



# Part B Drug Inflation Rebates

From time to time, Annual Sales Price (ASP) public files need to be corrected or updated, generally referred to as a restatement, based on feedback received after the files are published. If CMS receives feedback that necessitates updates to this list of drugs with adjusted coinsurance amounts, CMS will update the list. The [January 1 – March 31, 2026] files may be subject to updates either before the start of the quarter or after in the event updated data becomes available. For more information on the adjusted co-insurance percentages, you may refer to the Quarterly Updates to Part B Coinsurance Adjustment section [here](#).

## 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 CarePlus ID card. Please note, these changes do not apply to Medicare Part D Prescription Drug Coverage.

This list is in alphabetical order and searchable. Click CTRL+F to type in your drug name to search.

Healthcare Common Procedure Coding System (HCPCS)	Drug Name	Adjusted Coinsurance Percentage
Q2055	Abecma	18.85%
J9042	Adcetris	17.41%
J9354	Ado-trastuzumab emtansine	19.99%
J0841	ANAVIP Solution Reconstituted	6.35%
J7504	Atgam	10.99%
J3145	Aveed	18.71%
J0597	Berinert	18.72%

Healthcare Common Procedure Coding System (HCPCS)	Drug Name	Adjusted Coinsurance Percentage
J0558	Bicillin C-R	15.23%
J0561	Bicillin L-A	11.74%
J9039	Blincyto	18.45%
Q2054	Breyanzi	18.31%
J1741	Caldor	19.33%
J0638	Canakinumab	19.30%
Q2056	Carvykti	18.29%
J1954	Cipla	16.26%
J1833	Cresemba	19.90%
J0584	Crysvita	18.30%
J9072	CYCLOPHOSPHAMIDE Solution	9.04%
J1162	Digifab	19.73%
J9063	ELAHERE Solution	19.97%
J1302	ENJAYMO Solution	19.97%
J7503	Envarsus XR	19.37%
J3111	Evenity	18.98%
J9358	Fam-trastuzumab deruxtecan-nxki	19.17%
J1456	Fosaprepitant	12.83%
J1645	Fragmin	14.30%
J9307	Folotyn	19.51%
J1458	Galsulfase injection	19.78%
J9196	Gemcitabine (Accord)	18.56%
J1559	Hizentra	19.08%
J1575	Hyqvia	19.99%
J9325	Imlygic	18.88%
J9032	Injection, belinostat, 10 mg	19.64%

Healthcare Common Procedure Coding System (HCPCS)	Drug Name	Adjusted Coinsurance Percentage
J2186	Injection, meropenem and vaborbactam	19.80%
J3316	Injection, triptorelin	19.97%
J9227	Isatuximab-irfc injection	19.84%
J9207	Ixemptra	19.78%
J7213	Ixinity	18.68%
J7208	Jivi	19.51%
J2425	Kepivance	16.14%
J9274	KIMMTRAK Solution	20.00%
J2507	Krystexxa	19.01%
Q2042	Kymriah	18.55%
J9047	Kyprolis	17.98%
J0217	Lamzedo	19.26%
J2820	Leukine	19.81%
J1950	Lupron Depot-Ped	18.31%
J9353	Margenza	19.66%
J2184	Meropenem (B. Braun)	10.07%
J2265	Minocin	18.52%
J0283	Nexterone (Baxter)	12.19%
J9268	Nipent	19.19%
J2802	Nplate	18.40%
J0121	Nuzyra	19.63%
J9301	obinutuzumab	19.49%
J2351	OCREVUS ZUNOVO Solution	19.66%
J7601	OHTUVAYRE Suspension	19.96%
J2267	OmvoH	17.36%
J9266	Oncaspar	18.72%

