

INTRODUCING

A NEW WAY FOR YOUR CELLCEPT PATIENTS TO SAVE ON THEIR PRESCRIPTIONS

The CellCept Coupon Program for your patients

Eligible patients can now save up to \$100 toward every prescription and refill through December 31, 2009.

- Patients currently enrolled in CellCept *for Living* will automatically receive a Coupon Card that offers them up to \$100 toward out-of-pocket expenses on every CellCept prescription and refill
- Patients who have not yet joined CellCept *for Living* can obtain a Coupon Card from their transplant center or by calling 1-877-509-CCFL (2235). For more information, they can visit www.cellceptforliving.com.



While the Coupon Card is available to your patients whether or not they are enrolled in CellCept *for Living*, we hope they will take advantage of all the benefits this free program can offer them. They may enroll by filling out the form in the Coupon Card brochure or by visiting www.cellceptforliving.com.

Ask your Roche Transplant Sales Specialist or call 1-877-509-CCFL (2235) to receive Coupon Cards for your patients.

This program is paid for by Roche. Offer good through 12/31/09. Offer valid for patients who have been prescribed CellCept for a kidney, heart or liver transplant. Void where prohibited by law, taxed or restricted. Not valid if reproduced. The offer is not valid for prescriptions covered under Medicaid, Medicare, TRICARE or any other federal or state healthcare program. Offer good in the United States and Puerto Rico; offer not valid for residents of Massachusetts. We reserve the right to cancel or change this offer at any time without notice. Roche respects your right to have personal and medical information kept confidential. Roche, and companies working with Roche, will not seek personally identifiable information from any pharmacy with respect to this program, unless the individual redeems this coupon. Limit 1 card per patient.

Thank you for the trust you put in CellCept.



DISPENSE
AS WRITTEN

Please see full Prescribing Information with Medication Guide at www.rochesusa.com/products/cellcept/pi.pdf



CellCept[®]
(mycophenolate mofetil)

TRUST WHAT YOU KNOW.

INTRODUCING

A NEW SUPPORT RESOURCE FOR CELLCEPT PATIENTS

CellCept Reimbursement Support Services

This new, easy-to-use service can help you and your patients obtain answers to questions about their prescription drug coverage. Your patients' coverage for CellCept may be affected by the availability of generic mycophenolate mofetil as of May 3, 2009.

Helping patients get answers

Patients can call CellCept Reimbursement Support Services toll-free at **1-888-754-7651**.

Our reimbursement experts will review patients' benefit information to determine

- Their specific co-payment for CellCept
- Prior authorization guidance
- Eligibility for a CellCept Coupon Card

CellCept Reimbursement Support Services are available Monday through Friday, 9:00 AM to 7:00 PM Eastern Time. Patients will need to have their personal insurance information, Medicare, Medicaid and commercial insurance cards on hand when they call. Reimbursement experts will contact patients by telephone within 2 business days with the results of their individual benefit investigation. Ask your Roche Transplant Sales Specialist for copies of the announcement flyer to distribute to your patients.

Helping you help your patients

If you would like to contact CellCept Reimbursement Support Services on behalf of a patient, the following forms need to be completed and **faxed to 1-800-306-5557**:

- Benefit Investigation Form (signed by the prescriber)
- Prior Authorization Form (signed by the patient)

Copies of these forms are available from your Roche Transplant Sales Specialist or by visiting www.cellceptreimbursement.com.

While every effort is made to provide helpful information, Roche makes no representations about the eligibility or guarantee of coverage or reimbursement for any particular claim. Roche cannot guarantee success in obtaining third-party insurance reimbursement. Third-party coverage and payment for medical products and services is complex and affected by numerous factors. It is always a provider's responsibility to determine and submit the appropriate codes, charges and modifiers for services that are rendered. Providers should contact third-party payors for specific information on their coding, coverage and payment policies. All coding and claims used by a provider in seeking reimbursement must be accurate, complete and adequately documented in the applicable patient record. All services must be medically appropriate.

At Roche, we remain committed to helping transplant patients.
Thank you for the trust you put in CellCept.

