



Part B Drug Inflation Rebates

As of April 1, 2023, Humana members may pay less for some rebated drugs covered by Medicare Part B, based on a new and lower “coinsurance” amount (your share of the Rx cost after you meet your deductible). The list of the Part B rebatable drugs is updated every 3 months. The below list is for the eligible drugs as of January 1, 2024.

How to use this list:

We are providing a list of impacted Part B drugs as well as the adjusted coinsurance percentage. **The standard coinsurance for Part B drugs for Medicare members is 20%.** The coinsurance percentage shown in this list has been adjusted for inflation and will be applied to your share of the Rx cost after you meet your deductible. If you have questions about the lower cost or feel this has not been applied, please call the number on the back of your Humana ID card. Please note, these changes do not apply to Medicare Part D Prescription Drug Coverage.

HCPC	Drug Name	Adjusted Coinsurance Percentage
J0287	Abelcet	19.790%
J9042	Adcetris	19.172%
J8655	Akynzeo	18.035%
J7504	Atgam	15.373%
J0898	Argatroban (Auromedics)	7.418%
J3145	Aveed	19.266%
J0558	Bicillin C-R	16.010%

HCPC	Drug Name	Adjusted Coinsurance Percentage
J0561	Bicillin L-A	16.342%
J9039	Blincyto	19.633%
J9046	Bortezomib (Dr. Reddy's) ¹	9.293%
J9048	Bortezomib (Fresenius Kabi)	9.293%
J0703	Cefepime (B. Braun) ²	8.381%
J0701	Cefepime (Baxter)	7.832%
J2850	Chirhostim	19.477%
J0584	Crysvita	19.448%
J0850	Cytogam	19.659%
J7503	Envarsus XR	19.812%
J1456	Fosaprepitant (Teva)	17.596%
J1645	Fragmin	11.594%
J9394	Fulvestrant (Fresenius Kabi)	12.170%
J1460	Gamastan (1 cc) ³	19.987%
J1560	Gamastan (over 10 cc)	19.987%
J9196	Gemcitabine (Accord)	10.588%
J1670	Hypertet	19.547%
J9325	Imlygic	19.837%
90376	Imogam Rabies-HT	15.060%
Q2042	Kymriah	19.455%
J2820	Leukine	19.509%
J1950	Lupron Depot-Ped	19.532%
J2184	Meropenem (B. Braun)	9.059%
J2265	Minocin	18.973%
J9266	Oncaspar	19.531%
J9177	Padcev	19.392%
J1640	Panhematin	19.715%
J9314	Pemetrexed (Teva)	13.739%
J0897	Prolia	19.453%
J9318	Romidepsin (non-lyophilized)	19.658%
J2502	Signifor LAR	18.272%
C9482	Sotalol (Altathera)	19.843%
J2860	Sylvant	19.132%
J9262	Synribo	19.536%

¹ The drugs in HCPCS codes J9046 and J9048 (Bortezomib) are not therapeutically equivalent.

² The drugs in HCPCS codes J0701 and J0703 (Cefepime) are not therapeutically equivalent.

³ Gamastan (J1460 and J1560) is the same drug in two HCPCS codes.

HCPC	Drug Name	Adjusted Coinsurance Percentage
J7197	Thrombate III	18.100%
J3250	Tigan	19.888%
J2186	Vabomere	19.713%
J3372	Vancomycin (Xellia)	9.021%
90396	Varizig	19.998%
J9303	Vectibix	19.948%
J0775	Xiaflex	19.187%
J0291	Zemdri	19.775%