

For patients prescribed ZEPOSIA® (ozanimod)

SUPPORT FOR YOUR PATIENTS EVERY STEP OF THE WAY



ZEPOSIA 360 SUPPORT™ FOR YOUR PATIENTS EVERY STEP OF THE WAY^a



Enrollment in ZEPOSIA 360 Support™

Submit **Start Form electronically** via **covermymeds**[®] or fax to 1-833-727-7701.

- ✓ A patient or patient representative signature is required. Signatures may be provided in office or online through the **covermymeds**[®] portal at [ZEPOSIA.com/eSign](https://www.zeposia.com/eSign).
- ✓ Advise your patient to save the Support Coordinator^b phone number **1-833-937-6742** in their phone.



Benefit Verification and Prior Authorization or Appeal

A benefit verification will be completed to determine your patient's coverage and out-of-pocket costs for ZEPOSIA[®] (ozanimod).

If required, ZEPOSIA 360 Support™ will offer information on prior authorization requirements as applicable.

- ✓ Submit a prior authorization (if required) via **covermymeds**[®] or directly to the patient's insurance.
- ✓ Provide prior authorization approval information to ZEPOSIA 360 Support™.

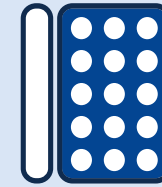


Baseline Assessments

There are assessments that are required to make sure ZEPOSIA is right for your patient.

Eligible commercially insured patients may receive assessments in-office or in their home. Request in-home services through the **covermymeds**[®] portal or by checking the appropriate box on the Start Form.

- ✓ View the [Baseline Assessment Assistance Brochure](#) for more information.



Starter Kit

New eligible patients enrolled in ZEPOSIA 360 Support™, who have been cleared to begin treatment, and who have not received a sample from their provider, may be provided a **free Starter Kit that includes a 7-day starter pack and a 21-dose supply of ZEPOSIA.**

- ✓ If you would like the Starter Kit sent to your office instead of directly to the patient, check the appropriate box on the Start Form.



Bridge Program

If there is a delay or denial in coverage, commercially insured patients may be eligible to receive up to **2 years of ZEPOSIA through the Bridge Program.**

For more information, contact **ZEPOSIA 360 Support™**



Financial Assistance

Eligible, commercially insured patients may pay as little as **\$0 in out-of-pocket costs for ZEPOSIA** and may also be reimbursed for out-of-pocket costs associated with baseline assessments.



1-833-ZEPOSIA (1-833-937-6742), 8 AM–8 PM ET, Monday–Friday
covermymeds[®] | [ZEPOSIAhcp.com](https://www.zeposiahcp.com)

For additional information and complete terms and conditions for the services listed above, please see www.zeposia.com/terms-conditions. The accurate completion of reimbursement- or coverage-related documentation is the responsibility of the healthcare provider and patient. Bristol Myers Squibb and its agents make no guarantee regarding reimbursement for any service or item.

^aEligibility and Terms and Conditions apply. ^bSupport Coordinators can provide general information about ZEPOSIA 360 Support™ but cannot provide medical advice.

Getting Started Tips

Enrollment in ZEPOSIA 360 Support™

- Submit the ZEPOSIA 360 Support™ Start Form via [covermymeds®](#) or fax to 1-833-727-7701
- Patient signature is required and can be provided via [covermymeds®](#) at [ZEPOSIA.com/eSign](https://www.ZEPOSIA.com/eSign)
- Advise your patient to save the Support Coordinator^b phone number (833) 937-6742

Prior Authorization

- If the benefit verification determines that a prior authorization is required, submit a prior authorization via [covermymeds®](#) or directly to the patient's insurance
- Provide prior authorization outcome information to ZEPOSIA 360 Support™



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