of this information is subject to approval and verification by the Office of Pharmacy Affairs.

