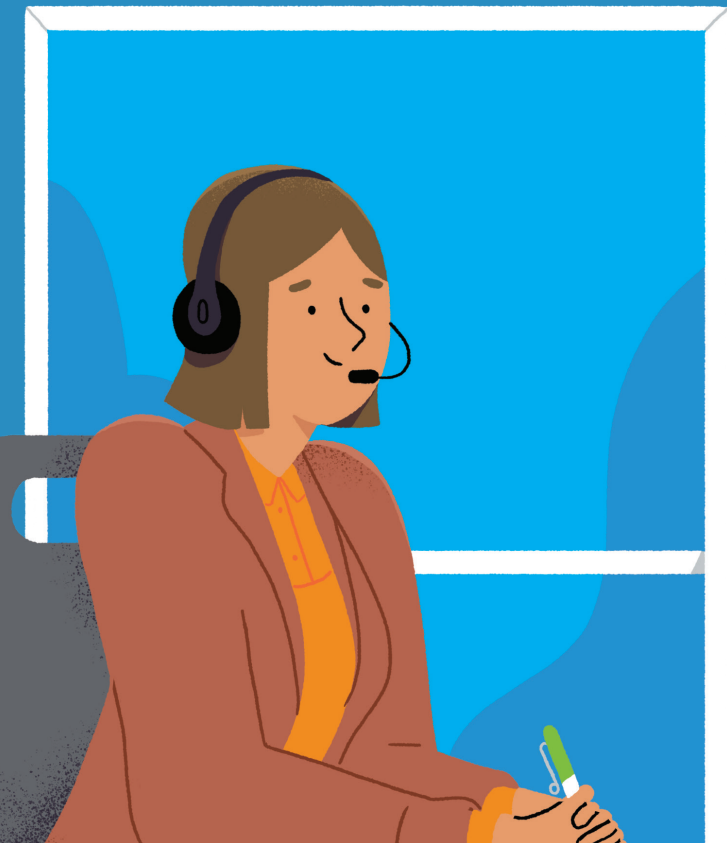


Pfizer Oncology together™

Accessing your Pfizer Oncology medicine. Together.

A step-by-step guide to help you navigate healthcare coverage and financial support resources



Understanding coverage and support options. Together.

At Pfizer Oncology Together, we realize that navigating healthcare coverage can be overwhelming. That's why we're here to help you understand your coverage and the financial support resources that may be available to you. Because when it comes to support, we're in this together.

This brochure includes the following sections:

- [Navigating insurance coverage](#)
- [Finding financial assistance](#)
- [Pfizer Patient Assistance Program](#)
- [Finding resources for your day-to-day](#)



Navigating Insurance Coverage

Most insurance providers keep a list of medicines that may be available in their plans. If you need help understanding what your plan covers, Pfizer Oncology Together can contact your insurance provider to find out about your coverage and **out-of-pocket costs** for your prescribed Pfizer Oncology medicine. Out-of-pocket costs are expenses that are not paid by your insurance plan. They could include a deductible, co-pay, or coinsurance.



DEDUCTIBLE

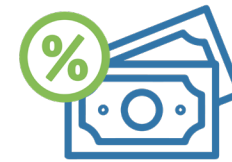
The **annual amount** you must pay toward your healthcare costs before health plan benefits take effect.



CO-PAYMENT (CO-PAY)

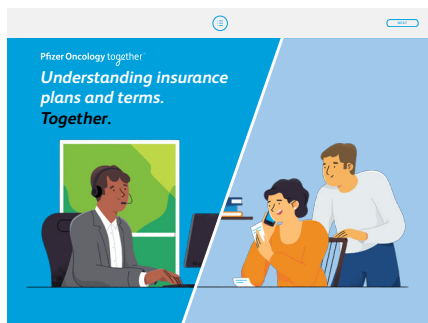
A **preset dollar amount** you're required to pay for a prescription or physician service, usually at the time of receipt.

Co-pays may be applied whether you've met a deductible or not.



COINSURANCE

The **percentage of the cost** you are responsible to pay for each prescription or healthcare service you receive. The remainder is paid by your insurance plan. If your plan has a deductible, coinsurance takes effect after the deductible is met.



Learn more about insurance plans and the terms they use by downloading [a helpful guide](#).

Finding Financial Assistance

If needed, we'll help you find potential financial assistance options for your prescribed Pfizer Oncology medicine, regardless of your insurance coverage.

