

Notice Regarding Recalculated 340B Ceiling Prices for Certain Products of SpecGx LLC covering period Q3 2019 – Q2 2020

SpecGx LLC (“SpecGx”), labeler codes 00406 and 23635, a Mallinckrodt Pharmaceuticals company (“Mallinckrodt”) has recalculated its 340B ceiling prices for the products listed below for the period Q3 2019 through Q2 2020 (the “Restatement Period”). The recalculation of ceiling prices is due to revisions to the Medicaid pricing data for the period Q1 2019 through Q4 2019.

SpecGx has asked the Office of Pharmacy Affairs (“OPA”) to post this Notice on OPA’s public website to ensure transparency by providing access to information about SpecGx’s recalculation affecting certain 340B Covered Entities for the impacted products. As a result of the recalculated 340B Ceiling Prices, SpecGx has determined that refunds are owed to 340B Covered Entities that purchased these products during the Restatement Period.

- For Covered Entities that SpecGx has determined are owed a refund of \$50.00 or more (in the aggregate, as determined across all applicable purchases and National Drug Codes (“NDCs”) in the Restatement Period), SpecGx will be working with a third party to issue refunds: (1) as a credit to a Covered Entity’s validated wholesaler account if one can be identified, or (2) as a check or Automated Clearing House payment issued directly to Covered Entities whose wholesaler account cannot be identified.
- If any entity believes it is owed a refund in the aggregate of less than \$50.00 for 340B purchases of the impacted products set forth below for the Restatement Period and would like to request a refund, the entity should send an email to 340BRefunds@mnk.com. All refund submissions are requested by July 31, 2022, specifying the 340B ID, entity name and address, applicable NDC(s), purchase volume(s), purchase price(s) and time period(s). Upon validation of a refund submission, SpecGx will refund any overcharges.
- SpecGx is not seeking reimbursement or repayment where Covered Entities paid a lower price than the recalculated 340B ceiling prices for the Restatement Period and is not using any such amounts as offsets in determining the aggregate amount of any refund due.

Please direct any questions and/or requests for additional information to SpecGx at the following email address: 340BRefunds@mnk.com.

NDC	NDC Description
00406330801	HYDROMORPHONE ER 8MG TAB
00406331601	HYDROMORPHONE ER 16MG TAB
00406872510	METHADOSE® SF 10MG/ML OC
00406880601	CLOMIPRAMINE HCL 25MG
00406880701	CLOMIPRAMINE HCL 50MG
00406880801	CLOMIPRAMINE HCL 75MG
00406990603	ANAFRANIL 25MG CAP
00406990703	ANAFRANIL 50MG CAP
00406990803	ANAFRANIL 75MG CAP
00406991003	PAMELOR 10MG CAP
00406991103	PAMELOR 25MG CAP
00406991203	PAMELOR 50MG CAP
00406991303	PAMELOR 75MG CAP
00406991403	RESTORIL 22.5MG CAP
00406991501	RESTORIL 7.5MG CAP
00406991503	RESTORIL 7.5MG CAP
00406991601	RESTORIL 15MG CAP
00406991701	RESTORIL 30MG CAP
00406995903	TEMAZEPAM 22.5MG CAP
00406996001	TEMAZEPAM 7.5MG CAP
23635058110	ROXICODONE 15MG
23635058210	ROXICODONE 30MG