



Amgen USA Inc.
1 Amgen Center Drive
Thousand Oaks, CA 91320 USA
(805) 447-1000

amgen.com

Amgen Inc. owns both Otezla® (apremilast) and Enbrel® (etanercept). Enbrel is sold by Immunex Corporation, a wholly owned subsidiary of Amgen Inc. and the Primary Manufacturer for Enbrel under CMS's Initial Price Applicability Year (IPAY) 2026 Negotiation Program.

This proposal includes the provision of the 340B price as a unit-based rebate for covered outpatient drugs selected under IPAY 2026 & IPAY 2027 dispensed by all eligible 340B entity types and their designated contract pharmacies, regardless of payer, with the rebate effectuated by the Beacon technology platform enabled by Second Sight Solutions (Second Sight).

A. General 340B Rebate Model Pilot Plan Requirements

1. Beginning January 1, 2027, 340B Covered Entities ("CEs") seeking 340B pricing on Enbrel and Otezla can use the Beacon Rebate Model platform ("Beacon") at no cost. Second Sight is integrating with TPAs at no cost to simplify reconciliation, with CE approval required. No costs for the IT platform will be passed to CEs.

Beacon is a web-based technology platform that supports the effectuation of a 340B Rebate Model. Beacon is used to collect 340B claims data from 340B CEs, validate eligibility of submitted data, facilitate payment of 340B rebates to 340B CEs, provide data and reporting, and provide real-time access to 340B rebate status to 340B CEs and Amgen.

2. Ninety days before Effective Date, Amgen will provide rebate plan information to CEs, including Beacon registration instructions by providing a publicly posted notice on HRSA's website and Second Sight Solution's website as well as email communications. Amgen will provide ongoing technical assistance, customer service, and educational resources to CEs via Beacon at no cost. During registration and throughout the pilot, CEs can engage in good faith with Beacon's Customer Support Team regarding questions. Inquiries may be escalated to Amgen's POC for resolution (Brianette MacPolin, at 340BRelations@amgen.com).

340B CEs that elect to submit 340B claims data must first register with Beacon by navigating to <http://cm.beaconchannelmanagement.com/> and completing the registration process. Use of Beacon is governed by the Terms of Use and Privacy Policy which are available at <http://cm.beaconchannelmanagement.com/>. To comply with federal law and financial institution requirements, Second Sight requires that new users complete a Know Your Business (KYB) verification process which includes the submission of certain legal documents such as Articles of Incorporation and IRS letter CP 575. Once a new account has been verified, additional users may be given access to the Beacon account by the initial registrant.



Users must also submit bank account information for ACH payments which is verified according to financial institution requirements. Verification includes the submission of a bank letter and performance of a standard penny test.

CEs that have previously registered on Beacon prior to the cancellation of the original rebate pilot in 2025 will need to confirm documentation to ensure no information has changed. Additionally, to ensure payment can be made in a timely manner, Beacon is requiring entities to submit an updated bank letter and will send additional micro-deposits for verification.

Amgen will provide HRSA with a copy of the approved plan for public posting in accordance with the 90-calendar day notice period. Changes to the approved plan will be submitted to OPA for review and approval prior to implementation.

3. CEs can order IPAY 2026 and IPAY 2027 drugs through existing mechanisms (e.g., 340B wholesaler accounts). Amgen will update its wholesaler pricing files to reflect WAC in 340B accounts and will pay the ceiling price via rebate only for eligible transactions.

4. Beacon's Customer Support Team is trained to engage with 340B CEs and address questions or concerns arising from their use of Beacon for 340B rebate payments. The Customer Support Team is available via Phone and Web Chat Monday to Friday 9am to 9pm ET, as well as via email. Support topics include technical questions (How do I use Beacon?), policy questions (Why was my 340B rebate determined to be ineligible?), and financial questions (Was my 340B rebate payment made?). Beacon will work in coordination with Amgen to provide accurate and timely responses. For matters that remain unresolved after engagement with Beacon, CEs may escalate the inquiry to Amgen's point of contact, Brianette MacPolin, at 340BRelations@amgen.com. Education and customer support information is provided proactively through online resources, pre-recorded training webinars and live training sessions as well as reactively through responses to inbound calls, emails, and chats. For additional information, please visit <https://cm.beaconchannelmanagement.com/pages/support-center>.

