

Shire's CoPay Assistance Program Terms and Conditions

- This manufacturer coupon Program is not valid for prescriptions eligible to be reimbursed, in whole or in part, by Medicaid, Medicare (including Medicare Part D), Medigap, VA, DoD, TRICARE, or any other federal or state healthcare programs, including state prescription drug assistance programs, and does not apply where prohibited by the health insurance provider or by law, taxed or restricted.
- This Program provides a maximum total benefit of \$12,000 for eligible out-of-pocket costs and expires 12 months from date of activation. Eligible costs include deductible, copayment, and coinsurance costs for eligible Shire medication. Non-medication expenses, such as ancillary supplies or administration-related costs, are not eligible.
- To be eligible, patients must: 1) be starting or receiving treatment with (and have current prescription for) an eligible Shire medication with an ICD-10 diagnosis of for a diagnosis of mild, moderate, or severe hemophilia A or B, a hemophilia A or B inhibitor or von Willebrand disease, 2) have commercial insurance that covers medication costs for prescribed Shire medication and allows for CoPay assistance, and 3) meet any applicable age restrictions as indicated for Shire medication.
- Acceptance of this offer must be consistent with the Terms and Conditions provided by patient's health insurance provider.
- If your insurance situation changes, you must notify Shire's CoPay Assistance Program immediately at 1 (888) 229-8379.
- Offer limited to one card per person and may not be combined with any other coupon, discount, prescription savings card, rebate, free trial, patient assistance, or other offer. Copayment assistance under this Program is not transferable.
- This program is only valid for residents of the United States.
- Shire reserves the right to rescind, revoke or amend this Program at any time without notice.
- This is not health insurance.

Patient Instructions

By using this Program, you are certifying that:

- 1) You meet the eligibility criteria and have read and agree to the Terms and Conditions of this Program.
- 2) No claim for reimbursement of the out-of-pocket expense amount covered by this Program shall be submitted to any third party payer, whether public or private.
- 3) You are permitting your personal information, including name, address, phone number, email address, and information related to health insurance and treatment, to be shared with Shire and companies working with Shire for the purpose of administering this program; and
- 4) You will notify your health insurance provider or other third-party payer of the use of Shire's CoPay assistance if required to do so.
- 5) If your insurance situation changes, you must notify Shire's CoPay Assistance Program immediately at 1 (888) 229-8379.

For questions about this Program, patients and caregivers can call us at 1 (888) 229-8379 or visit Shire's CoPay Assistance Program online at www.hematologysupport.com.

Pharmacy Instructions

By submitting a claim for reimbursement pursuant to this Program, the SPP/Infusion Provider represents and warrants that:

- 1) It has read and agrees to the Terms and Conditions and it has dispensed a Shire medication to an eligible patient and in accordance with the Terms and Conditions of this Program and the accompanying prescription;
- 2) Its participation in this Program is consistent with all applicable laws and any obligations, including its contract with the applicable payer;
- 3) If the patient's insurance situation changes, it will notify Shire immediately by contacting Shire's CoPay Assistance Program at 1 (855) 229-7377.
- 4) It will report CoPay assistance received to payers if so required; and
- 5) The entire benefit amount received will go to eligible expenses and it will not retain any portion of the benefit as payment to it for administration or ineligible expenses.

For questions regarding processing, claim transmission, patient eligibility, or other issues, pharmacists can contact Shire's CoPay Assistance Program at 1 (855) 229-7377.