

**Eli Lilly and Company**  
**340B Limited Distribution Exception for Wholly Owned Contract Pharmacies**

Eli Lilly and Company (Lilly), at its sole discretion, will allow an eligible 340B covered entity(ies)<sup>1</sup> that has whole ownership (100%) of a pharmacy location that is registered as a contract pharmacy in the HRSA database to designate any or all of those wholly owned contract pharmacy locations as a “ship to” location that may, at Lilly’s sole discretion, obtain 340B priced product for Lilly’s covered outpatient drugs when purchased by the covered entity that wholly owns the pharmacy. Lilly retains the right to change this discretionary practice at any time.

**Name of covered entity(ies):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Covered entity(ies) must identify wholly owned contract pharmacies using the Excel template provided.

**Wholly Owned Contract Pharmacy Identification and Selection Declaration:**

By signing this document, the Covered Entity(ies) Representative is acknowledging that the list of covered entities and contract pharmacies identified separately have the same corporate ownership, and that the covered entity wholly owns each identified contract pharmacy and qualifies for the exception as described in this notice. Covered Entity Representative also confirms that the Covered Entity Representative is authorized to sign this document and agree to these terms on Covered Entity’s behalf. If there are any changes to the ownership structure of any of the identified contract pharmacies, the Covered Entity agrees to notify Lilly within one (1) business day.

**Effective Date:**

This form must be submitted to [340B@lilly.com](mailto:340B@lilly.com) at least five (5) business days prior to the Effective Date. Covered Entity acknowledges its obligation to comply with all applicable laws and regulation regarding the purchase of products under the 340B Program as well as this specific form, including but not limited to the requirements of 42 U.S.C. § 256b. Covered Entity is hereby informed that there may be an obligation to report discounts to the Department of Health and Human Services or applicable state agency. See 42 C.F.R. § 1001.952 (h)(1), (3).

Covered Entity hereby recognizes that should any discount be provided by Lilly to Covered Entity in error, Lilly is hereby authorized to invoice Covered Entity to collect any discount provided in error to Covered Entity. Covered Entity agrees to pay such invoice within thirty (30) days of receipt of an invoice. Covered Entity reserves the right to review all information used by Lilly in determining the discounts provided in error. Covered Entity acknowledges that Lilly is voluntarily providing 340B discounts to contract pharmacies that are wholly owned by the Covered Entity. By requesting and accepting this exception to Lilly’s limitation on contract pharmacy purchases, Covered Entity agrees that any 340B prices to wholly owned contract pharmacies are voluntary discounts not required under 42 U.S.C. 256b and therefore not subject to potential civil monetary penalties or repayment under 42 U.S.C. 256b, 42 C.F.R. Part 10, or otherwise. Covered Entity agrees to allow Lilly and/or its auditor to have access to any information in Covered Entity’s control that relates to Lilly products as necessary to audit 340B purchases consistent with Lilly’s audit rights under 42 U.S.C. 256b(a)(5)(C).

\_\_\_\_\_  
**Authorized Representative of  
Covered Entity (Signature)**

\_\_\_\_\_  
**Title of Authorized Representative**

\_\_\_\_\_  
**Authorized Representative of  
Covered Entity (Printed Name)**

\_\_\_\_\_  
**Date of Signature**

Please send completed form to Eli Lilly and Company at [340B@lilly.com](mailto:340B@lilly.com)

<sup>1</sup> The term “340B covered entity” is inclusive of the entity’s Parent and Child Sites as registered and listed in HRSA’s online 340B Covered Entity Database (<https://340bopais.hrsa.gov/coveredentitysearch>).