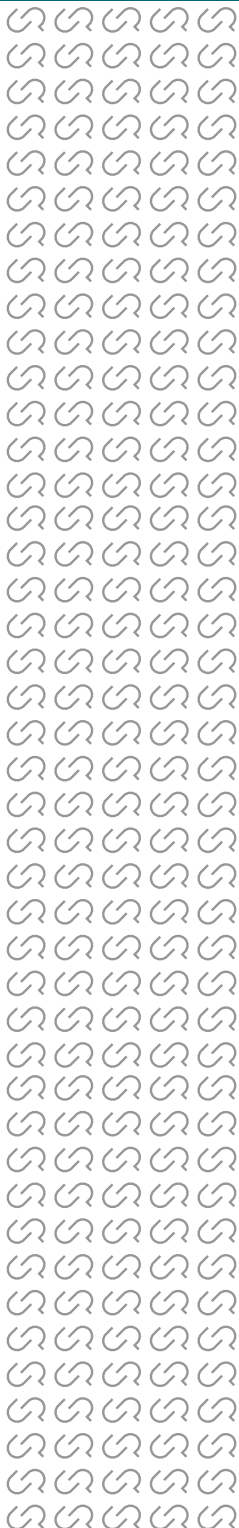




# How to help patients stay on KISQALI during insurance changes



## A change in insurance doesn't have to mean a change in treatment

- ▶ Health plans can remove a medication from their formulary or preferred drug list for nonmedical reasons unrelated to clinical considerations
- ▶ Formulary changes can result in prescribers and patients switching medications, despite their success and satisfaction with their current treatment
- ▶ There are steps you can take to help patients keep access to prescribed treatment

## File a medical exception request

Novartis Patient Support can help your office navigate the medical exception process. Coverage support may also be available through other programs including the Bridge Program as noted below:

### Insurance Support From Novartis Patient Support

Once you've enrolled your patients in Novartis Patient Support, we'll provide you with information for your consideration that may be of assistance to your patients.



#### ENROLL PATIENTS VIA FAX

Go to [www.kisqali-hcp.com](http://www.kisqali-hcp.com), download the Start Form, complete all required fields, sign, and then submit via fax to Novartis Patient Support at 800-414-3518.

### Coverage Support

#### QUESTIONS?

**Phone:** [866-433-8000](tel:866-433-8000)  
(8:00 AM-8:00 PM ET  
Monday through Friday)

#### Resources:

To download go to:  
[www.kisqali-hcp.com](http://www.kisqali-hcp.com)

## Additional Support

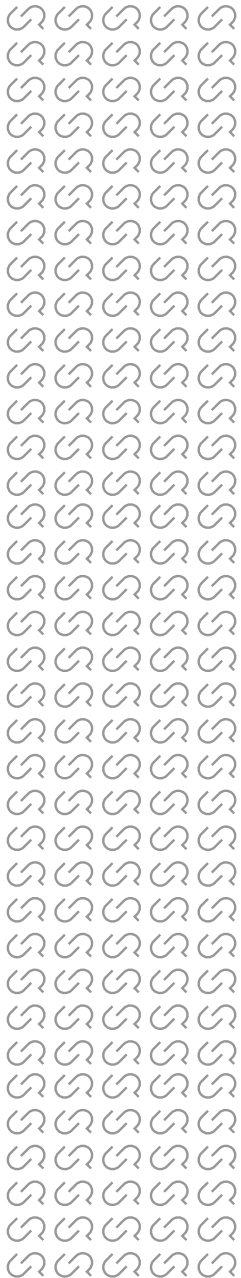
If prescription coverage isn't initially approved, eligible\* commercial patients can receive up to 5 months of KISQALI through the Bridge Program† while coverage is pursued.

\*Certain payers have carve-outs that restrict utilization of manufacturer support program.

†**The Bridge Program applies to KISQALI and the KISQALI FEMARA Co-Pack only.** Eligible patients must have private insurance, a valid prescription for KISQALI or the KISQALI FEMARA Co-Pack, and a denial of insurance coverage based on a prior authorization requirement. Program requires the submission of a prior authorization and/or appeal of the coverage denial within the first 90 days of enrollment to remain eligible. Program provides KISQALI for free to eligible patients for up to 5 months, or until they receive insurance coverage approval, whichever occurs earlier. A valid prescription consistent with FDA-approved labeling is required. Program is not available to patients whose medications are reimbursed in whole or in part by Medicare, Medicaid, TRICARE, or any other federal or state program. Patients may be asked to reverify insurance coverage status during the course of the program. No purchase necessary. Program is not health insurance, nor is participation a guarantee of insurance coverage. Additional Limitations may apply. Novartis Pharmaceuticals Corporation reserves the right to rescind, revoke, or amend this Program without notice.



# How to help patients stay on KISQALI during insurance changes (continued)



## File a medical exception request

File a medical exception request with the patient's insurance company with the support of Novartis Patient Support if coverage is denied.

The following information may be helpful as you prepare a medical exception request:

- ▶ Patient's name, policy number, date of birth, and a copy of the notification letter from the plan
- ▶ Patient's history, diagnosis, and current condition
  - How has the patient responded to the therapy?
    - Are they currently controlled and stable?
  - How long have they been on KISQALI?
  - What is their current health status?
  - Description of the severity of the condition prior to treatment with KISQALI
  - Patient's level of satisfaction with KISQALI
- ▶ Your rationale for maintaining the patient on KISQALI. Consider including reasons such as:
  - Clinical support for KISQALI
  - Potential impact a nonmedical switch could have on the patient, office time, and resources
- ▶ Copies of relevant medical records
- ▶ List of prior medications and duration of their use, including dates and medical outcome
- ▶ Fax supporting documentation to the health plan

**For medical exception sample letter and additional resources, visit <https://www.kisqali-hcp.com/assets/kisqali-access-support-guide.pdf>.**

## Request an appeal

If a medical exception is denied, the health plan will provide a written explanation as to why it was denied and include information about how to request an appeal.

**We are here to help when you need us!**

## Questions?

Reach out to your KISQALI Associate Director, Access & Reimbursement (ADAR) or call Novartis Patient Support at **[866-433-8000](tel:866-433-8000)** Monday through Friday, 8:00 AM-8:00 PM ET, excluding holidays.