

Deflux™ injectable gel is available for sale in the U.S. exclusively through Cencora and its affiliates. These affiliates include ASD Healthcare, Besse Medical, and Oncology Supply.

EXISTING CENCORA CUSTOMERS	ORDERING CONTACTS
<p>Current Cencora customers can order Deflux gel through their existing Cencora channel, or directly through the customer portal: https://abcorder.amerisourcebergen.com</p> <p>In addition to your Cencora account number, please be sure to provide correct catalog numbers when ordering (product information below).</p>	<p>PHONE: 800-543-2111 EMAIL: service@besse.com</p>

NEW CUSTOMER / ACCOUNT SET UP	ACCOUNT SET UP CONTACTS
<p>For new customer support and account set up, please contact Cencora using the information provided to the right. To initiate your account set up, be prepared to provide:</p> <ul style="list-style-type: none"> • Shipping name • Shipping address • Billing name • Billing address • Facility or physician state medical license • Responsible company contact name & email • Any existing Cencora account numbers associated with your organization 	<p>PHONE: 800-543-2111 EMAIL*: accountsetup@besse.com *Include "Deflux" in the subject line when emailing</p>

PRODUCT INFORMATION

PRODUCT	CATALOG NUMBER
Deflux 1ml Syringe ea.	10264979
Deflux metal needle ea.	10264678

*Extra Deflux Patient Implant Cards can be ordered directly from your Teleflex representative

CODING AND BILLING

Administration Code	CPT 52327	Cystourethroscopy with subureteric injection of implant	NOTE: Surgical cystoscopy always includes diagnostic cystoscopy and should not be reported separately
Reporting Implant Material on Claim Forms	HCPCS L8604	Injectable bulking agent, dextranomer/hyaluronic acid copolymer implant, urinary tract	NOTE: 1 mL, includes shipping and necessary supplies

Uniform coding standards require the use of L8604 on all claims related to its use regardless of payer type.

ADDITIONAL SUPPORT

<p>Field Operations</p> <p>For Deflux sales representative support and product training, contact the Teleflex Field Operations Team. EMAIL: field_ops@teleflex.com</p>	<p>Reimbursement Support</p> <p>For assistance with obtaining insurance benefit and coverage information, contact Teleflex Reimbursement Support. PHONE: 844.516.5966 EMAIL: reimbursement@teleflex.com</p>	<p>Medical Information Department</p> <p>For product complaints and adverse event reports, contact our Medical Information Department. PHONE: 844-350-9656 FAX: 510-595-8183 EMAIL: palettemc@eversana.com</p>
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