Beacon is committed to responding to 340B CE inquiries within 24 hours of receipt and Beacon's Customer Support Team will work to resolve inquiries as quickly as possible. As Beacon interacts with CEs, the Customer Support Team may request additional information from the entity to properly understand and evaluate the concern. Data on 340B CE inquiries is analyzed to identify themes and trends and may result in process or technology updates intended to address common questions raised by 340B CEs.

Amgen requests that CEs engage in Good Faith communication with the Beacon Customer Support team as an initial step in challenging denied claims before reporting denied rebates through HRSA's dispute process. This will ensure documentation to inform the dispute resolution and provide a mechanism to resolve issues without unnecessarily using government



resources. Amgen and Beacon will coordinate to provide timely responses and additional information as required to assist in the resolution.

5. All data in Beacon is encrypted using industry-standard protocols supporting the use of Transport Layer Security (TLS) 1.2+ or higher. Beacon has SOC 1 type 1 & SOC 2 type 1 certification. Data submissions are restricted to HRSA-approved elements, preventing 340B entities from submitting extra data.

6. Beacon does not use protected health information (PHI) as defined by HIPAA; all data is de-identified before submission to Beacon. Second Sight does not reidentify data, and staff with access to identifiable data cannot access de-identified data. Linking de-identified datasets does not expose PHI. This de-identification process has been used successfully with 340B claims data since 2020, with no HIPAA violations. Beacon does collect and securely stores user PII data in compliance with privacy laws.

Beacon provides resources on cm.beaconchannelmanagement.com under Trust Center[1] and Support Center [2]. Appendix [X] contains additional platform technical information. If OPA has additional questions, Amgen will provide more information.

[1] <https://cm.beaconchannelmanagement.com/pages/trust-center>

[2] <https://cm.beaconchannelmanagement.com/pages/support-center>

7. No Exceptions:

Amgen's Rebate Model Pilot plan includes all CE types, in accordance with HRSA's scoping to ensure the pilot captures all transactions for which compliance risks exist across the full range of CE setting in which those drugs are dispensed.

B. Reporting Requirements

1. CEs can submit data up to 45 calendar days from date of dispense to Beacon either directly or through participating TPAs. Beacon's validations will ensure a maximum of 45 calendar days between date of dispense and submission. CEs seeking an exception to this deadline for extenuating circumstances may request the exception via Beacon's Customer Support Team. Exceptions will be considered on a case-by-case basis in accordance with Amgen's standard business practices.



2. The data Beacon collects for Enbrel and Otezla will be proactively limited to HRSA-approved data fields. Regardless of data submission method, the same filtering, security and privacy protocols apply as detailed in Appendix [X]. For online data submissions, client-side JavaScript functions exclude any non Enbrel and Otezla records, ensuring data is filtered before submission. Server-side validations ensure Beacon never possesses ineligible data. The TPA filtering process using similar client-side technology provided by Beacon, ensuring filtering occurs before submission.

3. In Beacon, CEs will have access to real-time rebate status for submitted claims and payments made by Beacon. CEs must reverse any 340B claims submitted in error. Reversal credits will be used to offset future 340B rebate payments. This process will be transparent to CEs in Beacon, and Beacon's Customer Support Team will be available to resolve inquiries.

4. Through Beacon, Amgen will provide CEs access to a quarterly pricing file containing 340B Package Pricing at the NDC-11 level. This will be available for download on the Beacon platform.

5. Amgen will approve reports and will work with Beacon to send reports to HRSA inclusive of the data elements required by the agency, consistent with the cadence dictated by the agency.

C. Rebates

1, 2 & 4. Amgen and Beacon will facilitate payment of rebates on a dispensed or administered unit basis for Enbrel and Otezla dispenses on validated claims, priced at WAC less 340B ceiling price on the date of dispense. Manufacturers will offer the CE the 340B price pursuant to the purchase in the 340B account. Rebates will be paid to the CE via ACH transfer through Beacon within 10 calendar days of receipt of complete and validated data submissions. Denials will be processed in Beacon within 10 calendar days of receipt and will include documentation supporting the denial. If a claim is denied and later resubmitted, Beacon will facilitate payment or re-denial (with documentation) within 10 calendar days of the valid submission.

