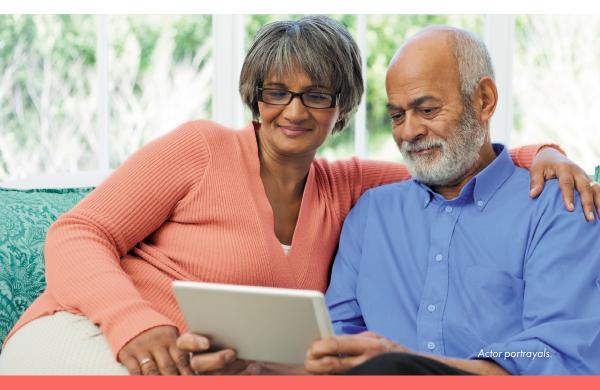




Dedicated Team. Patient-Focused Approach.

Understanding your coverage and costs for treatment



A guide to Pharmacy and Medical health insurance

Please see full Prescribing Information, including Patient Information.

This brochure is provided for your background and/or example information only. This information is intended to provide a general understanding of health plan coverage. It is not intended to provide suggestions or recommendations about seeking health plan approval for any medication and should not be relied upon as such. The responsibility for obtaining health plan coverage for any medication is the sole responsibility of the healthcare provider and patient. All inquiries about health plan coverage should ultimately be directed to your health insurance plan. Please always contact your health insurance company and/or Medicare.gov for information specific to you.







SUPPORT PROGRAM™

Dedicated Team. Patient-Focused Approach.



No matter where you are—from diagnosis to treatment—the JourneyMate Support Program™ gives you the understanding, answers, and resources to help you move forward.*

Once your doctor has prescribed RADICAVA ORS® (edaravone) or RADICAVA® (edaravone) IV and submitted a Benefit Investigation and Enrollment Form to check how your health insurance covers the medication your doctor prescribed, a *JourneyMate Support Program*TM Insurance & Access Specialist† will:

- Help to investigate your health insurance coverage and health plan benefits, as well as the financial support options which may be available to you
- Send a Benefit Summary that provides details about your coverage to you and your doctor
- You can use this information to help make an informed decision about the treatment that may be right for you

The **JourneyMate Support Program**TM is providing this information to help you understand your health insurance coverage and potential out-of-pocket costs.

See a glossary of terms here.

Understanding your coverage

Your health insurance may cover your treatment in one of two ways



Your Pharmacy benefit

typically covers medications such as RADICAVA ORS®, which you obtain from a specialty pharmacy and give to yourself.





Your Medical benefit

typically covers medications such as RADICAVA® IV and its IV infusion services, given to you by a healthcare professional.



Where you receive your treatment and how it is covered can determine your out-of-pocket costs.

Find out more about coverage and out-of-pocket costs under the **Pharmacy benefit** on pages 4-5.

Find out more about coverage and out-of-pocket costs under the **Medical benefit** on pages 6-7.

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Please see full <u>Prescribing Information</u>, including <u>Patient Information</u>.

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^{*}The JourneyMate Support Program™ offers educational support and resources for patients who are considering or have already been prescribed a Mitsubishi Tanabe Pharma America, Inc. (MTPA) product. A Clinical Educator is an educational resource for patients who have been prescribed an MTPA product. A Clinical Educator is provided by MTPA and VMS and is not affiliated with or provided by a doctor. A Clinical Educator does not provide medical advice. The program does not provide medical advice and does not take the place of a patient's doctor. All questions about a condition, diagnosis, or treatment should be referred to the patient's doctor. If a patient has a medical emergency, they should call 911. Adverse events or product complaints should be reported by calling 1-888-292-0058.

[†]A **JourneyMate Support Program**[™] Insurance & Access Specialist is provided by UBC on behalf of Mitsubishi Tanabe Pharma America, Inc. (MTPA). A **JourneyMate Support Program**[™] Insurance & Access Specialist may provide information obtained from outside sources about a patient's insurance coverage, financial support options, and whether treatment is covered by their health plan. This information does not require a patient or their doctor to use any MTPA product. Because the information provided comes from outside sources, a **JourneyMate Support Program**[™] Insurance & Access Specialist cannot guarantee the information will be accurate or complete.



If you have Commercial or Private Insurance

You may pay a separate Pharmacy benefit premium.

Your out-of-pocket costs may include:

Your annual deductible

Your co-pay or co-insurance costs each time you fill a prescription

Some plans require that your treatment be covered under the Pharmacy benefit even if it is given by a healthcare professional. Check your health insurance plan for specific information.

About Co-Pay Adjustment Policies

Some commercial health plans have what's called co-pay adjustment policies. These policies may be referred to as "accumulator" or "maximizer" programs and may impact how a co-pay assistance program benefit is applied to your health plan's annual deductible or out-of-pocket maximum.

With these policies:

- It may take longer to reach your health plan annual deductible or out-of-pocket maximum
- Your potential out-of-pocket costs for your prescription may increase during the year

You can contact your health plan administrator to find out if a co-pay adjustment policy is in place at your health plan.

Questions about your coverage or out-of-pocket costs?

Contact your health insurance representative.

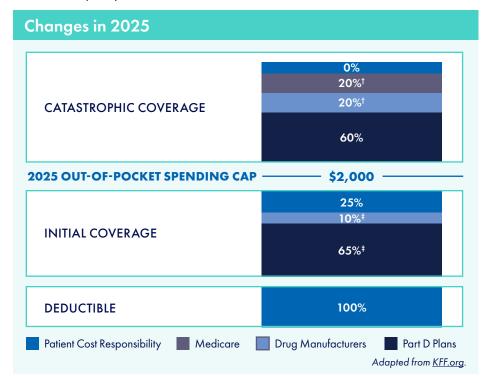
Mitsubishi Tanabe Pharma America, Inc. does not assume any responsibility or liability for the accuracy of the cost information provided by your health plan. Please consult your health plan representative to confirm the accuracy of the information they have provided.

