

If your patient has private insurance, they may be eligible for the Novartis Patient Support Co-Pay Plus* offer, which includes as little as \$0 co-pay.

*Limitations apply. Subject to annual co-pay benefit limit. Offer not valid under Medicare, Medicaid, or any other federal or state programs. Novartis reserves the right to rescind, revoke, or amend this program without notice. Additional limitations may apply. See complete Terms & Conditions at cosentyxhcp.com for details.



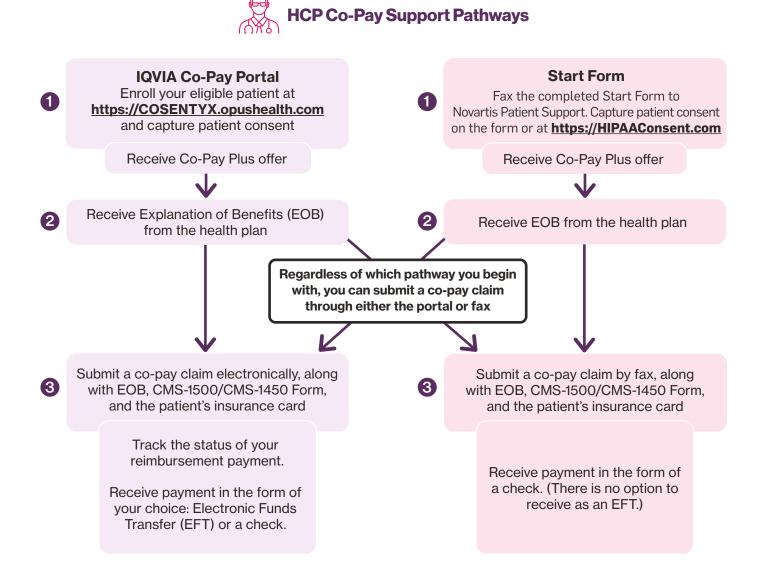
Novartis Patient Support

One Card, Multiple Pathways

Whether co-pay claims are managed by the office or the patient, there's a variety of ways to access the Novartis Patient Support Co-Pay Plus offer.

HCP-Managed Claims

If your office will manage co-pay claims, you can initiate enrollment through the IQVIA Co-Pay Portal at https://cosentyx.opushealth.com or the Start Form. Claims can then be managed through the portal or by fax.



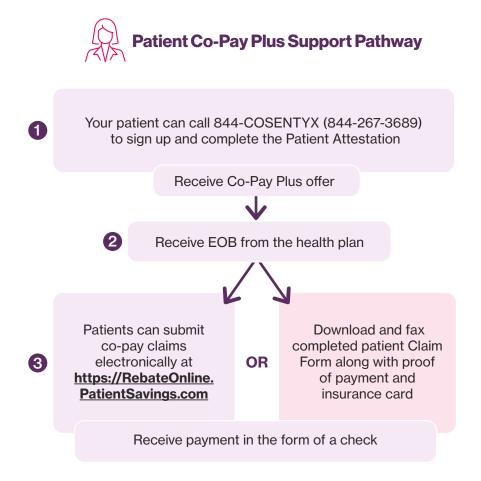
Novartis Patient Support provides the flexibility to manage co-pay claims in multiple ways that fit your workflow, whether through your office or patient managed.

Novartis Patient Support

Patient-Managed Claims

If your office is not managing co-pay claims on your patient's behalf, **patients** are able to pay up front and get reimbursed via the Novartis Patient Support. Your patients can manage claim reimbursement in 2 ways:

- ▶ Patient Co-Pay Claim Form at www.cosentyxhcp.com
- ▶ Patient rebate online at https://RebateOnline.PatientSavings.com



If you are obtaining the IV formulation of COSENTYX® (secukinumab) through a **specialty pharmacy (SP)** (white bagging), the Co-Pay Plus offer needs to be provided to the SP for them to manage claims.

- ➤ Your practice should provide the Co-Pay Plus offer BIN, ID, Rx, and PCN when sending over the prescription
- ▶ The patient can also provide the number if contacted by the SP

While these graphics represent the most common pathways, others do exist. See the back page for other scenarios to keep in mind.



Novartis Patient Support

Key Considerations for Co-Pay Claim Submissions



HCP enrollment via the IQVIA Co-Pay Portal

- ► The most streamlined pathway for the IV formulation of COSENTYX® (secukinumab) is the IQVIA Co-Pay Portal
- If your patient already has a Co-Pay Plus offer BIN, ID, Rx, and PCN, use that information



Patients Previously Receiving the Subcutaneous Formulation of COSENTYX® (secukinumab)

- ► For patients with a Co-Pay Plus offer previously receiving the subcutaneous formulation of COSENTYX:
 - Your patients do not need a new Co-Pay Plus offer
 - -Continue to use the same Co-Pay Plus offer number in any pathway to submit a claim



Patients Who Self-Enroll

For patients who self-enroll through Novartis Patient Support at **support.cosentyx.com** or a Start Form, claims can be managed by the patient or their HCP

Have questions? We are here to help.



Phone:

844-COSENTYX (844-267-3689)



Website:

www.cosentyxhcp.com

Co-Pay Plus Terms & Conditions

Offer valid only when used with commercial health insurance. Offer is not available where:

- the patient has federal or state health plan benefits (eg, Medicare, Medicaid, TRICARE, VA);
- the health plan reimburses for the entire cost of the drug;
- the health plan provides no coverage for the drug; or
- prohibited by law.

The amount of funding available from the Program is subject to an annual limit. Novartis reserves the right to discontinue the availability of co-pay assistance if, at any time, Novartis determines that the patient is subject to a co-pay maximizer program. Co-pay maximizers are programs implemented by health plans in which the amount of the patient's out-of-pocket cost is increased to reflect the availability of support offered by a manufacturer assistance program. The patient is responsible for all costs once available funding from the Program is exhausted.

The Program is designed exclusively for the benefit of the patient. The amount of available funding may be reduced or eliminated if it is not credited by the patient's health plan toward the patient's out-of-pocket obligations (eg, deductibles, annual out-of-pocket maximums). Program funding may also be reduced or eliminated if the patient's health plan, directly or indirectly, adjusts, reduces, or waives the patient's health plan benefits based on the availability of, or the

patient's enrollment in, the Program, or otherwise acts in a manner that materially affects these Terms and Conditions.

Only the patient or their legal guardian or caregiver may enroll the patient in the Program. Health plans, specialty pharmacies, pharmacy benefit managers, and their agents and representatives (individually and collectively "Plan Administrators"), are prohibited from enrolling patients in the Program.

Patients in the Program are responsible for notifying Novartis of any change in their prescription drug health plan coverage that may conflict or otherwise affect compliance with these Terms and Conditions. By accepting Program funding from Novartis on behalf of participating patients, Plan Administrators agree to not take any action that materially affects compliance with these Terms and Conditions. Patients may not seek reimbursement for the value received from the Program from any other party (eg, health plans, flexible spending or healthcare savings accounts). Patients are responsible for complying with any applicable limitations and requirements of their health plan related to their use of the Program.

Valid only in the United States and Puerto Rico. Co-pay support for infusion administration cost not available in Rhode Island or Massachusetts.

The Program is not health insurance, and may not be combined with any third-party rebate, coupon, or offer. Novartis reserves the right to rescind, revoke, or amend the Program at any time without notice.





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