Pay as Little as $0 for FASENRA

Cost should not get in the way of starting and staying on your treatment. If you have commercial insurance,* you may be able to get FASENRA for as little as $0.†

See page 2 for more details on how to enroll in the FASENRA Savings Program.

To enroll in the FASENRA Savings Program:
• Visit www.Fasenrasignup.com
• Call AstraZeneca FASENRA 360 at 1-833-360-HELP (4357), or
• Ask your doctor or your doctor’s office staff to enroll you

If you’re without prescription coverage or can’t afford your medication, AstraZeneca may be able to help. Please visit https://www.astrazeneca-us.com/medicines/Affordability.html for more information.

*Commercial health insurance, or private health insurance, is any insurance that is not paid for by the government. Examples of government-paid insurance are Medicare and Medicaid.
†Patients with commercial health insurance receive up to $13,000 per calendar year in assistance for out-of-pocket expenses. See back cover for full Eligibility and Terms of Use.
Act Now to Pay as Little as $0 for Your FASENRA

If eligible, you can save on your co-pay costs by enrolling in the FASENRA Savings Program.

Enrolling is easy:

- Visit www.Fasenrasignup.com
- Call AstraZeneca FASENRA 360 at 1-833-360-HELP (4357)
- Ask your doctor or your doctor’s office staff to enroll you

Additionally, ask your specialty pharmacy to make sure you’re enrolled in co-pay savings.
If you are denied coverage to FASENRA, we may be able to help

FASENRA can provide up to two years of free product to eligible patients who were denied coverage by their insurance company. Eligibility requirements include*:

- New to FASENRA
- Prescribed FASENRA for an FDA approved use

Ask your doctor to contact AstraZeneca if you get a denial letter from your insurance company. Your doctor will have to send information to AstraZeneca to qualify you for this program.

To learn more about FASENRA 360:

- Call 1-833-360-HELP (4357) Monday–Friday, 8:00 AM to 8:00 PM ET

* Full details included in terms of use section on following page

For more information about FASENRA, visit www.FASENRA.com.
Eligibility
You may be eligible for this offer if you are insured by commercial insurance.

Patients who are enrolled in a state or federally funded prescription insurance program are not eligible for this offer. This includes patients enrolled in Medicare Part B, Medicare Part D, Medicaid, Medigap, Veterans Affairs (VA), Department of Defense (DoD) programs or TriCare, and patients who are Medicare eligible and enrolled in an employer-sponsored group waiver health plan or government-subsidized prescription drug benefit program for retirees.

If you are enrolled in a state or federally funded prescription insurance program, you may not use this program even if you elect to be processed as an uninsured (cash-paying) patient.

This offer is not insurance and is restricted to residents of the United States and Puerto Rico.

Terms of Use
Eligible commercially insured patients with a valid prescription for FASENRA who enroll in this program may pay as little as $0 per administration of FASENRA dependent upon patient’s prescription coverage of FASENRA.

If FASENRA is covered by your health plan:
• You may receive up to $13,000 per calendar year in assistance for out-of-pocket expenses

If FASENRA is not covered by your health plan:
• You may receive up to 24 months of FASENRA from the date of the initial prescription
• In order to receive the benefits of the FASENRA Denied Patient Savings Program
  – A Prior Authorization (PA) Denial and PA Appeal Denial by your health plan are required to be eligible for this program
  – FASENRA must be prescribed to a new patient for a Food and Drug Administration (FDA)-approved use to be eligible for this program
• This program is only offered through approved specialty pharmacies

The out-of-pocket costs covered by the program can include the cost of the product itself and the cost of injection administration of the product (maximum of $100 per injection administration).*,†

Offer is invalid for claims or transactions more than 180 days from the date of service.

Non-transferable, limited to one person, cannot be combined with any other offer. Void where prohibited by law, taxed, or restricted. Patients, pharmacists, and prescribers cannot seek reimbursement from health insurance or any third party for any part of the benefit received by the patient through this offer.

AstraZeneca reserves the right to rescind, revoke, or amend this offer, eligibility requirements, and terms of use at any time without notice. This offer is not conditioned on any past, present, or future purchase, including refills. Offer must be presented along with a valid prescription for FASENRA at the time of purchase.

Program covers the cost of the drug and administration, but does not cover the costs for office visits or any other associated costs.

Other restrictions may apply. Patient must be enrolled in the program before use. If you have any questions regarding the offer, please call 1-833-360-HELP (4357).

BY USING THIS PROGRAM, YOU AND YOUR PHARMACIST AND/OR PHYSICIAN UNDERSTAND AND AGREE TO COMPLY WITH THESE ELIGIBILITY REQUIREMENTS AND TERMS OF USE.

*Patients are responsible for any costs associated with the administration above the $100 per injection administration assistance provided by the program.
†Patients who are residents of Massachusetts, Michigan, Minnesota, or Rhode Island are not eligible for injection administration assistance.

FASENRA is registered trademark and AstraZeneca FASENRA 360 is trademark of the AstraZeneca group of companies.