

March 1, 2024

### **Notice Regarding Recalculated 340B Ceiling Prices for 1Q2021**

Johnson & Johnson Health Care Systems Inc., (“JJHCS”) on behalf of Johnson & Johnson companies participating in the 340B program (Janssen Biotech, Inc. and Janssen Products, L.P.) (“Janssen”) has asked the Office of Pharmacy Affairs (OPA) to post this notice on OPA’s public website to ensure transparency.

Janssen has revised 1Q2021 340B pricing on covered outpatient drugs. The revisions were due to standard restatements of Medicaid pricing data made to CMS. As a result of the recalculated 340B Ceiling Prices, Janssen has determined that, a refund is or may be owed to 340B Covered Entities that purchased any of the below NDCs during the period of January 1, 2021 through March 31, 2021. Janssen is not seeking reimbursement or repayment where Covered Entities paid a lower price than the recalculated 340B ceiling prices for the indicated time period, and any such amounts will not be used as offsets in determining the aggregate amount of any refund due.

Janssen will be communicating with and issuing refund adjustments through the wholesalers that submitted the original sale on behalf of the 340B covered entities. If you feel you have not received an appropriate adjustment, please contact Janssen via email at: [ra-hcsus-govcontract@its.jnj.com](mailto:ra-hcsus-govcontract@its.jnj.com) with a subject line of “340B Standard Refile” and your entities 340B ID. In addition, please include in the body of your email: NDC Number, Quantity, Original Purchase Invoice Number, Invoice Date, and the Wholesaler the product was purchased through for all affected products so that we can research your inquiry further.

<b>NDC 11</b>	<b>NDC Description</b>	<b>Quarter/Year</b>
57894-0060-02	STELARA 1X45MG VIAL USA	1Q21
57894-0060-03	STELARA 45 MG/0.5 ML ULTRASAFE PFS	1Q21
57894-0640-01	TREMFYA 1X100MG USAFEPL USA	1Q21
57894-0640-11	TREMFYA 1X100MG ONE PR. USA	1Q21
59676-0310-01	PROCRIT 10000 U/ML 6'S	1Q21
59676-0310-02	PROCRIT 10000 U/ML 25'S	1Q21
59676-0312-04	PROCRIT 10000 U/ML MD VIAL 4S	1Q21
59676-0320-04	PROCRIT 20000 U/ML VIAL MD 4S	1Q21
59676-0340-01	PROCRIT 40000 U/ML 4'S	1Q21