3. Amgen will allow for the payment of rebates based upon the collection of limited Enbrel and Otezla dispenses, dispensed within 15 days prior to the Rebate Model Pilot Program Effective Date and up to the amount of two packages per NDC-11 as unreplenished accumulated packages. Dispense information for unreplenished accumulated packages may be submitted for up to 45 days after the date of dispense.



5. For a complete list of Beacon’s validations please see Appendix [Y]. 340B Rebates will not be rejected due to concerns with diversion or Medicaid duplicate discounts.

Amgen will address MFP-340B Duplication through the adjustment or rejection of MFP refund payments, as paid under current MFP guidance for 2027 effectuation and governed by Amgen's MFP Effectuation Plan.

The integrity of the data submitted as part of the Rebate Model Pilot is crucial to achieving the pilot’s intended goal of minimizing duplication between 340B and MFP discounts. As such, Amgen will regularly monitor rebate submissions to ensure that key data elements (Prescription Number, Pharmacy ID, Dispense Date, etc.) are not altered from their native values. Evidence of data integrity concerns will be raised immediately with CEs and/or HRSA.

Amgen will continually monitor instances where non-WAC purchases appear to be used for 340B rebate submission and will immediately raise such deviations with HRSA/OPA or address through statutory dispute resolution or audit mechanism. A 340B rebate will not be denied solely on the basis of a perceived non-WAC purchase.

6. Amgen is submitting the Rebate Model Pilot Effectuation Plan for the below NDC-11s associated with Enbrel, which has initial price applicability year of 2026, and Otezla, which has an initial price applicability year for 2027. These NDCs are included within the CMS Medicare Drug Price Negotiation Selected Drug List.

Initial Price Applicability Year	Selected Drug Name	Selected NDC-11s
2026	ENBREL® (etanercept)	58406-0055-04
2026	ENBREL® (etanercept)	58406-0010-04
2026	ENBREL® (etanercept)	58406-0021-04
2026	ENBREL® (etanercept)	58406-0032-04
2026	ENBREL® (etanercept)	58406-0044-04
2026	ENBREL® (etanercept)	58406-0044-24 (new NDC available by 1/1/27)
2027	OTEZLA® / OTEZLA XR® (apremilast)	55513-0137-60



Initial Price Applicability Year	Selected Drug Name	Selected NDC-11s
2027	OTEZLA® / OTEZLA XR® (apremilast)	55513-0369-55
2027	OTEZLA® / OTEZLA XR® (apremilast)	55513-0497-60
2027	OTEZLA® / OTEZLA XR® (apremilast)	55513-0508-55
2027	OTEZLA® / OTEZLA XR® (apremilast)	55513-0516-41
2027	OTEZLA® / OTEZLA XR® (apremilast)	55513-0519-30

D. Data

1. Please see Appendix [Y] for a complete listing of fields to be requested by Amgen and collected through the Beacon Rebate Model, as well as associated definitions. Requested data is limited to Pharmacy and Medical claims datasets.

2. Please see Appendix [Y] for details associated with the submission of insurance fields for uninsured or cash paying patients. Due to BIN being a numeric field within industry systems, the value “999999” is leveraged in place of “CASH”.

3. Beacon allows for the resubmission of claims data, within the 45 day window for submission, when the request is deemed incomplete or fails certain validations.

4. Wastage or undispensed units not associated with a specific patient encounter should be submitted as a secondary medical claim, with a separate “Claim Line Number” from the dispensed units. Dispensed and undispensed units associated with the same patient encounter should utilize the same “Claim Number,” as defined in Appendix [Y]. Claim Number and Claim Line Number are native to medical benefit administration claims data and are used to uniquely



identify dispenses. Amgen affirms that no purchasing information is required or collected as part of the pilot. Claim Number and Claim Line Number are among the medical claims fields HRSA has approved for collection, and these data elements allow Amgen and Beacon to identify unique dispenses.

For Otezla and Enbrel, which are generally dispensed through the pharmacy benefit, use of this medical claim wastage process is expected to be limited.

