

SUPPORT path[®]

FOR PRIMARY BILIARY CHOLANGITIS (PBC)

Support Path is here to help your patients.

The Support Path program for Gilead is committed to helping your patients afford their prescribed Gilead medication for primary biliary cholangitis (PBC), no matter the situation. Whether they have insurance or not, we can explore potential coverage options that might be right for them. Talk to a live dedicated Support Path Program Specialist by calling **1-855-769-7284**.



Patients Affording Their Primary Biliary Cholangitis (PBC) Medicine

The Support Path program for Gilead's PBC therapy is committed to helping your eligible patients afford their prescribed Gilead medication.

If Your Patient Is Commercially Insured

Help your eligible patients save on their prescribed Gilead medication with the Support Path Co-pay Savings Program.

Patients with government healthcare prescription drug coverage, including patients in the Medicare Part D coverage gap, or "donut hole," are not eligible.

For more information, or to see if your patient is eligible, visit MySupportPath.com/HCP or call **1-855-769-7284**.

How the Co-pay Savings Program Works

If your patient is eligible, they will be able to enroll in real time and obtain a virtual document outlining their co-pay processing information.

Coverage varies by product. For up-to-date information including savings benefits, or to enroll in the Co-pay Savings Program, visit MySupportPath.com/HCP for complete terms and conditions.

Interim Support Program

For eligible patients with PBC experiencing insurance delays or interruptions in coverage, support may be available.

If Your Patient Is Government-Insured

If your patient is enrolled in government healthcare programs, such as Medicare Part D, Medicaid, TRICARE, VA or is otherwise not eligible for Gilead's Co-pay Savings Program, they may be eligible for alternative financial support options. Our dedicated Program Specialists are available to research options for your patient.

If Your Patient Is Without Insurance

If your patient lacks insurance coverage, they may be eligible to receive their prescribed Gilead medication free of charge through the Support Path Patient Assistance Program (PAP). Please contact the Support Path program for Gilead to learn more about the program eligibility criteria.

Enroll your patient in the Patient Assistance Program online at MySupportPath.com/HCP or by calling **1-855-769-7284**.

Please [click here](#) for terms and conditions.

PBC medication is available through a limited network of specialty pharmacies and a specialty distributor.*

Scan the code to view select specialty pharmacies



Specialty Distributor



Phone: 1-877-599-7748

Fax: 1-800-862-6208

Visit: CuraScriptSD.com/Provider-Solutions/specialty-distribution

*The list of authorized distributors is updated periodically and is subject to change.



Understanding Coverage Options for Patients With Primary Biliary Cholangitis (PBC)

The Support Path program for Gilead can provide information to you and your patients to help address insurance and coverage issues should they arise. Visit, call, or enroll online at MySupportPath.com/HCP.

Insurance Benefits Investigation

Support Path can help by researching and verifying specific insurance benefits for prescribed Gilead medication coverage.

- Verify in-network pharmacy restrictions
- Verify patient's insurance coverage for their prescribed Gilead medication

Prior Authorization Information

Support Path can provide information to help you understand your patients' insurance coverage for their prescribed Gilead medication, including determining prior authorizations (PAs) and appeals requirements.

- Submit an electronic prior authorization (ePA) directly to the payer through the iAssist portal

Please [click here](#) for terms and conditions.

Support Path Is Here to Help

We are here to help address questions you may have. Connect with a dedicated Program Specialist for additional help today.

Multilingual Assistance

Multilingual help is available for your patients. Notify our agent if non-English assistance is needed. We will do our best to support specific requests.

Field Reimbursement Manager (FRM)

Contact an FRM to learn more about general access, coverage, and reimbursement information by calling **1-855-769-7284**.

Have Questions?

Get answers to the program's most frequently asked questions (FAQs) by visiting MySupportPath.com/en/HCP/FAQ.

For additional information and assistance regarding Support Path, please call **1-855-769-7284**.

Get Your Patients Started With Support Path



Call 1-855-769-7284

from Monday — Friday, 9 AM to 8 PM ET. Callers can also leave a confidential message any time and day of the week.



Electronic Support

Enroll online at MySupportPath.com/HCP

- Submit an electronic prescription to your patient's pharmacy of choice
- Submit an ePA directly to the payer

RESOURCES AVAILABLE TO DOWNLOAD AT

MySupportPath.com/HCP



iAssist How-To Guide

Register your patient in 5 minutes by following our simple 3-step guide.



Online Enrollment

Enroll your patient into the online Support Path program for Gilead at MySupportPath.com/HCP



Prior Authorization Checklist

To help guide you through a more simple and error-free PA process.



