

2024 panzyga® Copay Enrollment Form

Please print and fax completed form to: 1-800-554-6744

If you have any questions please call the Octapharma Support Center toll free at 1-800-554-4440 | Monday to Friday 8:30 AM to 5 PM ET

PATIENT INFORMATION:

Full Name \_\_\_\_\_  
Last First M.I.  
Address \_\_\_\_\_ Apartment/Unit # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

PATIENT INSURANCE INFORMATION:

Name of Insurance \_\_\_\_\_ Name of Insured \_\_\_\_\_  
Insurance Phone ( ) \_\_\_\_\_ Member ID # \_\_\_\_\_ Group # \_\_\_\_\_ Plan ID # \_\_\_\_\_

COORDINATION OF CARE:

Patient Site of Care: Hospital Outpatient Infusion center Physician office Home  
Other (specify): \_\_\_\_\_  
Name of Facility or Specialty Pharmacy \_\_\_\_\_  
Contact Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

PANZYGA® PRESCRIBER INFORMATION:

Physician Name (print) \_\_\_\_\_  
Last First  
Address \_\_\_\_\_ Unit # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Email \_\_\_\_\_

PHYSICIAN SIGNATURE:

Signature \_\_\_\_\_ Date \_\_\_\_\_

By signing this form, I verify that the patient and prescriber information is complete and accurate to the best of my knowledge and that I have prescribed panzyga® based on my professional judgment and medical necessity. I attest that I have obtained the patient's affirmative authorization to release the above information as may be necessary to Octapharma.

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**TO BE ELIGIBLE:**

- The patient must be receiving treatment with panzyga®, or have a prescription to begin treatment
  - The patient must have commercial insurance
  - Those with Medicare, Medicaid, Medigap, VA, DOD, Tricare or other federal or state government health insurance are not eligible
- Copay assistance may only be applied to co-payments, deductibles and co-insurance that may be associated with the cost of panzyga® up to a maximum amount of \$12,500 in copay assistance in a calendar year
  - The Copay Assistance Program does not cover costs associated with administration of therapy, such as office visits, infusion costs, or other professional services
- The patient must receive treatment with an Octapharma panzyga® National Drug Code (NDC)

**INDICATIONS AND USAGE**

Panzyga® (Immune Globulin Intravenous [Human] - ifas) is indicated for the treatment of primary humoral immunodeficiency (PI) in patients 2 years of age and older; this includes, but is not limited to, congenital agammaglobulinemia, common variable immunodeficiency, X-linked agammaglobulinemia, Wiskott-Aldrich syndrome, and severe combined immunodeficiencies; chronic immune thrombocytopenia (cITP) in adults to raise platelet counts to control or prevent bleeding; and chronic inflammatory demyelinating polyneuropathy (CIDP) in adults to improve neuromuscular disability and impairment.

**IMPORTANT SAFETY INFORMATION****WARNING: THROMBOSIS, RENAL DYSFUNCTION, AND ACUTE RENAL FAILURE**

*Please see Full Prescribing Information for more information.*

- Thrombosis may occur with immune globulin intravenous (IGIV) products, including panzyga®. Risk factors may include: advanced age, prolonged immobilization, hypercoagulable conditions, history of venous or arterial thrombosis, use of estrogens, indwelling central vascular catheters, hyperviscosity, and cardiovascular risk factors. Thrombosis may occur in the absence of known risk factors
- Renal dysfunction, acute renal failure, osmotic nephrosis, and death may occur in predisposed patients who receive IGIV products, including panzyga®. Patients predisposed to renal dysfunction include those with a degree of pre-existing renal insufficiency, diabetes mellitus, age greater than 65, volume depletion, sepsis, paraproteinemia, or patients receiving known nephrotoxic drugs. Renal dysfunction and acute renal failure occur more commonly in patients receiving IGIV products containing sucrose. Panzyga® does not contain sucrose.
- For patients at risk of thrombosis, renal dysfunction, or acute renal failure, administer panzyga® at the minimum dose and infusion rate practicable. Ensure adequate hydration in patients before administration. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk for hyperviscosity. [see Full Prescribing Information, Warnings and Precautions (5.2, 5.4)]

The risk information provided here is not comprehensive; see full Prescribing Information and Boxed Warning for panzyga®.

**IMPORTANT SAFETY INFORMATION—continued****Contraindications**

Panzyga<sup>®</sup> is contraindicated in patients who have a history of severe systemic hypersensitivity reactions, such as anaphylaxis, to human immunoglobulin and in IgA-deficient patients with antibodies against IgA and history of hypersensitivity.

**Warnings and Precautions**

Monitor renal function, including blood urea nitrogen and serum creatinine, and urine output in patients at risk of developing acute renal failure.

Hyperproteinemia, increased serum osmolarity, and hyponatremia may occur in patients receiving panzyga<sup>®</sup>. Aseptic meningitis syndrome may occur in patients receiving panzyga<sup>®</sup>, especially with high doses or rapid infusion.

Hemolysis that is either intravascular or due to enhanced red blood cell sequestration can develop subsequent to panzyga<sup>®</sup> treatments. Risk factors for hemolysis include high doses and non-O-blood group. Closely monitor patients for hemolysis and hemolytic anemia.

Monitor patients for pulmonary adverse reactions (transfusion-related acute lung injury [TRALI]).

Monitor blood pressure prior to, during, and following panzyga<sup>®</sup> infusion.

Carefully consider the relative risks and benefits before prescribing the high dose regimen (for cITP) in patients at increased risk of volume overload.

Panzyga<sup>®</sup> is made from human plasma and may contain infectious agents, e.g. viruses and theoretically, the Creutzfeldt-Jakob disease agent.

**Adverse Reactions**

PI—The most common adverse reactions ( $\geq 5\%$  study subjects) were headache, nausea, fever, fatigue, and abdominal pain.

cITP in adults—The most common adverse reactions ( $\geq 5\%$  study subjects) were headache, fever, nausea, vomiting, dizziness, and anemia.

CIDP in adults—The most common adverse reactions reported in greater than 5% of subjects were: headache, fever, dermatitis, and blood pressure increase.

The risk information provided here is not comprehensive; see full Prescribing Information and Boxed Warning for panzyga<sup>®</sup>.