

Notice to 340B Covered Entities Regarding Cutaquig Immune Globulin Subcutaneous (Human)  
- hipp 16.5% Solution

This notice provides information for 340B covered entities about how to acquire Cutaquig Immune Globulin Subcutaneous (Human) - hipp 16.5% Solution (Cutaquig) at prices no greater than the 340B ceiling prices. Cutaquig is indicated for the treatment of primary humoral immunodeficiency in adults. Pfizer, Inc (Pfizer) markets Cutaquig under the following NDCs:

<b>Description</b>	<b>Carton NDC</b>
Cutaquig SCIg 4g/ 24ML SSOL 1x1 VL- PFE Label	00069-1509-02
Cutaquig SCIg 1g/ 6ML SSOL 1x1 VL- PFE Label	00069-1061-02
Cutaquig SCIg 2g/ 12ML SSOL 1x1 VL- PFE Label	00069-1476-02
Cutaquig SCIg 8g/ 48ML SSOL 1x1 VL- PFE Label	00069-1965-02
Cutaquig SCIg 1.65gm/10ml SSOL 1x1 VL - PFE Label	00069-1802-02
Cutaquig SCIg 3.3gm/20ml SSOL 1x1 VL - PFE Label	00069-1960-02

Currently, the supply of Cutaquig is insufficient to meet the demand. Accordingly, Pfizer relies on a defined distribution network to distribute Cutaquig. The network presently consists of specialty distributors, who will sell through to select home infusion providers. In addition, due to the limited supply of Cutaquig, Pfizer has implemented an allocation procedure. Under the procedure, Pfizer has designated a specified proportion of Cutaquig (based on previous Ig purchase volume of 340B covered entities) for purchase by 340B covered entities. Covered entities wishing to purchase Cutaquig may contact ASD Healthcare using the information below:

ASD Healthcare  
3101 Gaylord Parkway  
Frisco, TX 75035  
800-746-6273  
[www.asdhealthcare.com](http://www.asdhealthcare.com)

Alternatively, if a 340B covered entity prefers to order from another specialty distributor, it can do so. In such cases, the 340B covered entity may order from its preferred distributor, and ASD will ship Cutaquig directly to the covered entity and bill the distributor of the covered entity's choice. The covered entity then will be billed by its preferred distributor.

Pfizer takes its obligations under the 340B program seriously and developed its network in an evenhanded manner that treats all purchasers equally, and does not discriminate against 340B covered entities. As such, this defined distribution network and allocation procedure complies fully with the relevant 340B program guidance. If you have any questions regarding the distribution of Cutaquig under the Pfizer labeler code, or experience any difficulty obtaining any of these products at prices no greater than the 340B price for your eligible patients, please contact Aaron R. Lillybridge at 224-212-3352.