

PHYSICIAN-ADMINISTERED MEDICINES

# TIP SHEET

*A guide for patients applying for enrollment in the Amgen Safety Net Foundation*

**Aranesp**® (darbepoetin alfa)  
**EPOGEN**® (Epoetin alfa) for dialysis use only  
**EVENTITY**™ (romosozumab-aqqg)  
**Kyprolis**® (carfilzomib)  
**Neulasta**® (pegfilgrastim)  
**NEUPOGEN**® (Filgrastim)  
**Nplate**® (romiplostim)  
**Parsabiv**™ (etelcalcetide)  
**Prolia**® (denosumab) injection  
**Vectibix**® (panitumumab) injection  
**XGEVA**® (denosumab)

**Amgen Safety Net Foundation (ASNF) is a nonprofit patient assistance program that helps qualifying patients access Amgen medicines at no cost.**

## Are you eligible?

Apply for support if you meet the following requirements:

- ✓ You have lived in the United States, American Samoa, Guam, Puerto Rico, or the U.S. Virgin Islands for six months or longer.
- ✓ You have a household income at or below:
  - \$62,450 ..... for a household of 1 person
  - \$84,550 ..... for a household of 2 people
  - \$106,650 ..... for a household of 3 people
  - \$128,750 ..... for a household of 4 people

*More than 4 in your household? Add \$22,100 for each extra person*
- ✓ You are uninsured or your insurance plan excludes the Amgen medicine.

## How to apply

To obtain the patient application for physician-administered medicines:

- Download the application online at [amgensafetynetfoundation.com](http://amgensafetynetfoundation.com); or
- Have the application mailed to you by calling us at **1-888-762-6436**

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**Questions?** Request assistance from your physician or call us at 1-888-762-6436 to speak to one of our Patient Assistance Counselors, Monday through Friday, 9am to 8pm EST.

## How to apply *continued from previous side*

Once you have the application, following these important steps:

- STEP 1** Fill out and sign the **PATIENT APPLICATION** (pages 1-3). All fields need to be filled in for your application to be processed. Applications not completed in full will result in significant delays.
- STEP 2** Have your physician fill out the **PRESCRIBING PHYSICIAN & FACILITY INFORMATION** (page 4).
- STEP 3** Have your physician fax the completed application to: **1-866-549-7239**.

### Notification of Decision

Once your completed application and any requested supporting documents have been received and processed, you and your physician will be notified when a decision has been made. Missing information or an incomplete application will delay an enrollment decision.

### Enrollment Duration

Eligible patients are enrolled for a period up to 12 months. To re-enroll in Amgen Safety Net Foundation, you must submit a new application using the most current ASNF application found at [amgensafetynetfoundation.com](http://amgensafetynetfoundation.com).

### Medicine Delivery

Physicians administer Amgen medicine from their existing commercial stock to enrolled patients and then order replacement for this medicine from ASNF. Your physician must complete and submit the **REPLACEMENT REQUEST** after medicine has been administered to you. Once the request has been processed your physician will receive replacement medication on their scheduled ship day.

Amgen Safety Net Foundation does not charge patients a fee for its assistance. ASNF is not affiliated with third parties who charge a fee for assistance with enrollment or medication refills. If you are being charged a monthly fee for support from ASNF, the organization billing you is not ASNF and you are being charged for support that ASNF can provide to you directly at no cost.