

Selected specialty pharmacies

INREBIC® (fedratinib) is available through the list of contracted specialty pharmacies listed below or through authorized distributors for in-office dispensing by community physicians, hospitals, institutions, Veterans Affairs, and the Department of Defense (*see next page*).

SPECIALTY PHARMACY NETWORK

Accredo

Phone: 1-877-732-3431 • Fax: 1-888-302-1028 • <https://www.accredo.com>

AllianceRx Walgreens Prime

Phone: 1-888-347-3416 • Fax: 1-877-231-8302 • <https://www.alliancerxwp.com>

Amber Pharmacy

Phone: 1-888-370-1724 • Fax: 1-877-645-7514 • <https://www.amberpharmacy.com>

Avella Specialty Pharmacy

Phone: 1-877-546-5779 • Fax: 1-877-546-5780 • <https://www.avella.com>

Biologics

Phone: 1-800-850-4306 • Fax: 1-800-823-4506 • <http://www.biologicsinc.com>

CVS Specialty Pharmacy

Phone: 1-866-388-7656 • Fax: 1-855-296-0210 • <https://www.cvsspecialty.com/wps/portal/specialty>

Diplomat

Phone: 1-877-977-9118 • Fax: 1-800-550-6272
<https://www.diplomatpharmacy.com/how-to-prescribe#oncology>

Humana

Phone: 1-800-486-2668 • Fax: 1-877-405-7940 • <https://www.humanapharmacy.com/specialty>

Onco360

Phone: 1-877-662-6633 • Fax: 1-877-662-6355 • <https://www.onco360.com>

Optum Specialty Pharmacy

Phone: 1-855-427-4682 • Fax: 1-877-342-4596 • <https://www.briovarx.com>

US Bioservices

Phone: 1-877-757-0667 • Fax: 1-888-899-0067 • <https://www.usbioservices.com>

Specialty Pharmacy Services

Upon processing the patient's prescription, the specialty pharmacy will provide an INREBIC® Starter Kit to your patient with the first fill and educational information through a counseling call.

Please see full [Prescribing Information](#), including **Boxed WARNING**.



Authorized distributors

The following distributors are authorized to sell INREBIC® (fedratinib) and are able to service qualified accounts.

AUTHORIZED DISTRIBUTOR NETWORK

Community Oncology Practices

Cardinal Specialty Distribution Customers
Phone: 1-877-453-3972

McKesson Specialty Health
Phone: 1-800-482-6700 • Fax: 1-800-289-9285

Oncology Supply
Phone: 1-800-633-7555 • Fax: 1-800-248-8205

Institutions/Hospitals

AmerisourceBergen
Phone: 1-844-222-2273 • Fax: 1-888-292-9774

ASD Healthcare
Phone: 1-800-746-6273 • Fax: 1-800-547-9413

Cardinal Full Line Wholesale Customers
Phone: 1-800-926-3161

Cardinal Specialty Distribution Customers
Phone: 1-866-677-4844

McKesson Pharma
Phone: 1-855-625-6285 • Fax: 1-800-599-9893

Puerto Rico Hospitals and Oncology Clinics

Cardinal Puerto Rico (Borschow)
Phone: 1-787-625-4200
cuserv@cardinalhealth.com • Online ordering: <https://orderexpress.cardinalhealth.com>

Cesar Castillo Inc.
Phone: 1-787-641-5242 (Hospitals) • 1-787-641-5082 (Specialty Pharmacy) • Fax: 1-787-999-1614
Online ordering: <https://www.facilfarmaciacci.com>

Please see full [Prescribing Information](#), including **Boxed WARNING**.



Product information

HOW SUPPLIED

INREBIC® (fedratinib) 100 mg capsules
are supplied in bottles of 120 count each

STORAGE

Store below 86°F (30°C)

National Drug Codes

10-Digit NDC	11-Digit NDC ^a	Dosage Strength	Description
59572-720-12	59572-0720-12	100 mg/capsule	Bottle of 120 reddish brown, opaque size 0 capsules, printed with “FEDR 100 mg” in white ink

^aThe red zero converts the 10-digit NDC to the 11-digit NDC. Some payers may require each NDC to be listed on the claim. Payer requirements regarding the use of NDCs may vary. Electronic data exchange generally requires use of the 11-digit NDC.

Please see full [Prescribing Information](#), including
Boxed WARNING.





CELGENE PATIENT SUPPORT®

Celgene Patient Support® provides

- A single Specialist assigned to help patients in your geographic area
- Assistance with understanding patient insurance coverage for INREBIC® (fedratinib)
- Information about financial assistance for INREBIC®

Financial assistance

Depending on a patient's insurance situation, there are programs and organizations that may help pay for INREBIC®.

Celgene Commercial Co-pay Program

For eligible patients with commercial or private insurance (including healthcare exchanges)*

- Provides assistance to help patients meet co-pay/co-insurance costs
- Reduces co-pay responsibility to \$25 for INREBIC® (subject to annual benefit limit)

Eligibility criteria for patients include*

- Commercial or private insurance that does not cover the full cost of INREBIC®
- Residence in the United States or a US territory
- Patients with government healthcare insurance (for example, Medicare, Medicaid, Medigap, Tricare) are not eligible

Celgene Patient Assistance Program (PAP)

For qualified patients who are uninsured or underinsured, INREBIC® may be available at no cost†

Independent third-party organizations

For patients who are unable to afford their medication (including patients with Medicare, Medicaid, or other government-sponsored insurance), independent third-party organizations may be able to help‡

*Other eligibility requirements and restrictions apply. Please see full Terms and Conditions on the Celgene Patient Support® website.

†Patients must meet specified financial and insurance eligibility requirements to qualify for assistance. Please see full Eligibility Requirements on the Celgene Patient Support® website.

‡Financial and medical eligibility requirements vary by organization.

Please see full [Prescribing Information](#), including Boxed WARNING.



A single source for access support

Insurance-related assistance*

Our Specialists are available to assist with each of the following steps in the insurance approval process for INREBIC® (fedratinib):

**Benefits
investigation**

**Prior authorization
assistance†**

**Appeals
assistance†**

There are 3 simple ways to enroll in Celgene Patient Support®



Enroll online at
www.celgenepatientsupport.com



Call us at 1-800-931-8691
Monday – Friday, 8 AM - 8 PM ET
(translation services available)



E-mail or fax a completed enrollment form to
patientsupport@celgene.com or fax 1-800-822-2496

*Celgene cannot provide insurance advice or make insurance decisions.

†Celgene provides a facilitation service and will not provide any medical input into a prior authorization or an appeal.

Please see full [Prescribing Information](#), including **Boxed WARNING**.



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INREBIC®
(fedratinib) capsules
100mg