



REBYOTA Connect Enrollment Instructions and Checklist

For assistance call: 1-877-REBYOTA, Monday-Friday 8 a.m. – 8 p.m. EST

Fax the completed form to 1-877-778-7167

The Ferring REBYOTA Connect Program is designed to help patients access REBYOTA. This program offers a broad range of services, summarized below. There is no cost to enroll in the program, and all patients prescribed REBYOTA are eligible to enroll.

SUMMARY OF SERVICES OFFERED THROUGH REBYOTA CONNECT

Service	Description
Access and Reimbursement Services	<ul style="list-style-type: none"> • Benefits investigation • Prior authorization (PA) information • Appeals assistance for PA or claims denials • Billing and coding support
Co-pay Support Program	• Screen patients for eligibility for co-pay support and, if eligible, initiate enrollment in the REBYOTA co-pay program
Patient Assistance Free Drug Program	Screen patients for eligibility into the patient assistance program which provides REBYOTA at no cost to eligible patients. Assistance for eligible patients will be provided in the form of free product shipped to site of administration or reimbursement for the purchase price of the product if processed after product administration. PAP only covers the cost of the product and not administration or other services.
Patient Education	Refer patients to REBYOTA educational materials, <i>C. diff</i> support groups, and/or state health exchanges if they are uninsured.

ENROLLMENT FORM INSTRUCTIONS & CHECKLIST

- Complete all required sections of the enrollment form, including sections 3 and 7 if you would like your patient screened for PAP eligibility.
- Verify that the insurance information in section 2 matches what is listed on the patient's health insurance card(s).
- Sign the Prescriber Certification at the bottom of page 2.
- Ensure that the patient signs section 7 of the form. **Two patient signatures are required for financial assistance eligibility screening.**
- Fax the completed form to 1-877-778-7167.

To avoid processing delays, please ensure all required sections are completed including signatures and insurance information matches what is listed on the patient's health insurance card.



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