

CIMZIA® (certolizumab pegol) In-Office Injection Copay Savings Program















CIMZIA is indicated for the treatment of adults with moderately to severely active rheumatoid arthritis (RA). CIMZIA is indicated for the treatment of adult patients with active psoriatic arthritis (PsA). CIMZIA is indicated for the treatment of adult patients with active ankylosing spondylitis (AS). CIMZIA is indicated for reducing signs and symptoms of Crohn's disease (CD) and maintaining clinical response in adult patients with moderately to severely active disease who have had an inadequate response to conventional therapy. CIMZIA is indicated for the treatment of adults with active non-radiographic axial spondyloarthritis (nr-axSpA) with objective signs of inflammation. CIMZIA is indicated for the treatment of adults with moderate-to-severe plaque psoriasis (PSO) who are candidates for systemic therapy or phototherapy.

Important Safety Information

Serious and sometimes fatal side effects have been reported with CIMZIA, including tuberculosis (TB), bacterial sepsis, invasive fungal infections (such as histoplasmosis), and infections due to other opportunistic pathogens (such as Legionella or Listeria). Patients should be closely monitored for the signs and symptoms of infection during and after treatment with CIMZIA. Lymphoma and other malignancies, some fatal, have been reported in children and adolescent patients treated with TNF blockers, of which CIMZIA is a member. CIMZIA is not indicated for use in pediatric patients.

Please see additional Important Safety Information on back cover and full Prescribing information provided by the UCB representative, and visit www.CIMZIAhcp.com.





Helping Eligible Patients Save on Out-of-Pocket Costs for CIMZIA® (certolizumab pegol) In-Office Injection

The CIMZIA \$0 Copay Savings Program for In-Office Injection helps eligible, commercially insured patients save on their out-of-pocket costs for CIMZIA*

- Simplified patient enrollment process
- No income requirements
- No dollar limit per use

CIMZIA Copay Savings Program information

Program website:ioa.cimziasavingsprogram.com

Copay Support Phone Line:

For questions, please call 1-877-705-4119 toll-free,

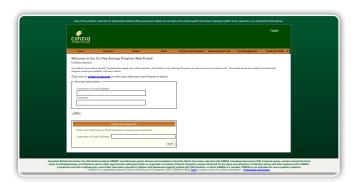
Mon – Fri from 8:00 AM – 8:00 PM ET

Contact your Field Reimbursement Manager for more information.

The CIMZIA Copay Savings Program Is Managed Through an Online Portal

The online portal enables claims submission and payment via Electronic Funds Transfer (EFT).

- Enrollment for new offices via online portal at ioa.cimziasavingsprogram.com
- Patient enrollment and claim submission through portal
- Copay claims paid via EFT to appropriate bank account
- Bank reconciliation number and amount is listed by date, patient, and claims for all transactions



• Log-in with username or email and ability to retrieve forgotten passwords

The online portal now allows for:

- Site administrators to add secondary users to perform certain functions
- Account administrators to update their own banking information as needed
- Improved sorting and tracking on reconciliation screens, including claim ID
- Ability to add associated practices for accounts with referring practices/physicians



Please see additional Important Safety Information on back cover and full Prescribing information provided by the UCB representative, and visit www.CIMZIAhcp.com.

Visit our website:

ioa.cimziasavingsprogram.com





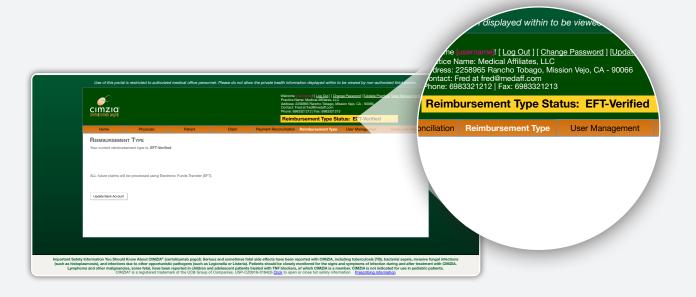
^{*}Eligibility: Available to individuals with commercial prescription insurance coverage for CIMZIA. Not valid for prescriptions that are reimbursed, in whole or in part, under Medicare (including Medicare Part D), Medicaid, similar federal- or state-funded programs (including any state prescription drug assistance programs and the Government Health Insurance Plan available in Puerto Rico), or where otherwise prohibited by law. Product dispensed pursuant to program rules and federal and state laws. Claims should not be submitted to any public payer (ie, Medicare, Medicaid, Medigap, TRICARE, VA, and DoD) for reimbursement. The parties reserve the right to amend or end this program at any time without notice.



