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Manufacturer	Go live date	Can CE get 340B pricing if they share claims data?	Are system owned contract pharmacies exempted from this policy?	Can CEs with no in-house pharmacy designate a contract pharmacy for 340B pricing access?	Drugs affected by this policy	Policy applies to what entity types?	Important FAQs/Information	Any other Exceptions?
Abbvie	2/1/22	Yes - 340B ESP	Yes (reach out to support@340besp.com to apply for the exemption)	Yes	Policy currently only applies to these products: ANDROGEL® CREON® DEPAKOTE® DUOPA® GENGRAF® HUMIRA® KALETRA® K-TAB® LUPRON® MAVYRET® NIASPAN® NIMBEX® NORVIR® ORIAHNN® ORILISSA® RINVOQ® SYNTHROID® SKYRIZI® SURVANTA® TRICOR® TRILIPIX® ULTANE® VIEKIRA PAK® ZEMPLAR® Imbruvica (effective 4/1/22)	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.	Q: If my organization does not provide 340B claims data by the required date, can it elect to do so at a later date and gain access to 340B pricing for contract pharmacies? If an entity begins to supply data after February 1, 2022, it must provide data for contract pharmacy dispenses to eligible patients in the prior 45-day period. Once the required data submission has been made, AbbVie will facilitate bill to/ship to contract pharmacy replenishment orders on product dispensed to eligible patients from and after the date of data submission as well as the prior 45-day period.	
Amgen	1/3/22	Yes - 340B ESP	Yes but cannot designate "an independent contract pharmacy" outside of that.	Yes	Policy currently applies to only Repatha, Enbrel, Otezla and Aimovig. Policy does not apply to any medical benefit products	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.		
AstraZeneca	10/1/20	No	No	Yes	All products except Tagrisso and Calquence	All covered entity types except for Ryan White, Community Health Centers and Federal Grantees		
Bausch Health	8/1/22	Yes - 340B ESP	Yes	Yes	All Products (no exceptions)	All covered entity types (no exceptions)		
Boehringer Ingelheim	8/1/21	Yes but only for Community Health Centers (CH, FQ, FQHC, FQHCLA, NH). Hospitals are not allowed to get 340B pricing for multiple contract pharmacies.	Yes (reach out to support@340besp.com to apply for the exemption)	Yes; policy also states that if a CE has an in-house pharmacy that is NOT capable of dispensing specialty products, then CE may designate one specialty pharmacy from within BI's limited distribution network for the sole purpose of dispensing OFEV to its patients.	All products except Gilotrif and Praxbind	Policy applies to hospitals covered entities and Community Health Centers (starting 9/1/22) only. Federal grantees (non CHCs) are exempted from this policy.		

Bristol Myers Squibb	3/1/22	<p>Yes but conditions apply:  - Applies only to IMiDs (Revlimid, Pomalyst and Thalomid)  - Wholesaler has to be ABC  - CE cannot already be part of BMS network through their in-house pharmacy for the IMiDs  - If all conditions are met then CE can designate one BMS approved specialty pharmacy. BMS will then provide a claims submission template to the entity. The CE should email the completed template to BMCCelgene340BRX@web.bms.com. See link below for the complete list of SPs approved to dispense these IMiDs:  <a href="https://www.bms.com/patient-and-caregivers/risk-evaluation-and-migration-strategies-rems.html">https://www.bms.com/patient-and-caregivers/risk-evaluation-and-migration-strategies-rems.html</a></p>	Yes	<p>Yes (CEs can designate 2 CPs - one for non-IMiD products and one for IMiD products) but certain conditions apply:  - Applies only to IMiDs (Revlimid, Pomalyst and Thalomid)  - Wholesaler has to be ABC  - If both conditions are met then CE can designate one BMS approved specialty pharmacy. See the link below for the complete list of SPs approved to dispense these IMiDs:  <a href="https://www.bms.com/patient-and-caregivers/risk-evaluation-and-migration-strategies-rems.html">https://www.bms.com/patient-and-caregivers/risk-evaluation-and-migration-strategies-rems.html</a></p>	All Products (no exceptions)	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.		