Healthcare Common Procedure Coding System (HCPCS)	Drug Name	Adjusted Coinsurance Percentage
J9177	Padcev	19.55%
J1640	Panhematin	18.50%
J1576	Panzyga	19.15%
J9297	Pemetrexed (Sandoz)	18.41%
J9314	Pemetrexed (Teva)	18.90%
J9306	Pertuzumab injection	19.64%
J7521	PROGRAF Packet	9.75%
J0897	Prolia	17.59%
J1304	Qalsody	19.92%
J0248	Remdesivir	18.36%
J0349	Rezzayo	19.66%
J9061	Rybrevant	18.79%
J9021	Rylaze	19.35%
J0870	Rytelo	19.54%
J2502	Signifor Lar	15.09%
J3090	Sivextro	19.92%
C9482	Sotalol (Altathera)	17.31%
J1747	Spevigo	19.86%
J2860	Sylvant	17.85%
J9269	Tagraxofusp-erzs	19.65%
J3055	Talvey	18.98%
Q2053	Tecartus	19.95%
J9024	TECENTRIQ HYBREZA Solution	19.69%
J9380	Tecvayli	19.32%
J9273	Tivdak	18.58%
J3101	Tnkase	17.81%

Healthcare Common Procedure Coding System (HCPCS)	Drug Name	Adjusted Coinsurance Percentage
J3300	Triamcinolone acetonide	3.92%
J9303	Vectibix	18.29%
J1322	Vimizim	19.81%
J2315	Vivitrol	20.00%
J3032	Vyepti	18.80%
J9153	Vyxeos	19.23%
J0122	Xerava	19.46%
J0775	Xiaflex	17.74%
Q2041	Yescarta	18.35%
J0695	Zerbaxa	18.32%
J9202	Zoladex	16.89%

# Notice of Availability - Auxiliary Aids and Services Notice

English: Free language, auxiliary aid, and alternate format services are available. Call **1-800-794-5907 (TTY: 711)**.

العربية [Arabic]: تتوفر خدمات اللغة والمساعدة الإضافية والتنسيق البديل مجانًا. اتصل على الرقم **1-800-794-5907 (الهاتف النصي: 711)**.

Հայերեն [Armenian]: Հասանելի են անվճար լեզվական, աջակցման և այլընտրանքային ձևաչափի ծառայություններ: Չանգահարե՛ք՝ **1-800-794-5907 (TTY: 711)**:

বাংলা Bengali: বিনামূল্যে ভাষা, আনুষঙ্গিক সহায়তা, এবং বিকল্প বিন্যাসে পরিষেবা উপলব্ধ। ফোন করুন **1-800-794-5907 (TTY: 711)** নম্বরে।

简体中文 Simplified Chinese: 我们可提供免费的语言、辅助设备以及其他格式版本服务。请致电 **1-800-794-5907 (听障专线: 711)**。

繁體中文 Traditional Chinese: 我們可提供免費的語言、輔助設備以及其他格式版本服務。請致電 **1-800-794-5907 (聽障專線: 711)**。

Kreyòl Ayisyen Haitian Creole: Lang gratis, èd oksilyè, ak lòt fòm sèvis disponib. Rele **1-800-794-5907 (TTY: 711)**.

Hrvatski Croatian: Dostupni su besplatni jezik, dodatna pomoć i usluge alternativnog formata. Nazovite **1-800-794-5907 (TTY: 711)**.

فارسی [Farsi]: خدمات زبان رایگان، کمک های اضافی و فرمت های جایگزین در دسترس است. با **1-800-794-5907 (TTY: 711)** تماس بگیرید.

Français French: Des services gratuits linguistiques, d'aide auxiliaire et de mise au format sont disponibles. Appeler le **1-800-794-5907 (TTY: 711)**.

Deutsch German: Es stehen kostenlose unterstützende Hilfs- und Sprachdienste sowie alternative Dokumentformate zur Verfügung. Telefon: **1-800-794-5907 (TTY: 711)**.

Ελληνικά Greek: Διατίθενται δωρεάν γλωσσικές υπηρεσίες, βοηθήματα και υπηρεσίες σε εναλλακτικές προσβάσιμες μορφές. Καλέστε στο **1-800-794-5907 (TTY: 711)**.

