

Fensolvi TotalSolutions[®] Hub is now optional

Prescribe directly to an
**In-Network Specialty
Pharmacy**

OR

Continue to prescribe through the
Fensolvi TotalSolutions Hub

Exclusive Hub services:

- Eliminate need to interact with Fensolvi TotalSolutions Hub
- Streamlined prescribing process
- Align work flows to existing office practices
- Accelerate prescription fulfillment by reducing time to fill
- Uninterrupted access to co-pay assistance program*
- Rx and Mx fulfillment available at all Specialty Pharmacies

Use your current eRx platform to send Rx to the Hub:

Scripts Rx Pharmacy

NPI: 1144730995 | **NABP:** 5922592

1815 S Meyers Rd., Ste. 100, Oakbrook Terrace, IL 60181

7515 Main St., Suite 180, Houston, TX 77030

Phone: 833-213-9520 | **Fax:** 877-991-1798

Prescribe directly to an
**In-Network Specialty
Pharmacy listed below:**

Accredo

NPI: 1346208949 | 1620 Century Center Pkwy. | Memphis, TN 38134
Phone: 855-315-3590 **Fax:** 888-302-1028

CVS

NPI: 1466033 | 800 Biermann Ct. | Mount Prospect, IL 60056
Phone: 877-722-3444 **Fax:** 800-323-2445

You have a choice in how you order Fensolvi®

Designed to fit seamlessly into your preferred process



**Fensolvi
TotalSolutions® Hub**



**Integrated Specialty
Pharmacy**



**Direct to In-Network
Specialty Pharmacy**



Buy and Bill



**Questions?
Contact a Fensolvi Field
Reimbursement Manager**

* 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.