Exelixis	7/6/22	Yes - 340B ESP	Yes	Yes (1 Contract Pharmacy Location within Specialty Network)	CABOMETYX®, COMETRIQ®	All covered entity types (no exceptions)		
Gilead	5/2/22	Yes - 340B ESP	Yes	Yes	EPCLUSA, HARVONI, SOVALDI and VOSEVI	All covered entity types (no exceptions)		
GSK	4/1/22	Yes - 340B ESP	Yes	Yes	Advair, Ventolin, Breo, Trelegy, Anoro, Incurse, Flovent, Arnuity and Servent	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.		
Johnson and Johnson	5/2/22	Yes	Yes	Yes	STELARA® TREMIFYA® SIMPONI ARIA® SIMPONI® REMICADE® XARELTO® INVOKAMET® INVOKAMET® XR INVOKANA® DARZALEX® DARZALEX FASPRO® ERLEADA® INVEGA HAFYERA™ INVEGA SUSTENNA® INVEGA TRINZA® INVEGA® OPSUMIT® UPTRAVI® TRACLEER® VELETRI® SYM TUZA® PREZCOBIX® PREZISTA® ZYTIGA® PROCRIT® EDURANT® ELMIRON® TOPAMAX®	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.	Covered Entities that do not submit the requested claims data are permitted to designate (i) one PAH in-network specialty contract pharmacy location for PAH covered outpatient drugs and (ii) for all other Janssen covered outpatient drugs, another contract pharmacy location, if they decline to provide the requested limited claims data, lack an in-house pharmacy, and that contract pharmacy and location are registered on the HRSA database.	

Lilly	7/1/20 (CIALIS), 9/1/20 (ALL NDCs)	Yes - 340B ESP	Yes	Yes	All Products (no exceptions)	All covered entity types (no exceptions)	For hospitals that register and provide data for Lilly's NDCs via ESP on or before Mar. 15, 2022, Lilly will honor contract pharmacy replenishment purchases for prescriptions dispensed to eligible 340B patients on or after Oct. 29, 2021. Replenishment orders for prescriptions dispensed prior to Oct. 29, 2021 will not be honored. Starting on Mar. 16, 2022, all contract pharmacy replenishment orders for all hospitals registered with ESP will be honored for prescriptions dispensed to eligible 340B patients within 45 days of each data submission to ESP.	Certain insulin products are exempted from this policy but certain conditions apply: - Point of sale price has to be equal to the 340B price - No mark up fees of any kind can be charged to the patient - No insurer or payor can be billed (this exception only applies if the CE doesn't decide to share data through 340B ESP). If CE is sharing the data then no conditions apply for insulin products
Merck	9/1/21	Yes - 340B ESP	No	Yes	All Products (no exceptions)	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.		
Novartis	10/1/20	No	NA (if CE owned pharmacy is within 40 miles then it can access 340B prices)	NA	All Products (no exceptions)	All covered entity types (no exceptions)	This exception only applies to contract pharmacies that are more than 40 miles away from the parent location. Any contract pharmacies within 40 miles of the parent location can have unlimited access to Novartis products.	
Novo Nordisk	1/1/21	No	Yes but cannot designate "an independent contract pharmacy" outside of that.	Yes (If a CE has no in-house AND no wholly owned contract pharmacy then they can designate 2 CPs - one retail and one SP)	All Products (no exceptions)	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.		
Pfizer	3/1/22	Yes - 340B ESP	Yes	Yes (CEs can designate 2 CPs - one for Xeljanz specifically and a specialty pharmacy for other oral oncology products affected by this policy)	Xeljanz, Bosulfi, Braftovi, Daurismo, Ibrance, Inlyta, Lorbrena, Mektovi, Sutent, Talzena and Xalkori	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.		
Sanofi	10/1/20	Yes - 340B ESP	No	Yes	All Products (no exceptions)	Policy applies to Consolidated Health Center Programs, CAHs, DSH, RRCs and SCHs		
UCB	12/13/21	No	Yes	Yes	All Products (no exceptions)	Policy applies to hospitals covered entities only. Federal grantees are exempted from this policy.		
United Therapeutics	12/1/21	Yes but CEs also need to have a valid 340B purchase of one of the company's covered outpatient drugs from the contract pharmacy during the first 3 quarters of 2020. If no purchases in the first 3 quarters of 2020 then no 340B pricing is offered even if the CE shares the data through 340B ESP.	No	Yes	All Products except Adcirca	All covered entity types (no exceptions)		