5. As part of administering Amgen's 340B Rebate Model Pilot, Amgen will use claims data received through the Pilot only for the purposes explicitly identified in this Plan for the administration of the 340B Rebate Model.

Amgen will not use, collect, aggregate, share, or license Pilot data for purposes outside of the Rebate Model Pilot. Second Sight, as Amgen's designated IT platform vendor, will use CE data only to support the Rebate Model Pilot and will not use, collect, aggregate, share, or license such data for any purpose outside of the Pilot.

F. Beacon Functionality Overview (Appendix [X])

Beacon Overview

Beacon is a web-based technology platform that supports the effectuation of a 340B Rebate Model. Beacon is used to collect 340B claims from 340B CEs, validate eligibility of submitted data, facilitate payment of 340B rebates to 340B CEs, and provide real-time access to 340B rebate status to 340B CEs and pharmaceutical manufacturers. Beacon is also utilized to provide reporting to HRSA. The information provided in this document is applicable to any pharmaceutical manufacturer that selects Beacon for its 340B Rebate Model effectuation.

Registration

340B CEs that elect to submit 340B claims must first register with Beacon by navigating to <http://cm.beaconchannelmanagement.com> and completing the registration process. Registration with and use of Beacon by 340B CEs is free of charge. Use of Beacon is governed by the Terms of Use and Privacy Policy which are available at <http://cm.beaconchannelmanagement.com>. To comply with federal law and financial institution requirements, Second Sight requires that new users complete a Know Your Business (KYB) verification process which includes the submission of certain legal documents such as Articles of Incorporation and IRS letter CP 575. Once a new account has been verified, additional users may be given access to the Beacon account by the initial registrant or subsequent assigned administrators.



Users must also submit bank account information for ACH payments which is verified according to financial institution requirements. Verification includes the submission of a bank letter and performance of a standard penny test.

Data Submission

340B CEs can submit data online through Beacon or via a direct data submission process with participating third-party administrators (TPAs). Data submissions are proactively limited to only those data elements that have been approved by HRSA and 340B CEs cannot inadvertently submit additional data elements that fall outside the scope of the 340B Rebate Model pilot. Regardless of whether data is submitted online or through a TPA, the same filtering, security and privacy protocols apply.

Data Filtering

Beacon collects data for only those NDCs for which a 340B Rebate Model pilot has been approved. For online data submissions, client-side JavaScript functions exclude from data submissions any records that include an NDC that has not been approved for a 340B Rebate Model pilot by HRSA. Client-side JavaScript functions ensure that the data is filtered prior to submission to Beacon and server-side validations ensure that Beacon is never in possession of the ineligible data. For direct data submissions by a TPA, the filtering process is executed by the TPA utilizing similar client-side technology provided by Second Sight, again ensuring that data filtering occurs prior to submission to Beacon.

Data Security

Beacon is hosted on Microsoft Azure, a premier cloud computing platform known for its reliability, scalability, and security. Beacon is distributed across multiple Azure Availability Zones, each a unique physical location comprising of one or more data centers within an Azure region. By distributing applications across multiple Availability Zones, Beacon can achieve high availability and fault tolerance for its service.

At the core of the Beacon platform is a strong commitment to data security. Second Sight builds and maintains the Beacon systems in alignment with industry-recognized frameworks such as the National Institute of Standards and Technology Cybersecurity Framework (NIST CSF) and Open Web Application Security Project (OWASP) best practices. Security is embedded throughout the software development lifecycle—from design and code reviews to deployment and monitoring. Second Sight follows secure coding standards and performs regular threat modeling, vulnerability scanning, and automated testing to ensure a robust security posture.

All data in Beacon is encrypted at rest and in transit using industry-standard protocols supporting the use of Transport Layer Security (TLS) 1.2+ or higher. Beacon services enforce mandatory Multi-Factor Authentication (MFA) to ensure a high level of security for end-users, providing email, SMS, and application-based authentication methods.



Second Sight engages established third-party risk and cybersecurity firms to perform annual internal, external, and web application penetration tests, along with comprehensive security assessments across all platforms and infrastructure.

In addition, Beacon has achieved SOC 1 and SOC 2 certification, demonstrating compliance with rigorous standards for security, availability and confidentiality.