ENROLLMENT FOR NEW OFFICES

- Select the "create an account" link on the CIMZIA Copay Savings Program portal (ioa.cimziasavingsprogram.com).
- Complete all fields. Under Reimbursement Type, select "EFT."
- Enter all banking information and check the box indicating you agree to all terms. Click submit.
- Select **Physician** tab and enter physicians.
- At this point, you have successfully enrolled.

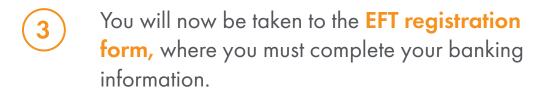
Allow 5 to 7 business days for completion of EFT setup. You will receive an email stating EFT-Verified when the EFT registration process is complete. The notification will also be shown on the top right information bar of the portal stating EFT-Verified.

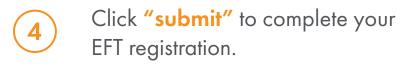




SWITCHING FROM DEBIT CARDS TO EFT

- Log in to the new CIMZIA Copay Savings Program portal (ioa.cimziasavingsprogram.com) using your existing username and password.
- Select the "click here" hyperlink in the yellow box to change reimbursement type.







AFTER SUCCESSFULLY ENROLLING IN EFT:

- $\bullet \ \, \text{Any claims already in process will continue through the current review process using the V is $\alpha^{\$}$ debit card }$
- Your account will state **EFT-Pending** for 5 to 7 business days
- You will receive a notification stating EFT-Verified when the EFT registration process is complete.

 The notification will also be shown on the top right information bar of the portal stating EFT-Verified

 Welcome (username): | Log Out | | Change Password | | Update Practice | Log Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 2258955 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 225895 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 225895 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 225895 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 225895 Ranchto Tokago, Mission Vejo, CA 90066 Contact: Feed the defined affiliates, LLC Address: 225895 Ranchto Tokago, Mission Vejo, CA 90066 Contac
- All claims entered thereafter will be paid via EFT
- The identifier on your office's bank statement will be "copaysavingsprogram"

Please see additional Important Safety Information on back cover and full Prescribing information provided by the UCB representative, and visit www.CIMZIAhcp.com.

Visit our website:







ENROLLING PATIENTS

- On the CIMZIA Copay Savings Program portal homepage, navigate to the "Patient" tab or select the "Enroll a Patient" hyperlink.
- 2 Select "Add New Patient" and enter all required fields.
- Confirm patient consent for enrollment
- For new patients, the system will automatically assign a member ID.

 Existing patients will retain their original member ID as it appears on the Visa debit card
- Provide the patient with a copy of the patient kit, which provides information on the CIMZIA Copay Savings Program.

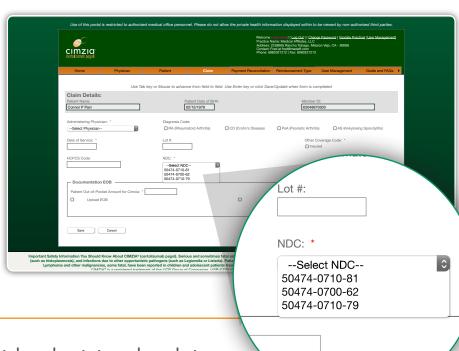




SUBMITTING A CLAIM

- Navigate to the "Claim" tab or select "Submit a Claim" hyperlink.
- Select the applicable physician and patient, then click on "Add Claim."
- Enter all required information, including date of service (DOS), dollar amount, CIMZIA National Drug Code (NDC)*, and primary payer information.
- Indicate if explanation of benefits (EOB) is to be faxed or uploaded.





