

Regardless of coverage, your insured patients may save on PLENVU[®]

For patients who are commercially insured, insured but not covered, or whose plans require prior authorization.*

Provide your patients with a co-pay assistance card by either:

- Requesting one from your **PLENVU**[®] representative
- Printing one from **PLENVUhcp.com**
- Directing patients to download one from **myPLENVU.com**

If your office is sending prescriptions electronically, enter the following universal co-pay card information within the Electronic Health Record platform for each patient's prescription:

BIN: 019158

PCN: CNRX

GROUP: AC68037003

ID: 39275793763



Note: For illustrative purposes only

If the pharmacy contacts your office, provide them with the pharmacist letter containing the universal co-pay card information or inform them that the patient will bring the card to the pharmacy

PLENVU[®] is here to support your patients.



PLENVU[®] Interactive Dosing Guide:

Instructions on how to take **PLENVU[®]**
Please see full Instructions for Use at **myPLENVU.com**



PLENVU[®] Hotline:

Offers support and translation services for your patients
Multilingual assistance available in over 200 languages



PLENVU[®] Texting Program:

Provides text reminders and helpful dosing tips

Patients can access these and additional helpful resources at **myPLENVU.com**.

*Restrictions apply. Not available to patients enrolled in federal, state, or governmental healthcare programs, including, but not limited to, Medicare, TRICARE, Veterans Administration, Department of Defense, CHAMPUS, the Puerto Rico Government Health Insurance Plan, or any other federal or state health care program. Visit **plenvu.copaysavingsprogram.com** for the program's full Eligibility Criteria, Terms, and Conditions

[†]At no cost with an unlimited texting plan; otherwise, message and data rates may apply. Message frequency determined by user. Text HELP to 84883 for help. Text STOP to 84883 to cancel. For terms, visit **cs1.me/plenvu**

Please see reverse side for Medicare Part D co-pay information.

PLENVU[®] also offers savings for patients with Medicare Part D

For patients with Medicare Part D whose plan does not cover the product, or their out-of-pocket costs exceed \$60:*

Direct patients to:

- Visit **myPLENVU.com** to enroll in the **PLENVU**[®] Medicare Part D Coupon Program to download and print the information packet, which contains a coupon card and health plan letter
- Mail their health plan letters to their Medicare provider
- Activate their coupon cards prior to visiting their participating pharmacy for redemption

Patients with a hard-copy card should activate it by

- Calling 1-866-686-0138 or by visiting **myPLENVU.com**



Note: for illustrative purposes only

Here are some additional ways **PLENVU**[®] supports your patients:



PLENVU[®] Dosing Videos:

Features step-by-step instructions on how to take PLENVU[®]



PLENVU[®] Dosing Calculator:

Helps patients plan their dosing times based on their appointment

Patients can access these and additional helpful resources at **myPLENVU.com**.

*Terms, conditions, and limitations apply. Most eligible patients may pay as little as \$60. Visit **plenvupartd.copaysavingsprogram.com** for the program's full Eligibility Criteria, Terms and Conditions