



Welcome to myAgios™ Patient Support Services

A program that helps with access
and financial assistance



Network of
specialty pharmacies
and distributors



Financial
assistance



Enrolling in
myAgios™ Patient
Support Services

Please see accompanying [full Prescribing Information](#), including Boxed WARNING, and Medication Guide for additional Important Safety Information.

Specialty distributors and network specialty pharmacies

To get patients started with TIBSOVO® (ivosidenib), write your prescription using the **myAgios Enrollment Form** or use your preferred method of prescribing. Please complete required fields depending on the services needed and fax to either myAgios™ Patient Support Services at **1-844-409-1143** or to one of our network specialty pharmacies (do not fax the form to both myAgios and a network specialty pharmacy).

Your office- or hospital-based pharmacy can order TIBSOVO directly from one of our specialty distributors:

AmerisourceBergen/Oncology Supply

Phone: 1-800-633-7555
Fax: 1-800-248-8205
Email: custserv@oncologysupply.com

ASD Healthcare Customer Service

Phone: 1-800-746-6273
Fax: 1-800-547-9413
Email: asd.customerservice@asdhealthcare.com

McKesson Specialty Health

Phone: 1-800-482-6700
Online: mscs.mckesson.com

McKesson Plasma and Biologics

Phone: 1-877-625-2566
Online: mckesson.com/contact-us/form/contact-plasma-and-biologics-distribution

Cardinal Health (US)

Acute (Hospital)
Phone: 1-855-855-0708
Email: gmb-spd-csorderentry@cardinalhealth.com
Online: cardinalhealth.com/en/about-us/contact-us

Physician Office (Oncology)

Phone: 1-877-453-3972
Email: spdoncologyteam@cardinalhealth.com

Cardinal Health (Puerto Rico)

Phone: 1-787-625-4100
Fax: 1-787-625-4397
Email: infopr@cardinalhealth.com

The following network specialty pharmacies are available to fill prescriptions for TIBSOVO:

Biologics

Phone: 1-800-850-4306
Fax: 1-800-823-4506

Diplomat

Phone: 1-877-977-9118
Fax: 1-800-550-6272




The specialty pharmacy ships the prescription directly to your patient's home or their preferred location.

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Financial assistance to help patients pay for TIBSOVO® (ivosidenib)

myAgios™ Patient Support Services can connect your patients to financial assistance and coverage support programs to help with access to TIBSOVO®

Program name	Insurance type	Description	How to get started
 Commercial \$25 Co-Pay Program	Commercial or private	<p>This program lowers costs for eligible patients to no more than \$25 per prescription if their co-pay exceeds that amount, with a maximum benefit of \$25,000 per calendar year.</p> <p>There are no income restrictions. Patients participating in government healthcare insurance are not eligible.</p>	Apply on behalf of patients at myAgios-copay.com .
 Independent foundations	Government and commercial	<p>Independent third-party foundations may be able to provide assistance to eligible patients.*</p>	Network specialty pharmacies or myAgios™ Patient Support Services can provide a referral to one of these foundations.
 Patient Assistance Program (PAP)	Uninsured/underinsured (may apply to patients with commercial or government insurance)	<p>Offers free prescriptions to eligible uninsured and underinsured patients.</p>	Apply on behalf of patients by completing the appropriate sections of the myAgios Enrollment Form and faxing to myAgios (1-844-409-1143).

Please see myAgios.com for full Terms and Conditions for each program.



*Eligibility is determined by the individual foundation. Agios is not affiliated with these organizations.

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Support for patients who experience coverage delays or interruptions

Programs that can assist patients awaiting insurance coverage:

Program name	Insurance type	Description	How to apply
 QuickStart	Commercial and government	Free 14-day prescription (allowing for 3 refills, for a total of 56 days) available to eligible new patients experiencing coverage delays of 5 or more days after submission of a completed prior authorization.	Apply on behalf of patients by completing the appropriate sections of the myAgios Enrollment Form and faxing to myAgios™ Patient Support Services (1-844-409-1143).
 Coverage Interruption	Commercial or private	Free 30-day prescription (allowing for 2 refills, for a total of 90 days) for eligible patients experiencing an interruption in coverage. Patients participating in government healthcare insurance are not eligible.	<i>Note:</i> If sending the myAgios Enrollment Form to a network specialty pharmacy, the specialty pharmacy will coordinate with myAgios.

Please see myAgios.com for full Terms and Conditions for each program.

QuickStart and Coverage Interruption prescriptions will be reviewed and filled by myAgios.

If you have questions, please visit **myAgios.com** or call **1-844-409-1141**
Monday through Friday, 8 AM to 6 PM ET

Please see accompanying **full Prescribing Information**, including **Boxed WARNING**, and **Medication Guide** for additional Important Safety Information.



Enroll patients in myAgios™ Patient Support Services

Fill out the **myAgios Enrollment Form** to connect your TIBSOVO® (ivosidenib) patients to a variety of services. Please complete required fields to select the services your patient may need. Once completed, fax the form to either myAgios™ Patient Support Services at **1-844-409-1143** or to one of our network specialty pharmacies, depending on your needs. Please note that the form should not be sent to both myAgios and a network specialty pharmacy.

Visit myAgios.com to get started with enrollment, download the myAgios Enrollment Form, and to access other resources

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