6 Select "Save" to finish submitting the claim.

Please see additional Important Safety Information on back cover and full Prescribing information provided by the UCB representative, and visit www.CIMZIAhcp.com.

Visit our website:



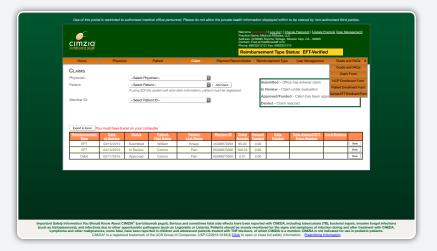


^{*50474-0710-81,} CIMZIA Prefilled Syringe Starter Kit; 50474-0700-62, Lyophilized Powder; 50474-0710-79, Prefilled Syringe.



CHECKING STATUS OF A CLAIM

- Navigate to the "Claim" tab.
- Select the applicable physician, patient, and patient ID. The patient claim history will be shown.



- Each patient claim entered will initially state **PENDING**.
- When the claim processor starts reviewing the claim against the EOB and program business rules, the claim status will state QC.
- When the review is complete, the patient claim information will state **APPROVED** or **DENIED**.
- When approved and processed, you will see the date that funds are deposited and the bank tracking number.
- A letter or email will be sent to the office and patient to verify the amount approved or the reason for claim denial.

After the patient EOB is submitted, the processing and payment of a claim will take up to 5 days.



PAYMENT RECONCILIATION

- Navigate to the "Payment Reconciliation" tab.
- Select the **Date of** Service or Date of Deposit.
- Select the Physician(s), Patient(s), and **Associated Practice(s).**



- Select the Reconciliation Payment Option (debit, EFT, or both).
- You have the option to export as either a PDF or Excel® document, and also the option to print a reconciliation document.

Please see additional Important Safety Information on back cover and full Prescribing information provided by the UCB representative, and visit www.CIMZIAhcp.com.

Visit our website:

FREQUENTLY ASKED QUESTIONS

- 1. Is my office required to enroll in EFT? Your office is not required to enroll in EFT. You can stay in the Visa debit card program if you wish; however, if you do switch to EFT, you can no longer use the Visa debit card program.
- 2. How many administrators under the same account can be on the portal? Only one email address can be submitted for each account. One person from the practice must be designated as site administrator; however, multiple users under the same account can have access to the portal.
- **3.** How long will it take for my EFT registration to be processed? Once an account registers, there is a 5 to 7 day response time from the bank. Once the portal says EFT-Verified, it is ready to process.
- 4. After my registration is complete, how long will it take from claim submission to payment? When sending a claim, there is a clean claim* processing time of approximately 24 to 48 hours. Payment from the bank would be 2 days thereafter. Normal claim transactions will take up to 5 days.
- 5. Can eligible patients use the CIMZIA Copay Savings Program to meet their insurance deductible? Yes. The CIMZIA Copay Savings Program can be used for out-of-pocket expenses for CIMZIA® (certolizumab pegol), including copayments, co-insurance, and deductibles. This program cannot be used for ancillary medical costs such as doctor visits or administration expenses.
- 6. Can the patient receive reimbursements through the CIMZIA Copay Savings Program while he/she is simultaneously participating in another CIMZIA copay support program? No. CIMZIA patients may participate in only one CIMZIA Copay Savings Program at any given time. If the patient stops receiving CIMZIA via in-office administration and switches to self- or home-administered treatment, a different copay program would be needed to provide copay support for pharmacy-filled prescriptions.
- 7. Is there a maximum amount the CIMZIA Copay Savings Program will cover per injection? There is currently no limit per injection.[†] There is a \$0 copay per injection.
- 8. Does the program stipulate a minimum number of days between injections? No. The program does not have a frequency restriction; however, insurance providers may have separate limitations that could affect frequency.
- 9. How long after a date of service can I submit a claim for reimbursement?

 All reimbursement requests must be submitted within 180 days (6 months) of the date of service. Reimbursement requests for CIMZIA administration not received within the 180-day limit will be rejected.