To ensure the security of the Beacon Rebate Model Platform, unauthorized synthetic traffic, including but not limited to AI agents, bots, or emulated users, is prohibited platform behavior. Specific monitoring controls are in place to detect and stop such unauthorized behavior and protect platform security for all users.

This restriction does not limit CEs legitimate use of automated submission or integration tools in the ordinary course of Pilot participation, including submissions facilitated by TPAs acting on a covered entity's behalf. Second Sight has made, and will continue to make, automated submission tools available to CEs and their TPAs for this purpose.

Data Privacy

Beacon is designed to operate without the use of any protected health information (PHI) as defined by the Health Information Portability and Accountability Act (HIPAA). Second Sight has received an expert determination from Dr. Brad Malin that the data collected through Beacon meets the definition of a De-Identified Dataset under HIPAA. A copy of this expert determination is available upon request. As described in Dr. Malin's expert determination, the de-identification process occurs prior to the submission of data to Beacon. Furthermore, Second Sight does not reidentify this data and personnel with access to identifiable data do not also have access to de-identified data. De-identified datasets can be linked to other de-identified datasets but, as discussed in Dr. Malin's expert determination, this does not constitute a reidentification of data and no PHI is exposed through this linking process. Second Sight has utilized this deidentification process with 340B claims data submitted through 340B ESP since 2020 and has successfully ensured that no HIPAA violations have occurred.

Beacon also collects personally identifiable information (PII) including user's names and email addresses. This information is stored securely, and Second Sight complies with all applicable privacy laws. Additional information on how we collect, maintain and use PII is available in our Privacy Policy.

Rebate Payments and Reconciliation Data

Following the successful validation of 340B claim submissions according to the eligibility criteria approved by HRSA, Beacon initiates the rebate payment process. Rebates are priced based on the WAC price loaded to the 340B account and 340B ceiling price as of the claim date of dispense. Rebate payments are transmitted to the 340B CE via an ACH payment within the time



period approved by HRSA. The transaction ID of the rebate payment is appended to the 340B rebate record maintained in Beacon giving the 340B CE real-time access to reconciliation data in Beacon. Rebates that are determined to be ineligible are accessible in Beacon by the 340B CE and include detail on the eligibility determination.

In addition to accessing information online in Beacon, 340B CEs can also download 340B rebate data for inclusion in their proprietary systems. Because 340B claims are de-identified prior to submission to the Beacon platform, a unique ID is appended to the data submission and made available to 340B CEs immediately following the initial 340B claims submission. This unique ID allows 340B CEs to link de-identified data maintained in Beacon with the identifiable data maintained in 340B CEs' proprietary systems for reconciliation purposes.

Finally, Second Sight has communicated its willingness and has already begun to integrate directly with TPAs to simplify the reconciliation process. Second Sight will not charge TPAs for this integration service though 340B CEs will have to approve any integrations with TPAs for their specific data.

Beacon Customer Support

Beacon's Customer Support Team is trained to engage with 340B CEs and address questions or concerns arising from their use of Beacon for 340B rebate payments. Support topics may range from technical (How do I use Beacon?) to policy (Why was my 340B rebate determined to be ineligible?) to financial (Was my 340B rebate payment made?) in nature. Beacon will work in coordination with Amgen to provide accurate and timely responses. Customer support information is provided proactively through online resources, pre-recorded training webinars and live training sessions as well as reactively through responses to inbound calls, emails, and chats. For additional information, please visit

<https://cm.beaconchannelmanagement.com/pages/support-center>.

Beacon is committed to responding to 340B CE inquiries within 24 hours of receipt and the Beacon customer support team will work to resolve inquiries as quickly as possible. As Beacon interacts with CEs, the Customer Support Team may request additional information from the entity in order to properly understand and evaluate the concern. Data on 340B CE inquiries is analyzed to identify themes and trends and may result in process or technology updates intended to address common questions raised by 340B CEs.



