

EPOGEN (epoetin alfa)

Pharmaceutical Company Amgen

Program Name Safety Net Foundation

Program Address PO Box 13185
La Jolla, CA 92039-3185

Phone Number 1-888-762-6436

Fax Number 1-888-549-7239

Website http://wwwext.amgen.com/citizenship/healthcare_providers.html

Eligibility Guidelines

The patient must have no insurance and have an income at or below 350% of FPL. The patient must be on dialysis.

1. **The Patient must complete application form (4 pages) and attach any of the following proofs of income:**
 - a. Latest federal return
 - b. Latest W-2 statement
 - c. SSDI/SSI award letter
 - d. Bank statements (last 3 months showing income deposits)
 - e. Pay stubs (last 2 pay stubs) or
 - f. State program acceptance letter or card
 - g. If no proof of income, you may complete one of the following forms:
 - Notarized income statement (form attached)
 - Attestation statement with two signatures (form attached)

Fax or Mail completed Enrollment form and documents to:

Safety Net Foundation
PO Box 13185
La Jolla, CA 92039-3185
Fax: 1-866-549-7239

2. **The patient must present an original prescription and facility application form (3 pages) to a participating pharmacy (Walgreen's, Target or Wal-Mart)**