Commercially Insured

Resources for eligible patients with commercial, private, employer, or state health insurance marketplace coverage:



CO-PAY ASSISTANCE

Eligible, commercially insured patients may pay as little as \$0 per month for oral medicines or per treatment for certain injectable medicines through our co-pay savings program. Limits, terms, and conditions apply.*

*Patients are not eligible for these programs if they are enrolled in a state or federally funded insurance program, including but not limited to Medicare, Medicaid, TRICARE, Veterans Affairs health care, a state prescription drug assistance program, or the Government Health Insurance Plan available in Puerto Rico. **This offer is not health insurance.** No membership fees apply. Pfizer reserves the right to rescind, revoke, or amend this offer without notice.

For oral products: Patients may receive up to \$25,000 per product in savings annually. **The offer will be accepted only at participating pharmacies.** For full Terms and Conditions, please see PfizerOncologyTogether.com/terms. For any questions, please call 1-877-744-5675, visit PfizerOncologyTogether.com/terms or write: Pfizer Oncology Together Co-Pay Savings Program, 2250 Perimeter Park Drive, Suite 300, Morrisville, NC 27560.

For injectable products: Patients may receive between \$10,000 and \$25,000 in savings annually. For full Terms and Conditions, please see pfizercopay.com/TC. For any questions, please call 1-877-744-5675, or write: Pfizer Oncology Together Co-Pay Savings Program for Injectables, P.O. Box 220366, Charlotte, NC 28222.

Commercially Insured (cont'd)

CHECKING ELIGIBILITY AND SIGNING UP FOR CO-PAY SAVINGS

For **oral** medicines, you can find out if you're eligible and sign up two ways.

Online:

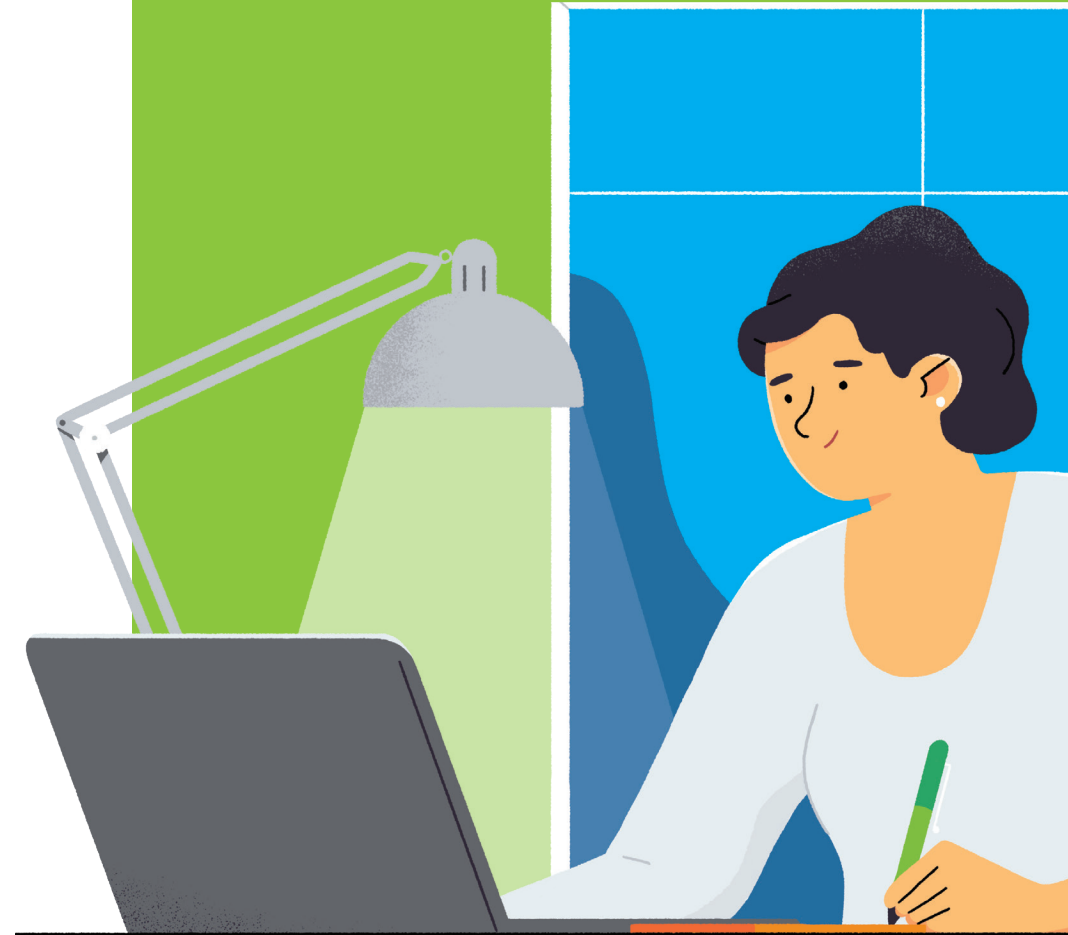
1. Go to PfizerOncologyTogether.com/patient/signup
2. Click on Pfizer Oncology Together Co-Pay Savings Programs
3. Complete the form

