November 23, 2026

Notice Regarding AbbVie's 340B In-House Pharmacy Policy ("Policy")

Dear 340B Covered Entity,

AbbVie is committed to the intended purpose of the 340B program and believes that for the 340B program to fulfill its important mission of improving access to medicines for uninsured and vulnerable patients, program integrity challenges must be addressed.

Consistent with decisions by the Third Circuit in *Sanofi* and the D.C. Circuit in *Novartis*, which have upheld the ability of manufacturers to include conditions on their offers to sell covered outpatient drugs at the 340B price, we are writing to provide notice that AbbVie is updating the terms of our offer to sell AbbVie's covered outpatient drugs at the 340B price to apply to units dispensed through a covered entity's in-house outpatient pharmacy or otherwise shipped to a covered entity designated address for receipt and distribution of 340B-priced drugs, including those administered by a provider.

Effective December 3, 2026, as a condition of our offer, all covered entity types listed in 42 U.S.C. §256b(a)(4) will be required to provide certain pharmacy and medical claims level data to the 340B ESP™ platform as a condition of receiving the 340B price on all covered outpatient drugs in the AbbVie product portfolio. This Policy will apply to all 340B dispenses and administrations occurring on or after December 3, 2026, subject to the exclusions identified on the 340B ESP™ platform. Additional details regarding this Policy are provided in the attached Frequently Asked Questions. This policy does not block access to 340B priced medicines for any eligible covered entity and patients will continue to have uninterrupted access to AbbVie's medicines.

The pharmacy and medical claims data fields that must be submitted as a condition of our offer are consistent with information covered entities already collect, maintain, and report as claims level data through their existing third-party payer and vendor relationships. Covered entities already provide the data to manufacturers in deidentified form under one or more of the following: contract pharmacy policies, in-house pharmacy claims policies, maximum fair price policies, and, once effective, 340B Rebate Model Pilot Program policies.

Pharmacy claims data must be submitted to the 340B ESP™ platform within 45 calendar days of the date of dispense, and medical claims data must be submitted within 60 calendar days of the date of the administration. The specific claims level data fields are listed in Attachment A. Failure to provide timely, complete, and accurate data for all 340B-eligible purchases of AbbVie covered outpatient drugs may be considered a rejection of the terms of our offer to sell our products at the 340B price, and AbbVie reserves the right to suspend or modify a covered entity's access to 340B pricing until the outstanding data is provided.

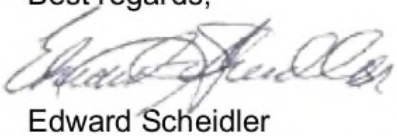
Covered entities that do not currently submit data to the 340B ESP™ platform can register at www.340BESP.com. All covered entities that purchase AbbVie covered outpatient drugs at the 340B ceiling price should be registered with 340B ESP™ and able to submit the requested data on or before December 3, 2026.

Please note that AbbVie's existing 340B program integrity initiative is separate from this Policy and is not changed or altered by this notice. Compliance with this Policy and AbbVie's 340B program

integrity initiative is required to the extent that each is applicable to a covered entity's operations. AbbVie reserves the right to modify this Policy at any time and will notify covered entities of material changes through the 340B ESP™ platform or other appropriate means.

We look forward to working collaboratively with you to further strengthen the 340B program. Please reach out to 340Bcommunications@abbvie.com if you have questions about the updated terms of our offer. For assistance with using 340B ESP™, please contact support@340BESP.com.

Best regards,



Edward Scheidler
Head of 340B Center of Excellence

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FREQUENTLY ASKED QUESTIONS

Q: What are the terms of AbbVie's offer of the 340B price for all covered entities?

All covered entities must comply with AbbVie's 340B In-House Pharmacy Policy and will be required to submit certain claims level data (as further described in Attachment A) for dispenses of AbbVie covered outpatient drugs through their in-house pharmacies or otherwise shipped to a covered entity designated address for receipt and distribution of 340B-priced drugs, including those administered by a provider.

Q: Does my covered entity have an "in-house outpatient pharmacy"?

An "in-house outpatient pharmacy" is any type of pharmacy–including but not limited to specialty pharmacy, retail pharmacy, or central fill pharmacy, that (i) is 100% owned by your covered entity, (ii) is appropriately licensed or authorized by the applicable state, (iii) is capable of dispensing or administering covered outpatient drugs; and (iv) is not listed as a contract pharmacy for your covered entity on OPAIS.

It does not include a pharmacy partially owned by your covered entity, a pharmacy owned by an entity other than your covered entity, including a parent or affiliated entity other than your covered entity. Merely listing a non-entity owned pharmacy (i.e., a contract pharmacy) as a ship to address on OPAIS does not confer entity-owned status on the pharmacy. AbbVie may require eligibility information, such as auditable records, to confirm 100% ownership by your covered entity.

