# - HELPFUL RESOURCES -FOR YOU AND YOUR PATIENTS

at OtezlaPro.com



## OtezlaPro.com resources

#### On the homepage, click on the "Resources" drop-down menu to find:

- Formulary Coverage Page: A list of plans that cover Otezla® (apremilast), including their step-edit status
- Prescribing Otezla Page: Useful steps to help patients get started on treatment
- Co-pay and Patient Support Page: Find patient support information, which is also detailed on the back of this piece
- Resource Center Page: A hub for downloadable resources. Below are the most frequently requested resources:

#### **Prescribing Information**



Otezla Prescribing Information

#### Patient Assistance Application

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Download this form to help eligible patients receive Otezla at no cost. This form is also available in Spanish

#### **START Form**



Use this form to start prescribing Otezla to your patients

#### Letter of Medical Necessity

Otezla <sup>®</sup> (apremilas	t) Letter Of Medical Necessity
Medical director	Patient name
Insurance company	Palky number
Address	Date of birth
Physician's Request for Review:	
Peer-to-peer review requested	(same or like speciality)
Other	
Dear	
arr writing to provide additional inf	prmation to support my request for the treatment of
Discreels/CD-10-CM Code:	with Olazia <sup>®</sup> (apremilast) for Primary
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unspecified)	%BSA Affected
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Life Sw (Unter papratic antiropat	MUS.2 (awngat's Desease)
in brief, treating	with Otecia is medically appropriate
and necessary and should be coven medical history, prognosis and treat	od and reimbursed. Below, this letter outlines the
reacter meanly, programs and mean	
Summary of Patient History:	ert and discretion when providing a diagnosis and
note: Exercise your medical judgme characterization of the patient's med	int and discresson when providing a diagnosis and ical condition.1
Patient's history, diagnosis, and curr	ent constion:

Request a Letter of Medical Necessity directly from the Resource Center to help your patients get started on Otezla

#### **START Form Guide**



Helpful tips to prevent delays in the prescription ordering process for your patients

Additional resources are available on OtezlaPro.com to help your patients start and stay on treatment







## Ways Otezla can support your patients



Otezla

RxBIN: 610524 RxGRP: XXXXXXXX

ID: XXXXXXXXXXX Note: You must share the information on this card with your specialty pharm

ee back of card for full terms

## Otezla SupportPlus™

# This support network includes resources for you and your patients:

- \$0 co-pay enrollment and follow-up\*
- 24/7 access to specially trained nurses
- Live insurance support
- Updates on prescription status
- Shipment of free Bridge to maintenance supply during potential reimbursement delays for commercially insured patients
- Reimbursement support

### Get Your Patients 3 for Freet

The Otezla Bridge Program offers your commercially insured patients up to **3 years of Otezla for \$0.** 



# **Otezla**<sup>®</sup>

BRIDGE PROGRAM

\$()

card

co-pay

for eligible

patients\*

#### For more information, call Otezla SupportPlus™ at 1-844-4OTEZLA

\*Certain restrictions apply; eligibility not based on income, must be 18 years or older. This offer is not valid for persons eligible for reimbursement of this product, in whole or in part under Medicaid, Medicare, or similar state or federal programs. Offer not valid for cash-paying patients. People who are not eligible can call 1-844-40TEZLA to discuss other financial assistance opportunities. Otezla co-pay cards are available online or from an Amgen representative. 'To receive a free Bridge supply of Otezla, patients must have an on-label diagnosis and be denied or waiting for coverage.





