340B Notice Regarding Limited Distribution Network for DOPELET® (avatrombopag)

This notice provides information for eligible 340B covered entities about how to acquire DOPELET (avatrombopag) (NDC Numbers 71369-020-10; 71369-020-15; 71369-020-30) at the calculated 340B ceiling price. AkaRx is committed to both patient safety and compliance with the rules of the 340B program.

DOPELET is an orally administered thrombopoietin receptor agonist that stimulates platelet production and is indicated for use in adult chronic liver disease patients with thrombocytopenia undergoing planned medical procedures and in adult patients with chronic thrombocytopenia who have had insufficient response to previous treatment.

Due to the special circumstances under which patients are prescribed DOPELET and the unique dosing schedule, AkaRx has developed a limited distribution plan. This plan is designed to ensure that patients being treated with DOPELET receive the best possible care and to increase optimal therapeutic adherence for patients receiving DOPELET in an acute or chronic setting. All pharmacies – 340B and otherwise – must adhere to the minimum requirements set forth herein.

DOPELET is available for purchase by healthcare facilities that maintain in-house pharmacies that are equipped to meet the specific needs of chronic liver disease patients with thrombocytopenia undergoing planned medical procedures and patients with chronic immune thrombocytopenia. A healthcare facility can join AkaRx’s dispensing network if its in-house pharmacy: (1) closely manages its patients’ care (including adherence communications to patients); (2) has experience in the management of patients’ thrombocytopenia in an acute or chronic setting; and (3) dispenses to patients of record in your facility. If your facility meets these criteria, you may purchase DOPELET at the then-prevailing 340B ceiling price from our specialty distribution partner: ASD Healthcare.

Covered entities can also access DOPELET through any one of our specialty pharmacy partners:

- Accredo Health Group, Inc.
- CAREMARK, L.L.C.

If a covered entity is in a 340B contract pharmacy relationship with one of our specialty pharmacy partners listed above, AkaRx will extend the then-prevailing 340B ceiling price to that covered entity. These specialty pharmacies will also fill scripts from the covered entity at the 340B ceiling price, and ship DOPELET directly to the covered entities’ patients’ homes. If you have any questions about this plan or experience any difficulty obtaining DOPELET at the prevailing 340B ceiling price for your eligible patients, please contact AkaRx directly at 340B@dova.com. For more information on DOPELET, you may contact Dova1Source at 1-833-DOVA-ONE or visit www.doptelet.com or www.dova1source.com.

AkaRx takes both its obligations to protect patient safety and under the 340B program seriously and works to ensure that DOPELET is available to 340B covered entities in a manner that is no more restrictive than it is for non-340B entities. Please feel free to share this letter and the information contained herein with 340B covered entities and other interested parties as you deem appropriate.