Phone:

- Call us at **1-877-744-5675** (Monday-Friday, 8 AM-8 PM ET)

Once you've signed up for the Co-Pay Savings Program, you can use your card right away. Save the numbers on your card, since you'll need to share them with your specialty pharmacy.

For **injectable** medicines, ask your healthcare provider to help you enroll in the Pfizer Oncology Together Co-Pay Savings Program for Injectables. Visit PfizerCopay.com or call us at the number above.



You may be eligible for free medication from the Pfizer Patient Assistance Program.*

SEE MORE INFORMATION ON [PAGE 8](#)
or call **1-877-744-5675**.

*The Pfizer Patient Assistance Program is a joint program of Pfizer Inc. and the Pfizer Patient Assistance Foundation™. Free medicines from Pfizer are provided through the Pfizer Patient Assistance Foundation™. The Pfizer Patient Assistance Foundation™ is a separate legal entity from Pfizer Inc. with distinct legal restrictions.

Finding Financial Assistance (cont'd)

Medicare/Government Insured

We can help identify potential resources for patients with Medicare/Medicare Part D, Medicaid, and other government insurance plans who express a financial need and may be eligible.

MEDICARE EXTRA HELP

We can assist patients with searching for potential financial support from alternate funding resources, which may include financial assistance through Medicare Part D Extra Help.

FREE MEDICINE

If support from alternate funding resources or Medicare Extra Help is not available, Pfizer Oncology Together will see if you're eligible for the Pfizer Patient Assistance Program,* which can provide prescribed Pfizer Oncology medications for free.

*The Pfizer Patient Assistance Program is a joint program of Pfizer Inc. and the Pfizer Patient Assistance Foundation™. Free medicines from Pfizer are provided through the Pfizer Patient Assistance Foundation™. The Pfizer Patient Assistance Foundation™ is a separate legal entity from Pfizer Inc. with distinct legal restrictions.



Finding Financial Assistance (cont'd)

If You Do Not Have Insurance

We can help identify potential resources for patients without any form of healthcare coverage who may be eligible.

