

Your voice. Your choice.



Oftentimes, when doctors prescribe certain medications, there is an approval process required by the insurance company before the prescription can be filled. However, you have the right to participate in that approval process. In fact, patients have more rights than they may realize.

You have the right to:

- ✓ Easy-to-understand information about your health plan's benefits and coverage
- ✓ Assistance if you speak a different language or have a physical or mental disability
- ✓ A choice of healthcare providers from your health plan who you feel can provide the care you need
- ✓ Coverage for pre-existing conditions
- ✓ Emergency services without waiting for authorization or receiving financial penalties if you get emergency care from a hospital outside your plan's network
- ✓ Designate a family member or other trusted person to legally make decisions on your behalf
- ✓ Keep your healthcare information and conversations private
- ✓ Ask for changes to your medical record when information is incorrect or incomplete
- ✓ Appeal a health plan decision. See Step 2 on next page

Health insurance policies purchased on or before March 23, 2010 may not include the rights listed above due to being grandfathered under the Affordable Care Act.

Not sure if your plan is grandfathered? Check your plan's materials, or check with your employer or your health plan's benefits administrator. Your insurer must notify you if you have a grandfathered plan. Find out more at Grandfathered Health Insurance Plans (<https://www.healthcare.gov/health-care-law-protections/grandfathered-plans/>).

Your road map to PRALUENT® (alirocumab)

As required by the insurance company, the approval process often involves reviewing a patient's health history. That can take time, which is why we created step-by-step instructions to help guide you through the entire process. Here is what you need to begin.

Step 1.

Make sure you know:

- ✓ Your insurance information
- ✓ Your pharmacy information (local or specialty)
- ✓ Your prescription information

When you are prescribed PRALUENT, your health plan may require a prior authorization (PA) form to confirm you meet certain conditions to get your prescription covered by your insurance. Each health plan has its own PA "test" that must be met for approval.

For help and support getting PRALUENT, enroll in our MyPRALUENT® Patient Support Program on our website, PRALUENT.com, or call 1-844-PRALUENT (1-844-772-5836) and press 1 to speak with a care specialist. Before you call, it is a good idea to download and fill out this worksheet. It will come in handy when you speak with a care specialist.

Step 2.

After you provide your doctor or pharmacy the medical information they request, your PA form will be submitted to your health plan provider.

If your insurance company rejects your doctor's request for PRALUENT, here's a "checklist" of things you can do:

- ✔ Talk to your doctor about submitting an appeal to the insurance company to reverse their decision*
- ✔ Call your health plan directly to discuss an appeal
- ✔ If your plan was purchased through your state's Health Insurance Marketplace, you can find help at [Healthcare.gov](https://www.healthcare.gov):
 - ✔ [Learn about the appeals process and download an appeal form](#)
 - ✔ [Get help filing an appeal](#)
- ✔ Find your state's Insurance Commissioner at National Association of Insurance Commissioners (www.naic.org/state_web_map.htm)[†]

*In large health plans from July 2015 to July 2016, over 35% of prescriptions that were at first denied were later approved during the appeals process.

[†]Be aware that a handful of states have laws (called "step therapy override legislation") that may help certain people get access to specialty medications like PRALUENT.

Step 3.

If PRALUENT has been approved, it will be sent either to your local pharmacy or to a specialty pharmacy. Be sure to answer your phone to receive their calls. Be aware that you may not recognize their number on caller ID.

Here are a few pointers to keep in mind:

- ✔ If the pharmacy calls you, make sure they have your correct home or delivery address, and find out when your PRALUENT will be delivered to you so you can be there to receive it
- ✔ The pharmacy may collect a copay from you and a credit card may be required
- ✔ If you have trouble paying for your medication, ask if you qualify for additional financial support

Step 4.

If you are picking up PRALUENT:

- ✔ Apply for a \$0 per month MyPRALUENT[®] Copay Card[‡] online at PRALUENT.com under the Paying for PRALUENT section to see if you are eligible[§]
- ✔ Show your pharmacist your copay card and discuss any out-of-pocket costs

[‡]Subject to a maximum annual copay assistance amount from MyPRALUENT[®] of \$5,500. Terms and conditions apply.

[§]Eligible patients with commercial insurance not funded through a government healthcare program such as Medicare, Medicaid, or TRICARE subject to program terms and restrictions.

Because PRALUENT is a medication that first needs yearly approval from your insurance company before the prescription can be filled at your local pharmacy, you and your doctor will have to repeat the above steps once a year to make sure your insurance still covers PRALUENT. If you change your health insurance plan, let your doctor know. You will need to complete the above steps again to make sure your new insurance plan covers PRALUENT.

It's important that you learn how to take PRALUENT. For information:

- 🏠 Contact your physician's office to set up an appointment with their staff
- 📞 Call 1-844-PRALUENT (1-844-772-5836) and press 1 to speak to a nurse
- 📺 Visit PRALUENT.com and click on the How to use PRALUENT section to watch the injection training video



Questions? Call 1-844-PRALUENT (1-844-772-5836)*

*Available 7 days a week, Monday to Friday 8:00 AM to 11:00 PM EST and Saturday to Sunday 8:00 AM to 8:00 PM EST.

Please see [Full Prescribing Information](#) available at PRALUENT.com.

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Praluent[®]
(alirocumab) Injection 75mg/mL
150mg/mL