- 10. Is there a patient assistance program (PAP) for patients who cannot afford this medication? Yes. There is a PAP program for CIMZIA. Please call CIMplicity® at 1-866-4-CIMZIA (1-866-424-6942). Select option 2, and a case manager will be happy to assist you.
- 11. What do I do if a patient has experienced an adverse event or has a product complaint? For adverse events, medical information, or product complaints, call 1-866-4-CIMZIA (1-866-424-6942) and select option 4.
- 12. Who is eligible for the CIMZIA Copay Savings Program? The CIMZIA Copay Savings Program is provided as a service of UCB for commercially insured patients and is intended to support the appropriate use of CIMZIA. Cash-paying and public payer funded patients are not eligible for the CIMZIA Copay Savings Program. The CIMplicity program may be amended or canceled at any time without notice. Some program and eligibility restrictions may apply.[‡]

CIMZIA Copay Savings Program information

Program website:

ioa.cimziasavingsprogram.com

Copay Support Phone Line:

For questions, please call 1-877-705-4119 toll-free, Monday through Friday from 8:00 AM – 8:00 PM ET

Contact your Field Reimbursement Manager for more information.

Please see additional Important Safety Information on back cover and full Prescribing information provided by the UCB representative, and visit www.CIMZIAhcp.com.

Visit our website:

ioa.cimziasavingsprogram.com





^{*}Clean claim: all information was provided accurately with no questions on submission items.

[†] Subject to change.

[‡] Eligibility: Available to individuals with commercial prescription insurance coverage for CIMZIA. Not valid for prescriptions that are reimbursed, in whole or in part, under Medicare (including Medicare Part D), Medicaid, similar federal- or state-funded programs (including any state prescription drug assistance programs and the Government Health Insurance Plan available in Puerto Rico), or where otherwise prohibited by law. Product dispensed pursuant to program rules and federal and state laws. Claims should not be submitted to any public payer (ie, Medicare, Medicaid, Medigap, TRICARE, VA, and DoD) for reimbursement. The parties reserve the right to amend or end this program at any time without notice.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

CIMZIA is contraindicated in patients with a history of hypersensitivity reaction to certolizumab pegol or to any of the excipients. Reactions have included angioedema, anaphylaxis, serum sickness, and urticaria.

SERIOUS INFECTIONS

Patients treated with CIMZIA are at increased risk for developing serious infections that may lead to hospitalization or death. Most patients who developed these infections were taking concomitant immunosuppressants such as methotrexate or corticosteroids.

Discontinue CIMZIA if a patient develops a serious infection or sepsis.

Reported infections include:

- Active tuberculosis (TB), including reactivation of latent TB. Patients
 with TB have frequently presented with disseminated or extrapulmonary
 disease. Test patients for latent TB before CIMZIA use and during therapy.
 Initiate treatment for latent TB prior to CIMZIA use.
- Invasive fungal infections, including histoplasmosis, coccidioidomycosis, candidiasis, aspergillosis, blastomycosis, and pneumocystosis. Patients with histoplasmosis or other invasive fungal infections may present with disseminated, rather than localized, disease. Antigen and antibody testing for histoplasmosis may be negative in some patients with active infection. Consider empiric anti-fungal therapy in patients at risk for invasive fungal infections who develop severe systemic illness.
- Bacterial, viral, and other infections due to opportunistic pathogens, including Legionella and Listeria.

Carefully consider the risks and benefits of treatment with CIMZIA prior to initiating therapy in the following patients: with chronic or recurrent infection; who have been exposed to TB; with a history of opportunistic infection; who resided in or traveled in regions where mycoses are endemic; with underlying conditions that may predispose them to infection. Monitor patients closely for the development of signs and symptoms of infection during and after treatment with CIMZIA, including the possible development of TB in patients who tested negative for latent TB infection prior to initiating therapy.

- Do not start CIMZIA during an active infection, including localized infections.
- Patients older than 65 years, patients with co-morbid conditions, and/or patients taking concomitant immunosuppressants may be at greater risk of infection.
- If an infection develops, monitor carefully and initiate appropriate therapy.