HELP FINDING COVERAGE

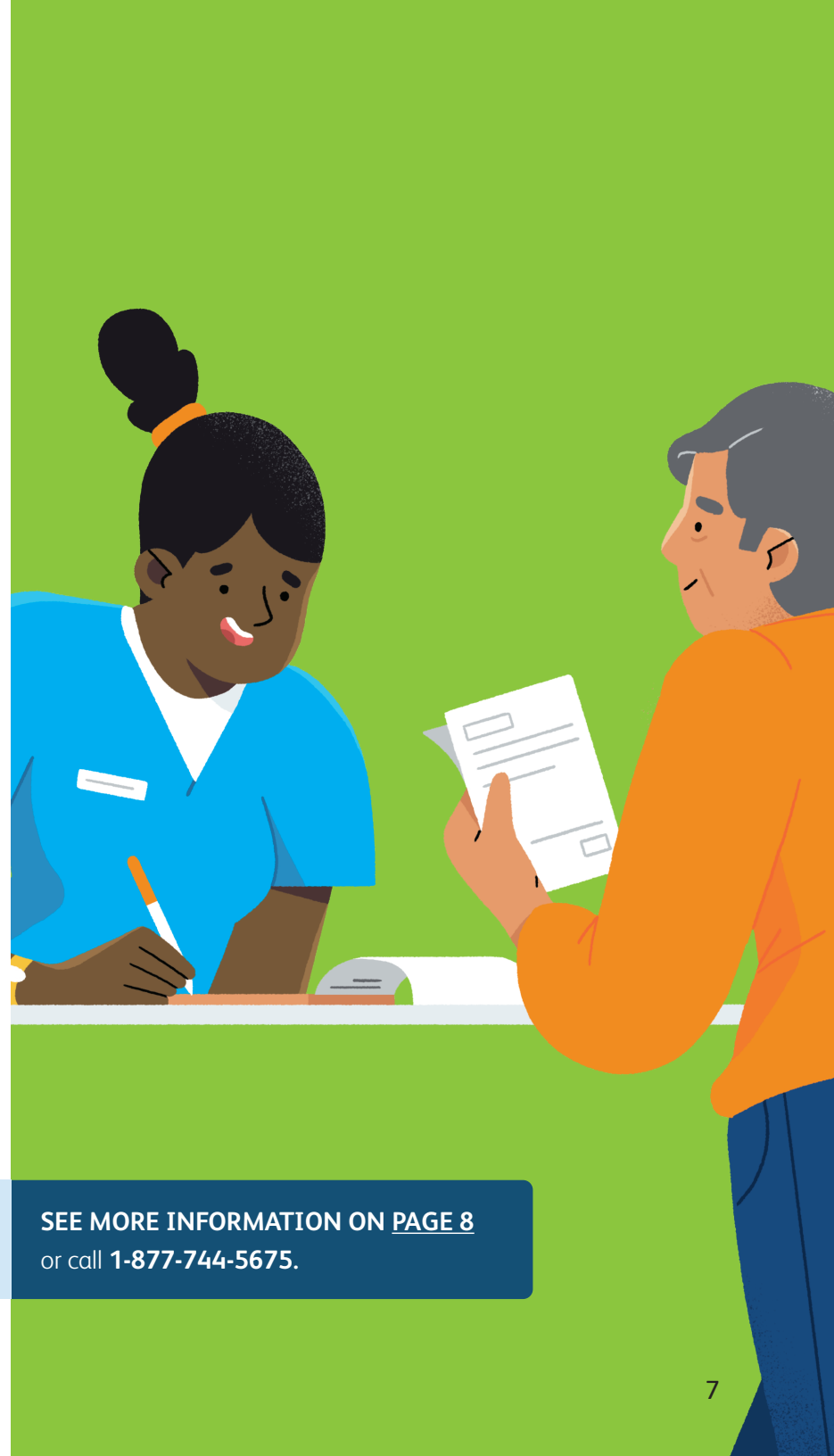
We can check your eligibility for Medicaid and help you understand how to apply.

FREE MEDICINE OR SAVINGS

Patients who do not qualify for Medicaid may receive free medication through the Pfizer Patient Assistance Program*. Patients must be eligible and reapply as needed.

*The Pfizer Patient Assistance Program is a joint program of Pfizer Inc. and the Pfizer Patient Assistance Foundation™. Free medicines from Pfizer are provided through the Pfizer Patient Assistance Foundation™. The Pfizer Patient Assistance Foundation™ is a separate legal entity from Pfizer Inc. with distinct legal restrictions.

You may be eligible for free medication from the Pfizer Patient Assistance Program.*



SEE MORE INFORMATION ON [PAGE 8](#)
or call **1-877-744-5675**.

Pfizer Patient Assistance Program

Work with your healthcare team to complete an enrollment form and start the process of applying for the Pfizer Patient Assistance Program.*

You can opt in to Electronic Income Verification or provide proof of income, such as the prior year's tax return (preferred), your most current W2 form, or the 3 most recent paycheck stubs for all household members.†

To qualify for free medicine‡ from the Pfizer Patient Assistance Program, you must meet certain criteria:

- Have a valid prescription for the Pfizer medication for an FDA-approved indication and the physician has attested to this on the enrollment form
- Have an annual household income at or below 500% of the Federal Poverty Level
- Be 18 years of age or older
- Reside in the U.S. or a U.S. territory
- Be treated by a healthcare provider licensed in the U.S. or a U.S. territory
- Meet one of the following:
 - Have no insurance coverage
 - Have government insurance, understand co-pay requirements as a result of the completion of a Benefit Investigation/Pharmacy Claim, and are unable to afford their insurer required co-pay
 - Have been denied coverage by your government insurer for a Pfizer medication (after at least one unsuccessful appeal to your insurer)

There may be additional requirements for injectable medicines.