Q: How does my covered entity register for the 340B ESP™ platform?

Go to www.340BESP.com to register your covered entity's account. Upon initial registration, you will be prompted with an onboarding tutorial that walks you through the account setup process step by step. This process takes about 15 minutes. Once your covered entity's account is activated, you will be able to securely upload data to 340B ESP™.

Q: Which products are subject to AbbVie's 340B In-House Pharmacy Policy?

AbbVie's 340B policy applies to all covered outpatient drugs in the AbbVie portfolio of products. Please refer to 340B ESP™ platform for list of AbbVie NDCs subject to AbbVie's 340B In-House Pharmacy Policy.

However, beginning on the effective date of the 340B Program Rebate Model Pilot Program, this Policy will not apply to any dispense or administration of an AbbVie NDC-11 that, as of the date of dispense or administration, is actively eligible to participate in the 340B Program Rebate Model Pilot Program. The current list of NDCs is maintained on the 340B ESP™ platform (www.340BESP.com), and AbbVie reserves the right to update this list at any time.

Q: Which covered entity types are subject to AbbVie's In-House Pharmacy Policy?

This policy applies to all covered entity types listed in 42 U.S.C. §256b(a)(4).

Q: My covered entity does not currently submit claims to 340B ESP™ because it dispenses through its in-house pharmacies. Is this notice applicable?

Yes. Covered entities are required to submit certain claims level data on all dispenses through in-house pharmacies or otherwise shipped to a covered entity designated address for receipt and

distribution of 340B-priced drugs, including those administered by a provider, on or after December 3, 2026, to as a condition of purchasing AbbVie covered outpatient drugs at 340B ceiling prices. Visit www.340BESP.com to register and set up an account if your covered entity is not currently submitting data to the 340B ESP™ platform.

Q: How will AbbVie use the 340B in-house pharmacy and medical claims level data that covered entities provide through 340B ESP™?

AbbVie is committed to program transparency and integrity. In-house pharmacy and medical claims level data uploaded by 340B covered entities will be used to identify and resolve certain ineligible rebates (including in Medicaid, Medicare Part D, TRICARE, and commercial payer rebates, and multiple 340B rebate requests on a single dispense); support good faith inquires and audits and determine compliance with AbbVie's policies; including this Policy, our 340B program integrity initiative, and AbbVie's offer terms. If 340B claims data submissions are insufficient to validate 340B purchases, AbbVie may suspend or modify a covered entity's access to 340B pricing until the outstanding data is provided to validate 340B purchases. Only one covered entity may claim the 340B discount on each 340B-eligible dispense.

Q: May my covered entity accept delivery of 340B-priced AbbVie drugs and ship them to another entity?

No. Consistent with federal wholesaling and redistribution laws, and AbbVie's standard sales terms and conditions, medicines may be purchased solely for use by the purchasing entity. This prohibits selling, transferring, or otherwise distributing product to any person or entity for resale or other purposes, including to an affiliated covered entity or pharmacy.

Q: Are covered entities located in certain states exempt from AbbVie's In-House Pharmacy Policy?

AbbVie's In-House Pharmacy Policy does not apply to covered entities located in states that have enacted laws applicable to the terms of this Policy.

Q: Are there any changes to AbbVie's existing 340B program integrity initiative related to bill to/ ship to orders to contract pharmacies?

No, there is no change to AbbVie's existing 340B program integrity initiative. Covered entities are not permitted to direct bill to/ ship to orders of AbbVie's 340B-priced medicines to contract pharmacies, except under the limited conditions of AbbVie's existing 340B program integrity initiative, the latest version of which can be found at www.340BESP.com/resources.

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Attachment A
Claims Level Data Fields

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" indicated that the prescription has not been filled previously and the current fill is the first one. The first refill would have 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 Dispensed	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 unique identifier of the 340B covered entity that designated the dispense as 340B.	Alpha/Numeric	Y
Rx BIN	Prescription Drug Bank Identification Number for the primary payer. Enables pharmacies to electronically transmit data to the appropriate PBM for processing and reimbursement. If patient is uninsured or a cash payer, mark “CASH” in this field.	Numeric (6 digits)	Y
Rx PCN	Processor Control Number for the primary payer. Identifier used to determine which processor will handle a prescription drug claim. If 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
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	Unit of Measure 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.	Numeric	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
340B ID	HRSA-assigned unique identifier of the 340B covered entity that designated the administration as 340B.	Alpha/Numeric	Y