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CellCept[®]
(mycophenolate mofetil)

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Important Information about CellCept® (mycophenolate mofetil)

Indications:

CellCept is indicated for the prophylaxis of organ rejection in patients receiving allogeneic renal, cardiac or hepatic transplants. CellCept should be used concomitantly with cyclosporine and corticosteroids.

Contraindications:

Allergic reactions to CellCept have been observed; therefore, CellCept is contraindicated in patients with a hypersensitivity to mycophenolate mofetil, mycophenolic acid or any component of the drug product. CellCept Intravenous is contraindicated in patients who are allergic to Polysorbate 80 (TWEEN).

Important Safety Information:

WARNING:

Immunosuppression may lead to increased susceptibility to infection and possible development of lymphoma. Only physicians experienced in immunosuppressive therapy and management of renal, cardiac or hepatic transplant patients should use CellCept. Patients receiving the drug should be managed in facilities equipped and staffed with adequate laboratory and supportive medical resources. The physician responsible for maintenance therapy should have complete information requisite for the follow-up of the patient.

Female users of childbearing potential must use contraception. Physicians should inform female patients that CellCept use during pregnancy is associated with increased rates of pregnancy loss and congenital malformations.

- Patients receiving immunosuppressive regimens involving combinations of drugs, including CellCept, as part of an immunosuppressive regimen are at increased risk of developing lymphomas and other malignancies, particularly of the skin.
- Oversuppression of the immune system can also increase susceptibility to infection, including opportunistic infections, and sepsis.
- Cases of progressive multifocal leukoencephalopathy (PML), sometimes fatal, have been reported in patients treated with CellCept. The most frequent clinical features observed were hemiparesis, apathy, confusion, cognitive deficiencies and ataxia. In reported cases,

patients generally had risk factors for PML, including treatment with immunosuppressant therapies and impairment of immune function. In immunosuppressed patients with neurological symptoms, physicians should consider PML in the differential diagnosis and consult with a neurologist as clinically indicated. Consideration should be given to reducing the amount of immunosuppression in patients who develop PML. In transplant patients, physicians should also consider the risk that reduced immunosuppression represents to the graft.

- CellCept can cause fetal harm when administered to a pregnant woman. A patient who is planning a pregnancy should not use CellCept unless she cannot be successfully treated with other immunosuppressant drugs. If this drug is used during pregnancy, or if the patient becomes pregnant while taking this drug, the patient should be apprised of the potential hazard to the fetus.
- Women of childbearing potential (including pubertal girls and perimenopausal women) taking CellCept must receive contraceptive counseling and use effective contraception. The patient should begin using her chosen contraceptive method 4 weeks prior to starting CellCept therapy. She should continue contraceptive use during therapy and for 6 weeks after stopping CellCept. Two reliable forms of contraception must be used simultaneously unless abstinence is the chosen method. Patients should be aware that CellCept reduces blood levels of the hormones in the oral contraceptive pill and could theoretically reduce its effectiveness.
- Severe neutropenia [absolute neutrophil count (ANC) $<0.5 \times 10^3/\mu\text{L}$] developed in up to 2.0% of renal, up to 2.8% of cardiac, and up to 3.6% of hepatic transplant patients receiving CellCept 3 grams daily. Patients receiving CellCept should be monitored for neutropenia. If neutropenia develops (ANC $<1.3 \times 10^3/\mu\text{L}$), dosing with CellCept should be interrupted or the dose reduced, appropriate diagnostic tests performed, and the patient managed appropriately (see **DOSAGE AND ADMINISTRATION**).
- Gastrointestinal bleeding (requiring hospitalization) has been observed in approximately 3% of renal, in 1.7% of cardiac and in 5.4% of hepatic transplant patients treated with CellCept 3 grams daily.
- Common adverse events that were reported in $\geq 20\%$ of patients in the CellCept group in controlled studies in prevention of renal, cardiac or hepatic allograft rejection are listed in Table 8 of the **ADVERSE REACTIONS** section of the complete Prescribing Information.

Please see complete Prescribing Information with Medication Guide at www.rocheusa.com/products/cellcept/pi.pdf.



Roche Laboratories Inc.
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