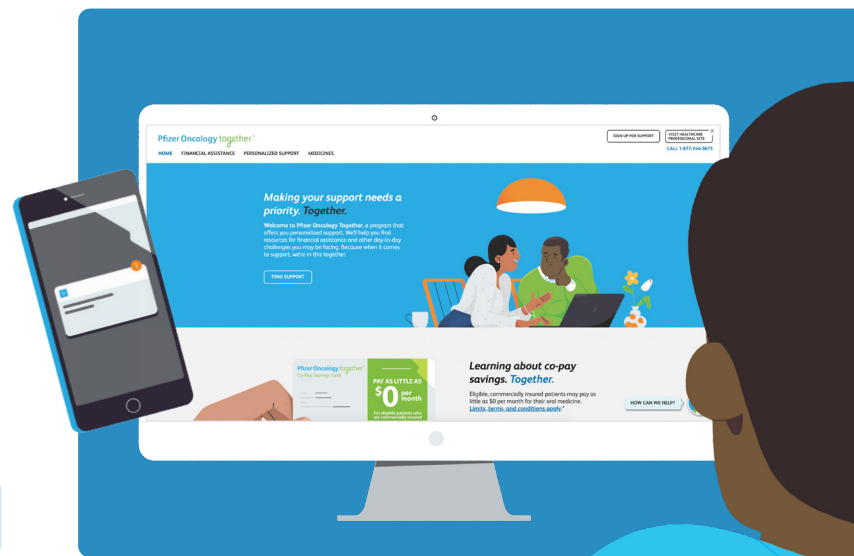
Commercially insured patients are not eligible to enroll in the Pfizer Patient Assistance Program.

If you are accepted into the Pfizer Patient Assistance Program, Pfizer will send your oral medicine directly to you after confirming your shipping information.

*The Pfizer Patient Assistance Program is a joint program of Pfizer Inc. and the Pfizer Patient Assistance Foundation™. Free medicines from Pfizer are provided through the Pfizer Patient Assistance Foundation™. The Pfizer Patient Assistance Foundation™ is a separate legal entity from Pfizer Inc. with distinct legal restrictions.

†Pfizer Oncology Together reserves the right to request income documentation if the Electronic Income Verification is deemed inconclusive/requires further information.

‡Eligibility criteria are subject to change at any time.



Pfizer Patient Assistance Program (cont'd)

OPTING IN FOR REFILL TEXT REMINDERS

Patients prescribed Pfizer Oncology oral medications who are enrolled in the Pfizer Patient Assistance Program can opt in to receive refill reminders and shipment tracking information by text message.

*By opting in for refill reminders and shipping texts, you can avoid waiting on the phone every month to get your prescription refilled.

There are two ways for patients to opt in:

1. Check the box on page 3 of the Pfizer Oncology Together Enrollment Form and provide a mobile number, or
2. Call **1-877-744-5675** to speak with a live agent and request to opt in for refill text reminders.

If you choose not to opt in for refill text reminders, you can call **1-877-744-5675** to refill your prescription 7-10 days prior to running out of medication. You can:

- Leave a message on the automated refill line and confirm your address or
- Wait to speak to a live agent for refill assistance

RE-ENROLLMENT TIME

Together with your healthcare provider, you'll need to complete a **new** enrollment form each year for the Pfizer Patient Assistance Program* if assistance is still needed. Be sure to opt in to Electronic Income Verification or include updated proof of income.

When you reapply, we will:

- Search for available alternate sources of coverage
- Check to see if you're still eligible
- Notify you and your healthcare provider

Did your insurance change?

Let us know at **1-877-744-5675**. We can help you understand what your new insurance covers.

*The Pfizer Patient Assistance Program is a joint program of Pfizer Inc. and the Pfizer Patient Assistance Foundation™ Free medicines from Pfizer are provided through the Pfizer Patient Assistance Foundation™. The Pfizer Patient Assistance Foundation™ is a separate legal entity from Pfizer Inc. with distinct legal restrictions.

Finding Resources for Your Day-to-Day

At Pfizer Oncology Together, we're here to help with more than access to our medicines. Our **Care Champions**, who have social work experience, can provide you with resources that may help with some of your day-to-day challenges during treatment.*

- Connections to emotional support resources such as diagnosis-specific support groups, an independent organization's helpline, and a free app to connect with loved ones
- Educational information about physical and mental health, nutrition, and your prescribed Pfizer Oncology medicine
- Connections to independent organizations that help eligible patients find free rides and lodging for treatment-related appointments
- Information to help you prepare for leaving or returning to work

TO ENROLL IN OUR CARE CHAMPION PROGRAM

- Complete the **Personalized Patient Support** opt-in section of the enrollment form with your healthcare provider, or
- Sign up at PfizerOncologyTogether.com/signup, or
- Call **1-877-744-5675**

*Some services are provided through third-party organizations that operate independently and are not controlled by Pfizer. Availability of services and eligibility requirements are determined solely by these organizations.