Co-pay Savings Program Terms and Conditions

The Gilead Support Path Co-pay Savings Program (“Savings Program”) provides financial assistance for the out-of-pocket costs to eligible commercially insured patients. Savings Program benefits are limited to financial assistance for patient cost-sharing for the applicable Gilead product and product administration (administration financial assistance only available for certain products).

The Savings Program can be used only by eligible residents of the US, Puerto Rico, or US territories at participating eligible pharmacies in the US, Puerto Rico, or US territories. Product must be dispensed in the US, Puerto Rico, or US territories. Individuals must be at least 18 years old to use the Savings Program themselves or to enroll in the Savings Program on behalf of a minor.

To use the Savings Program, the patient (or the authorized representative under federal or state law enrolling on behalf of the patient, as applicable) must personally complete the enrollment process for the Savings Program. Third-party payers, pharmacy benefit managers, or the agents of either, are prohibited from assisting patients with enrolling in the Savings Program. Any decision to enroll in the Savings Program must be made voluntarily by the patient.

The Savings Program is not insurance and is not intended to substitute for insurance. Uninsured and cash-paying patients are not eligible to use the Savings Program. The Savings Program is valid only for prescriptions that are reimbursed by commercial insurance and is not valid for prescriptions that are eligible to be reimbursed:

- in whole or in part by Medicare or a Medicare Part D plan, Medicaid, TRICARE, VA, DOD, Puerto Rico Government Health Insurance Plan, or any other state or federally funded healthcare benefit program (collectively, “Government Programs”); or
- by commercial plans or other health or pharmacy benefit programs that reimburse for the entire cost of prescription drugs or prohibit the use of the savings card.

Patients who begin receiving prescription benefits from Government Programs at any time must notify Gilead of this fact by contacting Support Path at 1-855-769-7284 and will no longer be eligible to use the Savings Program.

The Savings Program is limited to one per person and is not transferable. No substitutions are permitted. This Savings Program is offered to, and intended for the sole benefit of, eligible patients and may not be utilized for the benefit of third parties, including, without limitation, third-party payers, pharmacy benefit managers, or the agents of either. If Gilead determines that a patient’s insurer has implemented a program that adjusts patient cost-sharing obligations based on the availability of support under the Savings Program (sometimes called a “co-pay maximizer program”), unless prohibited by law, Gilead may reduce or

discontinue the cost-sharing assistance available under the Savings Program. If Gilead determines that a patient’s insurer has implemented a program that excludes the financial assistance provided under the Savings Program from counting towards the patient’s deductible or out-of-pocket cost limitations (sometimes called an “accumulator adjustment program”), unless prohibited by law, Gilead may reduce the cost-sharing assistance available under the Savings Program to a per claim maximum of \$25. Patients may contact Support Path at 1-855-769-7284 to determine if additional cost-sharing assistance is available.

The Savings Program is only available with a valid prescription. No other purchase is necessary to redeem this offer.

The Savings Program cannot be combined with any other coupon, free trial, discount, prescription savings card, or other offer (including, without limitation, any program offered by a third-party payer or pharmacy benefit manager, or an agent of either, that adjusts patient cost-sharing obligations). Patients are not eligible to use the Savings Program for a product if they are currently receiving free drug assistance through Gilead Sciences, Inc. (“Gilead”)’s patient assistance program for that product.

The Savings Program will not reimburse any payments made by Flexible Spending Account (FSA), Health Savings Account (HSA), Health Reimbursement Account (HRA), or any other payor, discount/co-pay program, or other offer.

Void where prohibited by law, taxed, or restricted.

Patient, pharmacist, and prescriber agree not to seek reimbursement for all, or any part of the benefit received by the patient through the Savings Program. Both patient and pharmacist are each individually responsible for reporting receipt of the Savings Program benefit to any insurer, health plan, or other third party who pays for or reimburses any part of the prescription filled using the Savings Program, as may be required.

It is illegal to sell, purchase, trade, or counterfeit, or offer to sell, purchase, trade, or counterfeit the Savings Program.

Certain information pertaining to your use of the Savings Program will be shared with Gilead, the sponsor of the Savings Program, and its affiliates. The information disclosed will include the patient co-pay ID, pharmacy demographics, prescriber information, and details relating to the co-pay claim, such as co-pay amount, insurance details, and the therapy received. For more information, please see Gilead’s Privacy Statement and Consumer Health Data Privacy Policy available at www.gilead.com/privacy-statements.

Gilead Sciences reserves the right to terminate, rescind, revoke, or modify the Savings Program for any reason at any time without notice.