

August 19, 2022



Notice Regarding Offer of Refunds to 340B Covered Entities for Purchases of Merck Products

Merck & Co., Inc. (“Merck”) has recently recalculated 340B Ceiling Prices for the products listed below for the time period July 1, 2019 through September 30, 2019 (3Q2019). As a result of the recalculated 340B Ceiling Prices, Merck has determined that, pursuant to 42 U.S.C. § 256b(d)(1)(B)(ii) and 42 C.F.R. § 10.11(b)(4), a refund is owed to 340B Covered Entities that purchased these products during the time periods of July 1, 2019 through September 30, 2019 (3Q2019). The table below identifies the NDCs that are subject to a refund in each applicable quarter. The recalculated Ceiling Prices are the result of revised pricing data that were submitted to the Centers for Medicare & Medicaid Services.

Time Period	Product	NDC-11
07/01/2019 - 09/30/2019 (3Q2019)	BELSOMRA® (suvorexant) 10 mg Tablets Green	00006-0033-30
07/01/2019 - 09/30/2019 (3Q2019)	BELSOMRA® (suvorexant) 15 mg Tablets White	00006-0325-30
07/01/2019 - 09/30/2019 (3Q2019)	BELSOMRA® (suvorexant) 20 mg Tablets White	00006-0335-30
07/01/2019 - 09/30/2019 (3Q2019)	BELSOMRA® (suvorexant) 5 mg Tablets Yellow	00006-0005-30
07/01/2019 - 09/30/2019 (3Q2019)	BRIDION® (sugammadex) Injection	00006-5425-15
07/01/2019 - 09/30/2019 (3Q2019)	CELESTONE® SOLUSPAN® (betamethasone sodium phosphate and betamethasone acetate) Injectable Suspension 6 mg/mL	00085-4320-01
07/01/2019 - 09/30/2019 (3Q2019)	CUBICIN® RF (daptomycin for injection) 500 mg intravenous solution	67919-0012-01
07/01/2019 - 09/30/2019 (3Q2019)	CUBICIN® (daptomycin for injection) 500 mg intravenous solution	67919-0011-01
07/01/2019 - 09/30/2019 (3Q2019)	INTEGRILIN® (eptifibatide) □ Injection 200 mg	00085-1177-02
07/01/2019 - 09/30/2019 (3Q2019)	INTEGRILIN® (eptifibatide) □ Injection 20 mg	00085-1177-01
07/01/2019 - 09/30/2019 (3Q2019)	INVANZ® (ertapenem for injection) □ 1 g	00006-3843-71
07/01/2019 - 09/30/2019 (3Q2019)	SIVEXTRO® (tedizolid phosphate) 200 mg Tablets	67919-0041-01
07/01/2019 - 09/30/2019 (3Q2019)	SIVEXTRO® (tedizolid phosphate) 200 mg Tablets	67919-0041-02
07/01/2019 - 09/30/2019 (3Q2019)	SIVEXTRO® (tedizolid phosphate) for injection, for intravenous use 200 mg	67919-0040-01
07/01/2019 - 09/30/2019 (3Q2019)	TICE® BCG BCG LIVE for intravesical use	00052-0602-02

Please note that Merck is offering refunds to affected 340B Covered Entities in two ways:

1. 340B Covered Entities that are entitled to an aggregated refund across applicable NDCs of greater than \$10.00 will be contacted directly by, or on behalf of, Merck with information on how the refund will be processed.
2. The 340B Covered Entities that are entitled to an aggregated refund across applicable NDCs of \$10.00 or less ***will not be contacted directly by, or on behalf of, Merck.*** Instead, Merck is offering a refund to these 340B Covered Entities through this Notice. If a 340B Covered Entity does not receive a communication from, or on behalf of, Merck and that 340B Covered Entity believes it is entitled to a refund on the applicable NDCs, then the 340B Covered Entity should contact Merck at the following email address: 340BRefunds@merck.com to request the refund and accept Merck's refund offer. Merck will then work with the 340B Covered Entity to process any refund that is due to the 340B Covered Entity for the applicable NDCs.

Merck has asked the Health Resources and Services Administration (HRSA) to post this Notice on the HRSA's public website to ensure transparency to all 340B Covered Entities regarding the Ceiling Price recalculations for the products identified above and to offer a refund to any of the 340B Covered Entities that may have purchased the products identified above during the relevant time periods. Please direct any questions and/or requests for additional information to Merck at the following email address: 340BRefunds@merck.com.