G. Data Submission Fields & Definitions (Appendix [Y])

Data Submissions

Pharmacy Claims

Field	Description	Data Type	Required
Date Of Service	Date on which the pharmacy filled the prescription.	Date	Y
Date Prescribed	Date the healthcare provider wrote the prescription.	Date	Y
Rx Number	The native (unmodified) prescription number for the prescription as generated by the pharmacy.	Numeric	Y
Fill Number	Indicates the number of times the prescription has been filled as of the current fill. For example, a value of "0" indicates that the prescription has not been filled previously and the current fill is the first one. The first refill would have a value of "1".	Numeric (0-99)	Y
NDC-11	The 11-digit National Drug Code which indicates the manufacturer, product, and commercial package size.	Numeric (11 Digits)	Y
Quantity	Number of units dispensed to the patient. Appropriate Units of Measure for each product will be provided within Beacon's NDC list.	Numeric	Y
Prescriber ID	National provider identifier (NPI) of the healthcare provider that wrote the prescription.	Numeric (10 Digits)	Y
Service Provider ID	NPI of the pharmacy that filled the prescription	Numeric (10 Digits)	Y
340B ID	HRSA assigned identifier of the 340B CE that designated the dispense as 340B.	Alpha/Numeric	Y
BIN Number	Prescription Drug Bank Identification Number for the primary payer. Enables pharmacies to electronically transmit data to the appropriate PBM for processing and reimbursement. If a patient is uninsured or a cash payer, mark "999999" in this field.	Numeric (6 Digits)	Y
PCN Number	Processor Control Number for the primary payer. Identifier used to determine which processor will handle a prescription drug claim. If a patient is uninsured or a cash payer, mark "CASH" in this field. If there is no PCN, mark "NONE" in this field.	Alpha/Numeric	Y



Medical Claims

Field	Description	Data Type	Required
Health Plan Name	Name of the patient's primary health insurance plan. If the patient is uninsured or a cash payer, mark "CASH" in this field. If no health plan information is recorded, mark "NONE" in this field.	Alpha/Numeric	Y
Health Plan ID	The identifier code of the patient's primary health insurance plan. If the patient is uninsured or a cash payer, mark "CASH" in this field. If no health plan information is recorded, mark "NONE" in this field.	Alpha/Numeric	Y
Health Plan ID Qualifier	The qualifier for the patient's health insurance plan ID.	Alpha/Numeric	
Service Provider ID	The NPI of the healthcare entity where the patient received the medication administration. For example, this could be the NPI of a hospital outpatient surgery center or the NPI of an outpatient infusion center.	Numeric (10 Digits)	Y
NDC-11	The 11-digit National Drug Code which indicates the manufacturer, product, and commercial package size.	Numeric (11 Digits)	Y
Quantity	The quantity of medication administered to the patient. Quantity must reflect standardized billing units as defined by NCPDP for the NDC-11.	Numeric	Y
Unit of Measure	UOM must be consistent with the standardized billing unit as defined by NCPDP for the NDC-11.	Alpha/Numeric	Y
Date of Service	Date on which the medication was administered to the patient.	Date	Y
Physician ID	The NPI of the healthcare provider who rendered or supervised the care reported on the claim.	Numeric (10 Digits)	Y
Claim Number	A unique identifier for a prescription and claim processor. This value should align with the Patient Control Number or Claim Submission ID, as set within provider systems and included on EDI 837 transmissions to payers (Form 1500 Box 26 or Claim 1450 Box 3).	Alpha/Numeric	Y
Claim Line Number	Identifies an individual line number on a claim. Line numbers distinguish services that are submitted on the same claim. Wastage Claims or undispensed units submitted should include a separate claim line number from the dispensed units.	Numeric	Y
340B ID	HRSA assigned identifier of the 340B CE that designated the administration as 340B.	Alpha/Numeric	Y



