ROLVEDON®

FIRST-CYCLE PATIENT SUPPORT (HOSPITAL OUTPATIENT SETTINGS ONLY)

New Patients Can Receive Their First Dose of ROLVEDON Free of Charge

No income requirement, regardless of insurance coverage*.

- Limited to ONE dose per patient
- Patient must be new to ROLVEDON®
- Patient must be a US resident with a legal US mailing address
- Patient's diagnosis is consistent with the FDA-approved indication for ROLVEDON
- Patient is enrolled in ACCESS4Me Patient Support Program
- ROLVEDON is administered in hospital outpatient settings only

Product Replacement

Designed so you can utilize product on hand without waiting for patient-specific shipments

- Select "First-Cycle Patient Support" when enrolling the patient in ACCESS4Me®
- Enrollment form must be received prior to the date of injection
- ACCESS4Me will conduct a benefits investigation, communicate the results to your office, and confirm eligibility for the patient's free trial
- Once approved, simply utilize ROLVEDON from your existing supply and submit for a free replacement unit (additional form required)
- Replacement product is shipped directly to the facility address where the product was administered
- Product replacement requests need to be submitted by end of month after treatment

		m			
for the ACCISSANe* (insign Dutpatient Settings Critis), or For complete program term and only available after proc	r Program (BP) (DRI) the Patent Assista s and conditions, ple but has been admin	age visit eww.ACCESS#ble.com. stered	ert Suggest Progra	in FOYD Houses	
Compliente, sign, and fax but	1 pages to ACCESS	Mirat 1-803-281-7416.			
Prescriber Informati Let Name	ion	First Name			
Title		State Liverse Number			
Facility Name:		Facility Tax 10 #			
Shipping Address		7,000			
Ohy.		State		Zip Code	
Office Contact Name:		Contact Title Folia			
Contact Phone Number:		Contact Fax Number			
Patient Information			_		
		ADD/DON (efspepastrn-unit) rijecton		DIF DROS DAY	
		ADD/DON (efspepaster-and) ryectors		DIF DIFFS DIN	
		RODYDON (efspegaster-end) rycton		DIP DIPPS DIM	
		ADD/EDDN (efspepador-end) rection		DIP DIPPS DIM	

*Eligibility subject to all terms and conditions of ACCESS4Me and the First-Cycle Patient Support Program. Please visit ACCESS4Me.com for complete terms and conditions including limitations and availability.



Visit ACCESS4Me.com for online enrollment and access to tools, forms, and resources



Open your camera app and point it here to visit our website





ACCESS4ME® OFFERS SUPPORT FOR ELIGIBLE PATIENTS

Our dedicated Reimbursement Specialists will determine patient eligibility and help investigate options

First-Cycle Patient Support Program (Hospital Outpatient Settings Only)

— Eligible new patients can receive their first dose of ROLVEDON® free of charge

Bridge Program (Office Settings Only)

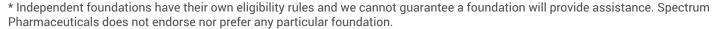
- Eligible new patients with commercial insurance can receive ROLVEDON free of charge
- ROLVEDON Commercial Copay Assistance Program
 - \$0 out-of-pocket cost for eligible patients with commercial insurance

ROLVEDON Patient Assistance Program

- Patients who are uninsured or underinsured may be eligible to receive ROLVEDON at no cost

Independent Charitable Foundation Information

— ACCESS4Me® can provide information about financial assistance from independent charitable foundations*



Utilization limits apply. Contact ACCESS4Me or your Field Reimbursement Manager for complete terms and conditions or visit ACCESS4Me.com.

Help is just a call or click away!



Communicate directly with a Field Reimbursement Manager or Reimbursement Specialist at

866-582-2737 (866-58-CARES)

Monday—Friday | 8:00 AM—8:00 PM ET



Visit **ACCESS4Me.com** for online enrollment and access to tools, forms, and resources





Open your camera app and point it here to visit our website





