

Affordability Options for ZYMFENTRA



Once your doctor has prescribed ZYMFENTRA™ and enrolled you in Celltrion CONNECT®, a dedicated case manager will talk you through your coverage and help identify potential savings options – regardless of your insurance type.

If you have commercial/private health insurance

- Eligible patients with commercial insurance may pay as little as \$5 per month for ZYMFENTRA through the Celltrion CARES™ Co-pay Assistance Program*
- View complete program rules and apply online at www.CelltrionCares.com. Program maximums apply

*While patients must have commercial insurance to be eligible for the co-pay program, regardless of insurance type, Celltrion CONNECT may provide additional information to patients about financial assistance options.



If you have commercial insurance and experience a delay in coverage due to an insurance denial

- The START program may provide ZYMFENTRA at no cost to you while your provider supports the appeal process for your medication
- Your provider must prescribe ZYMFENTRA for an FDA-approved indication and provide evidence of appeal activity for you to be eligible to stay in the program
- If eligible, you will receive a monthly shipment of ZYMFENTRA at your home while case managers work with your provider's office to support your appeal
- Other program terms and conditions apply†

If you have commercial insurance and are currently taking ZYMFENTRA and temporarily have a loss in your insurance coverage

- The Bridge program may provide ZYMFENTRA at no cost to you for up to 2 months if you experience a loss in coverage due to a job loss or life event, where you may need temporary support until your new (commercial) insurance takes effect
- Other program terms and conditions apply†

If you don't have any insurance coverage, or have commercial insurance and are still unable to afford your out-of-pocket amount after co-pay support is applied

- You may be eligible to receive ZYMFENTRA at no cost as part of the ZYMFENTRA Patient Assistance Program
- ZYMFENTRA Patient Assistance Program eligibility criteria, terms and conditions apply

†Celltrion may provide ZYMFENTRA to eligible patients, including those with commercial insurance experiencing delays or a gap in coverage of ZYMFENTRA. Eligible patients must have been prescribed ZYMFENTRA for an FDA-approved indication, and their participation is in no way contingent on any requirement or obligation to purchase ZYMFENTRA or any other Celltrion product or service at any time. Patients who are covered, in whole or part, through a state or federal healthcare program, including but not limited to Medicare, Medicaid, Medigap, CHAMPUS, TRICARE, Veterans Affairs, or Department of Defense are not eligible. Eligibility for continued participation will be verified periodically, and patients will not be eligible to continue participating if they no longer satisfy the eligibility criteria, including when initiation of coverage for ZYMFENTRA is approved by the patient's commercial insurance plan. This offering will end December 31, 2024. Void where prohibited or restricted by law, and Celltrion reserves the right to rescind, revoke, or amend the terms and conditions at any time without notice.



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