Validations

Pharmacy Claim Validations

Validation	Description
<i>Front End Validations</i>	
Ineligible Product	NDC submitted must be subject to manufacturer policy.
Invalid [Field]	Entry must meet field requirements, e.g., NPI must be 10 digits.
Policy Exception	If an entity has a policy exception and is not eligible for rebates via Beacon, no submissions will be accepted where entity has been exempted. Amgen's Rebate Model plan does not include any exceptions.
Registered User	Submission must be for 340B ID registered to User
<i>Back End Validations</i>	
Claim Expired	Claim submission date must be within 45 days after the Date of Service.
Pharmacy Eligibility	The Service Provider ID must meet the following conditions as of the Date of Service: 1. Active and included within the NCPDP and NPPES databases, 2. A valid CE site, shipping address, or contract pharmacy according to HRSA OPA enrollment data, or 3. Eligible to dispense 340B-priced drugs according to the manufacturer's contract pharmacy policy.
CE Eligibility - Date	CE is active in HRSA OPAIS at Date of Service.
CE Eligibility - Orphan Drug	If an NDC is identified as an orphan drug, and the manufacturer does not voluntarily offer 340B pricing for certain hospital types (e.g., SCH, CAN, CAH, RRC), claims from these hospital types will not be accepted.
Aberrant Quantity	Quantity submitted must align with standard dispensing guidelines, consistent with manufacturer commercial business practices. Aberrant Ceiling: Claim quantity cannot be equal to or greater than the maximum aberrant quantity for the NDC. Aberrant Partial: Claim quantity cannot be a partial number listed for the NDC, e.g. Per NDC, the submitted quantities must be multiples of expected quantities.
NDC Expiration	Claim Date of Service must be prior to the final product expiration date for the NDC.
Prescriber ID - Provider	Prescriber ID must be in the NPI registry as a provider.
Prescriber ID - Active	Prescriber ID must be active in the NPI registry at Date of Service.
Network Eligibility	Service Provider ID must be included in the dispensed drug's Limited Distribution Network, if applicable to the NDC.
Pre-Policy Claim	Claim must have Date of Service on or after policy start, exempting specifically permitted pre-policy claims.
Duplicate - One Entity	Duplicate check is performed on distinct claim fields against past conforming claims submitted to the platform by that CE. Distinct claim: Date of Service, Service Provider ID, NDC, Rx Number.



Validation	Description
Duplicate - Multiple Entities	When the same claim is submitted by multiple CEs, the first conforming claim submitted in Beacon will be considered valid. Subsequent submissions will be considered invalid.



Medical Claim Validations

Validation	Description
<i>Front End Validations</i>	
Ineligible Product	NDC submitted must be subject to manufacturer policy.
Invalid [Field]	Entry must meet field requirements, e.g., NPI must be 10 digits.
Policy Exception	If an entity has a policy exception and is not eligible for rebates via Beacon, no submissions will be accepted where entity has been exempted. Amgen's Rebate Model plan does not include any exceptions.
Registered User	Submission must be for 340B ID registered to User
<i>Back End Validations</i>	
Claim Expired	Claim submission date must be within 45 days after the Date of Service.
Pharmacy Eligibility	The Service Provider ID must meet the following conditions as of the Date of Service: 1. Active and included within the NCPDP and NPPES databases, 2. A valid CE site, shipping address, or contract pharmacy according to HRSA OPA enrollment data, or 3. Eligible to dispense 340B-priced drugs according to the manufacturer's contract pharmacy policy.
Prescriber ID - Provider	Prescriber ID must be in the NPI registry as a provider.
Prescriber ID - Active	Prescriber ID must be active in the NPI registry at Date of Service.
CE Eligibility - Date	CE is active in HRSA OPAIS at Date of Service.
CE Eligibility - Orphan Drug	If an NDC is identified as an orphan drug, and the manufacturer does not voluntarily offer 340B pricing for certain hospital types (e.g., SCH, CAN, CAH, RRC), claims from these hospital types will not be accepted.
Aberrant Quantity	Quantity submitted must align with standard dispensing practices, consistent with manufacturer commercial business practices. Aberrant Ceiling: Claim quantity cannot be equal to or greater than the maximum aberrant quantity for the NDC. Aberrant Partial: Claim quantity cannot be a partial number listed for the NDC, e.g. Per NDC, the submitted quantities must be multiples of expected quantities.
NDC Expiration	Claim Date of Service must be prior to the final product expiration date for the NDC.
Pre-Policy Claim	Claim must have Date of Service on or after policy start, exempting specifically permitted pre-policy claims.
Duplicate - One Entity	Duplicate check is performed on distinct claim fields against past conforming claims submitted to the platform by that CE. Distinct claim: Date of Service, Service Provider ID, NDC, Claim Number.
Duplicate - Multiple Entities	When the same claim is submitted by multiple CEs, the first conforming claim submitted in Beacon will be considered valid. Subsequent submissions will be considered invalid.