

COSENTYX[®]: Start and stay without delay



Covered Until You're Covered* helps your qualified[†] commercially insured patients **start treatment** or **continue without disruption** when experiencing any of the following:

Common Coverage Challenges



Coverage denied?

Your patient's health plan denies a PA or exception request. This may include a denial due to a step therapy requirement OR complete formulary exclusion.



Change in insurance?

A patient currently taking COSENTYX changes insurance OR their health plan changes its formulary, resulting in a PA denial that prevents the patient from continuing treatment with COSENTYX.



Additional plan requirements?

The health plan approves the maintenance doses but denies the loading doses OR only approves a 150-mg dosage despite the prescribed dosage being in accordance with the FDA-approved indications.

COVERED
until you're
COVERED

We've got your patients covered.

Covered Until You're Covered* provides **up to 2 years of FREE COSENTYX** for qualified[†] commercially insured patients while your office is appealing to their health plan.

➔ **See the following page to learn how YOU can enroll your patients in Covered Until You're Covered.**

*For terms, conditions, and limitations related to the Covered Until You're Covered Program, please see the following page.

[†]Certain payers have carve-outs that restrict utilization of manufacturer support programs.

FDA, US Food and Drug Administration; PA, prior authorization.

Next steps to get patients started with Covered Until You're Covered*



1 COMPLETE A START FORM

You can submit an electronic Start Form via your [CoverMyMeds®](#) account, or customize and fax a [Start Form PDF](#).



Upon receipt of the Start Form and proof of denial, **Novartis will ship the patient's first or next dose of COSENTYX®.**

2 SUBMIT AN APPEAL

Submit an appeal to your patient's health plan **within the first 90 days** of their enrollment in Covered Until You're Covered and send a copy to Novartis.



For tips, helpful checklists, and sample letters for submitting an appeal, refer to the [COSENTYX PAs, Exceptions & Appeals Kit](#).

**READY
SET
COSENTYX**

To explore helpful resources for your office, including the **Start Form** and the **PAs, Exceptions & Appeals Kit**, visit [ReadySetCosentyx.com](#).



We are here to help

For questions and additional support, contact COSENTYX® Connect at 1-844-COSENTYX (1-844-267-3689) or reach out to your COSENTYX Access & Reimbursement Manager (ARM).

*The Covered Until You're Covered Program is available for COSENTYX subcutaneous injection only. Eligible patients must have commercial insurance, a valid prescription for COSENTYX, and a denial of insurance coverage based on a prior authorization request. Program requires the submission of an appeal of the coverage denial within the first 90 days of enrollment in order to remain eligible. Program provides COSENTYX for free to eligible patients for up to two years, or until they receive insurance coverage approval, whichever occurs earlier. A valid prescription consistent with FDA-approved labeling is required. Program is not available to patients whose medications are reimbursed in whole or in part by Medicare, Medicaid, TRICARE, or any other federal or state program. Patients may be asked to reverify insurance coverage status during the course of the program. No purchase necessary. Program is not health insurance, nor is participation a guarantee of insurance coverage. Limitations may apply. Enrolled patients awaiting coverage for COSENTYX after two years may be eligible for a limited Program extension. Novartis Pharmaceuticals Corporation reserves the right to rescind, revoke, or amend this Program without notice.

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