ગુજરાતી Gujarati: નિ:શુલ્ક ભાષા, સહાયક સહાય અને વૈકલ્પિક ફોર્મેટ સેવાઓ ઉપલબ્ધ છે. **1-800-794-5907 (TTY: 711)** પર ફોન કરો.

עברית Hebrew: שירותים אלה זמינים בחינם: שירותי תרגום, אביזרי עזר וטקסטים בפורמטים חלופיים. נא התקשר למספר **1-800-794-5907 (TTY: 711)**.

Hmoob Hmong: Muaj kev pab txhais lus, pab kom hnov suab, thiab lwm tus qauv pab cuam. Hu **1-800-794-5907 (TTY: 711)**.

This notice is available at **CarePlusHealthPlans.com/MLI**.

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Italiano Italian: Sono disponibili servizi gratuiti di supporto linguistico, assistenza ausiliaria e formati alternativi. Chiama il numero **1-800-794-5907 (TTY: 711)**.

日本語 Japanese: 言語支援サービス、補助支援サービス、代替形式サービスを無料でご利用いただけます。**1-800-794-5907 (TTY: 711)** までお電話ください。

ភាសាខ្មែរ Khmer: សេវាកម្មផ្នែកភាសា ជំនួយ និង សេវាកម្មជំនួយផ្សេងៗដល់សមាជិកបាន។  
ទូរសព្ទទៅលេខ **1-800-794-5907 (TTY: 711)**។

한국어 Korean: 무료 언어, 보조 지원 및 대체 형식 서비스를 이용하실 수 있습니다.  
**1-800-794-5907 (TTY: 711)**번으로 문의하십시오.

Diné Navajo: Saad t'áá jiik'eh, t'áadoole'é binahji' bee adahodoonílgíí diné bich'í' anídahazt'í'í, dóó łahgo át'éego bee hada'dilyaaígíí bee bika'aanída'awo'í dahóló. Kohji' hodíilnih **1-800-794-5907 (TTY: 711)**.

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ਪੰਜਾਬੀ Punjabi: ਮੁਫਤ ਭਾਸ਼ਾ, ਸਹਾਇਕ ਸਹਾਇਤਾ, ਅਤੇ ਵਿਕਲਪਿਕ ਫਾਰਮੈਟ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ।  
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Русский Russian: Предоставляются бесплатные услуги языковой поддержки, вспомогательные средства и материалы в альтернативных форматах. Звоните по номеру **1-800-794-5907 (TTY: 711)**.

Español Spanish: Los servicios gratuitos de asistencia lingüística, ayuda auxiliar y servicios en otro formato están disponibles. Llame al **1-800-794-5907 (TTY: 711)**.

Tagalog Tagalog: Magagamit ang mga librang serbisyong pangwika, serbisyo o device na pantulong, at kapalit na format. Tumawag sa **1-800-794-5907 (TTY: 711)**.

தமிழ் Tamil: இலவச மொழி, துணை உதவி மற்றும் மாற்று வடிவ சேவைகள் உள்ளன.  
**1-800-794-5907 (TTY: 711)** ஐ அழைக்கவும்.

తెలుగు Telugu: ఉచిత భాష, సహాయక మద్దతు, మరియు ప్రత్యామ్నాయ ఫార్మాట్ సేవలు అందుబాటులో గలవు. **1-800-794-5907 (TTY: 711)** కి కాల్ చేయండి.

اردو Urdu: مفت زبان، معاون امداد، اور متبادل فارمیٹ کی خدمات دستیاب ہیں۔ کال **(TTY: 711) 1-800-794-5907**

Tiếng Việt Vietnamese: Có sẵn các dịch vụ miễn phí về ngôn ngữ, hỗ trợ bổ sung và định dạng thay thế. Hãy gọi **1-800-794-5907 (TTY: 711)**.