

Tolmar is committed to patient access and affordability

All commercially-
insured **patients**
can pay as little as **\$5** **for Fensolvi[®]**
regardless of
insurance outcomes*



Patient access through the **Fensolvi Copay Card**

- › For all commercially insured patients who have prescription coverage the copay will be applied at the point of sale.
- › Commercially insured covered patients will receive Fensolvi for as little as \$5, regardless of insurance outcomes*



Access the Brand Promise exclusively through the **Fensolvi TotalSolutions[®] Hub**

- › For commercially insured patient's where Fensolvi is not covered by insurance
- › When Fensolvi cannot be filled by **pharmacies** including an account pharmacy (hospital pharmacy[†]) or a Fensolvi in-network specialty pharmacy (Accredo or CVS/Caremark)

Fensolvi TotalSolutions[®] copay and Brand Promise program highlights

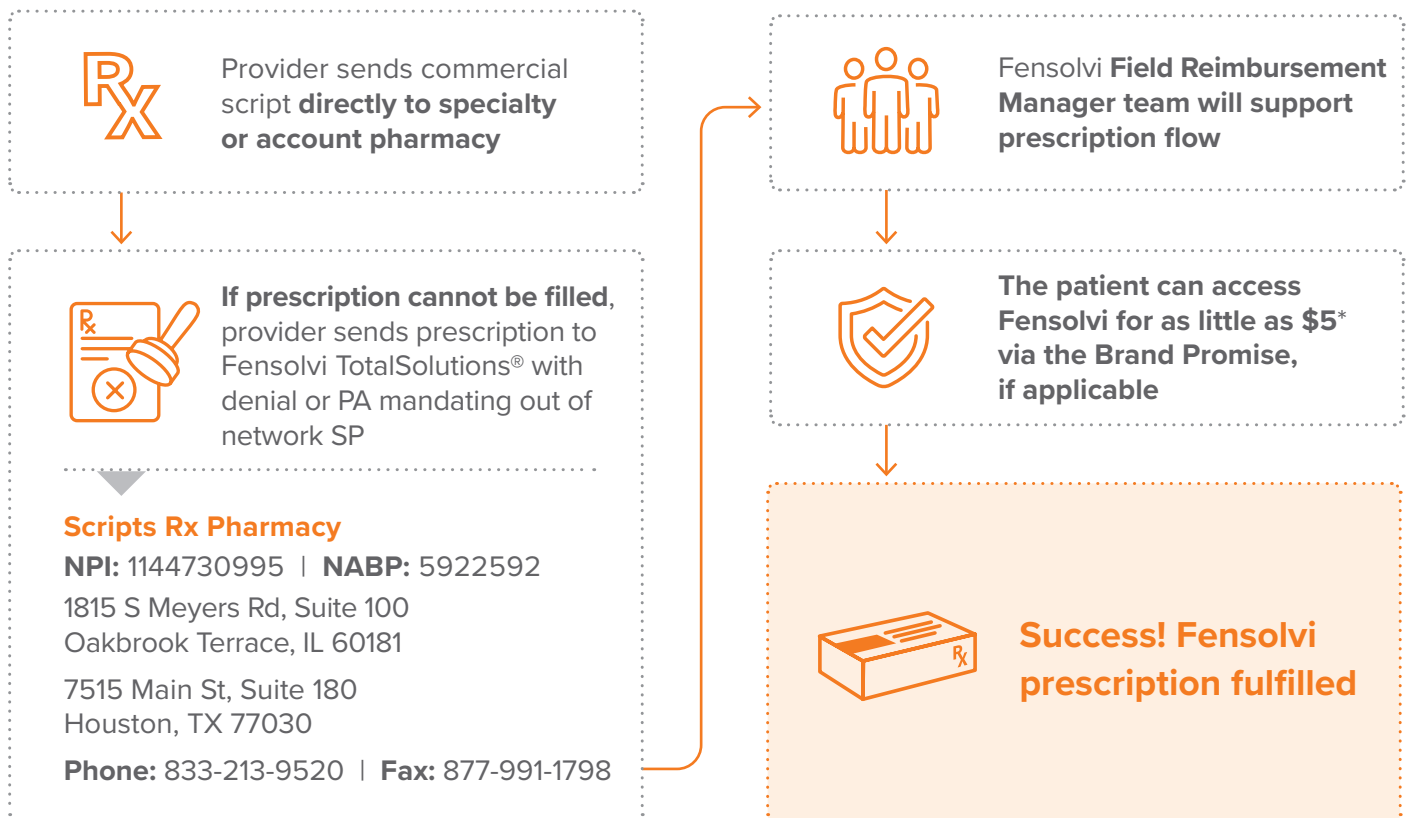
- › A program that is easy for parents to understand
- › No maximum limit on yearly coverage
- › Applies to approved and denied prior authorizations
- › Good for the duration of the patient's treatment journey

* See Copay Terms and Conditions on reverse.

[†] In patient pharmacy and health system owned specialty pharmacy

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What to do if a commercial script is denied at my pharmacy or one of the Fensolvi® in-network pharmacies?



PA= Prior authorization
SP = Specialty pharmacy

* FENSOLVI TOTALSOLUTIONS COPAY PROGRAM TERMS AND CONDITIONS

The Fensolvi® Co-pay Assistance Program ("Program") is valid ONLY for patients who are prescribed Fensolvi® and are reimbursed exclusively by commercial insurance. This Program is valid only in the United States; but, void where prohibited by law or by the patient's health insurance provider. This Program is non-transferable, limited to one per person, and cannot be combined with any other coupon, free trial, discount, prescription savings card, or other offer. Restrictions or limits may apply.

Medicare, Medicaid, Tricare and other federal health care program beneficiaries may not participate in this Program. This Program also is neither available for cash paying patients nor where your commercial plan reimburses you for the entire cost of your prescription drug. Patients cannot seek reimbursement from health insurance or any third party for any part of the assistance received through this Program. The patient or his/her guardian is responsible for reporting the receipt of all benefits or reimbursement received under the Program to any insurer, health plan, or other third party, as may be required. This Program is not insurance and is not intended as a substitute for insurance.

With the Program, you pay as little as \$5 of your co-pay or co-insurance for Fensolvi®, per prescription. The remainder of your co-pay or co-insurance is covered, up to two prescriptions per calendar year. The Program assists with the cost of Fensolvi only. It does not assist with the cost of other administrations, medicines, procedures or office visit fees.

Tolmar, Inc. ("Tolmar") reserves the right to terminate, rescind, revoke, or modify this Program at any time without notice. This Program expires at the end of the current calendar year, at which time you must re-enroll. For complete information about the terms and conditions of this Program, including the limitations on use and the amount of assistance, go to: <https://www.fensolvitotalsolutions.com> or call 1-833-213-9520.

Program managed by Scripts Rx on behalf of Tolmar.