MALIGNANCY

Lymphoma and other malignancies, some fatal, have been reported in children and adolescent patients treated with TNF blockers, of which CIMZIA is a member. CIMZIA is not indicated for use in pediatric patients.

- Consider the risks and benefits of CIMZIA treatment prior to initiating or continuing therapy in a patient with known malianancy.
- In clinical trials, more cases of malignancies were observed among CIMZIA-treated patients compared to control patients.
- In CIMZIA clinical trials, there was an approximately 2-fold higher rate of lymphoma than
 expected in the general U.S. population. Patients with rheumatoid arthritis, particularly those
 with highly active disease, are at a higher risk of lymphoma than the general population.
- Malignancies, some fatal, have been reported among children, adolescents, and young
 adults being treated with TNF blockers. Approximately half of the cases were lymphoma,
 while the rest were other types of malignancies, including rare types associated with
 immunosuppression and malignancies not usually seen in this patient population.

- Postmarketing cases of hepatosplenic T-cell lymphoma (HSTCL), a rare type of T-cell lymphoma, have been reported in patients treated with TNF blockers, including CIMZIA. These cases have had a very aggressive disease course and have been fatal. The majority of reported TNF blocker cases have occurred in patients with Crohn's disease or ulcerative colitis, and the majority were in adolescent and young adult males. Almost all of these patients had received treatment with azathioprine or 6-mercaptopurine concomitantly with a TNF blocker at or prior to diagnosis. Carefully assess the risks and benefits of treating with CIMZIA in these patient types.
- Cases of acute and chronic leukemia were reported with TNF blocker use.

HEART FAILURE

 Worsening and new onset congestive heart failure (CHF) have been reported with TNF blockers. Exercise caution and monitor carefully.

HYPERSENSITIVITY

 Angioedema, anaphylaxis, dyspnea, hypotension, rash, serum sickness, and urticaria have been reported following CIMZIA administration. If a serious allergic reaction occurs, stop CIMZIA and institute appropriate therapy. The needle shield inside the removable cap of the CIMZIA prefilled syringe contains a derivative of natural rubber latex which may cause an allergic reaction in individuals sensitive to latex.

HEPATITIS B VIRUS REACTIVATION

- Use of TNF blockers, including CIMZIA, may increase the risk of reactivation of hepatitis B virus (HBV) in patients who are chronic carriers. Some cases have been fatal.
- Test patients for HBV infection before initiating treatment with CIMZIA.
- Exercise caution in patients who are carriers of HBV and monitor them before and during CIMZIA treatment.
- Discontinue CIMZIA and begin antiviral therapy in patients who develop HBV reactivation.
 Exercise caution when resuming CIMZIA after HBV treatment.

NEUROLOGIC REACTIONS

 TNF blockers, including CIMZIA, have been associated with rare cases of new onset or exacerbation of central nervous system and peripheral demyelinating diseases, including multiple sclerosis, seizure disorder, optic neuritis, peripheral neuropathy, and Guillain-Barré syndrome.

HEMATOLOGIC REACTIONS

- Rare reports of pancytopenia, including aplastic anemia, have been reported with TNF blockers. Medically significant cytopenia has been infrequently reported with CIMZIA.
- Consider stopping CIMZIA if significant hematologic abnormalities occur.

DRUG INTERACTIONS

• Do not use CIMZIA in combination with other biological DMARDS.

AUTOIMMUNITY

 Treatment with CIMZIA may result in the formation of autoantibodies and, rarely, in development of a lupus-like syndrome. Discontinue treatment if symptoms of a lupus-like syndrome develop.

IMMUNIZATIONS

• Patients on CIMZIA should not receive live or live-attenuated vaccines.

ADVERSE REACTIONS

• The most common adverse reactions in CIMZIA clinical trials (≥8%) were upper respiratory infections (18%), rash (9%), and urinary tract infections (8%).

Please see full Prescribing information provided by the UCB representative and visit www.CIMZIAhcp.com.





