



NATIONAL GRANGE

Elevating rural interests since 1867

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National Grange Releases New Report Highlighting Impact of 340B on Rural Hospitals

Report reveals dramatic differences between rural and non-rural hospitals in patient populations, care delivery, and financial metrics

FOR IMMEDIATE RELEASE (May 18, 2026) Washington, D.C. — Today, the National Grange released a new report and analysis by Avalere Health examining the impact of the 340B Drug Pricing Program on rural hospitals, underscoring the program’s essential role in preserving access to care for millions of Americans in rural and small-town communities.

The report, *The 340B Program Impact on Rural Hospitals*, reveals stark disparities between rural and non-rural hospitals and raises concerns about policy and structural challenges that threaten the stability of rural healthcare systems.

“Rural hospitals are not just healthcare providers; they are critical lifelines for their communities,” said National Grange President Christine E. Hamp. “This report makes clear that rural providers are not the drivers of excess growth in the 340B program but depend on the 340B program to deliver care to some of our most vulnerable populations.”

According to the report, rural hospitals are falling behind in patient care due to a loss of critical funding. In general, rural hospitals serve older patients requiring more complex care, and who are more likely to require specialized and long-term care services. The report also finds that despite representing 41% of 340B hospitals, rural facilities account for less than 3% of total Medicare 340B drug claims.

“When a program designed to be a financial lifeline for rural hospitals is instead dominated by non-rural systems, rural patients and communities are the ones who pay the price,” said Hamp. “We must ensure rural providers are protected, and that access to care is not further eroded.”

The National Grange is calling on policymakers to protect and strengthen the 340B program for rural providers while addressing structural issues that divert resources away from underserved communities. This includes protecting rural hospitals from unintended harm, preventing loopholes and policies that could accelerate rural hospital closures, and

ensuring that rural communities continue to have access to critical specialty medical services.

The full report, made possible by a grant from Novartis, is available at:

<http://www.nationalgrange.org/dual-classification-impact>.

About the National Grange

Founded in 1867, the Grange is a fraternal, nonpartisan organization with roughly 1,400 local chapters across the country. Grange members provide millions of hours of service and donations totaling millions of dollars annually, based on the needs identified in their local communities. From providing dictionaries to third-grade students often unserved or underserved by broadband internet, to hosting candidate forums, to providing handmade caps for newborns, Grange members find ways to improve the lives of their neighbors both in service and through advocacy efforts.

Learn more about the Grange and our grassroots policy and priority issues, the service of our members across the nation to improve the quality of life in their communities, and where you can find a Grange local to you by visiting www.nationalgrange.org.

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