If you have Medicare

Part D—Prescription Drug Coverage: Changes in 2025

The Inflation Reduction Act (IRA) of 2022 included provisions to Medicare Part D that aimed at lowering Medicare Part D patients' out-of-pocket drug costs.

- Elimination of the coverage gap phase, which means that patients will go directly into catastrophic coverage once the \$2,000 spending threshold is reached
- Out-of-pocket drug spending is capped at \$2,000. A patient's exact out-of-pocket costs are calculated based on the structure of their Medicare Part D plan, not to exceed \$2,000
- After reaching the spending cap of \$2,000, Medicare Part D patients will go directly into catastrophic coverage and pay \$0 in out-of-pocket costs for the rest of the plan year*



Visit <u>Medicare.gov/plan-compare</u> to get specific Medicare Part D prescription drug plan costs.

Note: You are eligible for Part D only after you apply for Part A and Part B. Many Medicare Advantage plans (Part C) include Part D prescription drug coverage. Be sure to consider all the prescription medications you are taking when choosing a Part D plan.

In the Initial coverage period in 2023, Fan D program pays 03%-73%, and any manufacturers pay 10% for some applicable drugs.

^{*}You will still be responsible for paying your premium. A new benefit verification needs to be run each year to determine annual costs.

†Over the \$2,000 threshold in 2025, Medicare pays 20%-40%, and drug manufacturers pay 20% for some applicable drugs.

†In the initial coverage period in 2025, Part D program pays 65%-75%, and drug manufacturers pay 10% for some applicable drugs.

Medical Benefit

Typically covers the cost of medication such as RADICAVA® (edaravone) IV and its infusion services, given by a healthcare professional at home or another location.



If you have Commercial or Private Insurance

You pay a monthly premium for your individual or family plan. With your plan, you may have out-of-pocket costs, including your deductible, and co-pay or co-insurance for your medication.

Your out-of-pocket costs may include:

Your annual deductible

Your co-pay or co-insurance costs each time you receive your medication

Your co-pay or co-insurance costs for IV infusion services

Most commercial or private insurance comes with an out-of-pocket maximum.

This is the limit to what you must pay before your insurance plan pays 100% of your healthcare expenses for the remainder of the year.

Some plans require that your treatment be covered under the Pharmacy benefit even if it is given by a healthcare professional. Check your health insurance plan for specific information.

Some plans cover up to 100% of the costs of your medication and the costs of your medication administration under the Medical benefit.

After you reach the out-of-pocket maximum, your treatment costs for the rest of the year may be \$0.

Questions about your coverage or out-of-pocket costs?

Contact your health insurance representative.

Mitsubishi Tanabe Pharma America, Inc. does not assume any responsibility or liability for the accuracy of the cost information provided by your health plan. Please consult your health plan representative to confirm the accuracy of the information they have provided.

If you have Medicare

Part B

Typically covers 80% of the medication and its administration, such as IV infusion services. You pay the remaining 20%.

• Includes a monthly premium and an annual deductible

Part B + Medigap (Medicare Supplement) Plans

- Can help with some or all of the 20% you pay for your treatment
- Vary in coverage, cost, and benefits
- You still have to pay your Part B premium
- Do not include prescription drug coverage
- Your out-of-pocket costs may be as low as \$0*

Part C (Medicare Advantage Plan)

May cover some or all of your out-of-pocket costs for the medication and its administration, such as IV infusion, and home infusion services.

- An alternative to "original" Medicare coverage (Part A and Part B)
- May have an annual out-of-pocket maximum for medical services. Once you reach this limit, you may pay \$0 for covered services

Note: Many Medicare Advantage Plans include Part D prescription drug coverage. If enrolled in a Medicare Advantage Plan, you cannot enroll in a Medigap plan.



Insurance & Access Specialist 1-844-772-4548

Monday-Friday, 8:00 AM-8:00 PM ET

Questions about your coverage or out-of-pocket costs?

Contact your health insurance representative or visit Medicare.gov.

Please see full Prescribing Information, including Patient Information.

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^{*}Only Medigap Plans C and F cover the Medicare Part B deductible. However, these plans are not available to people newly eligible for Medicare on or after January 1, 2020. Visit Medicare.gov for more information. Medigap Plans A-G and M-N pay 20% of the Part B costs, and you pay 0% of those costs; Plan K pays 10% and you pay 10%; Plan L pays 15% and you pay 5%. In MA, MN, and WI, Medigap plans are standardized in a different way. Visit Medicare.gov for more information.

INDICATION

RADICAVA (edaravone) and RADICAVA ORS (edaravone) are indicated for the treatment of amyotrophic lateral sclerosis (ALS).

IMPORTANT SAFETY INFORMATION

Do not receive RADICAVA or RADICAVA ORS if you are allergic to edaravone or any of the ingredients in RADICAVA and RADICAVA ORS.

Before you take RADICAVA or RADICAVA ORS, tell your healthcare provider about all of your medical conditions, including if you:

- have asthma.
- are allergic to other medicines.
- are pregnant or plan to become pregnant. It is not known if RADICAVA or RADICAVA ORS will harm your unborn baby.
- are breastfeeding or plan to breastfeed. It is not known if RADICAVA or RADICAVA ORS passes into your breastmilk. You and your healthcare provider should decide if you will receive RADICAVA or RADICAVA ORS or breastfeed.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

What are the possible side effects of RADICAVA and RADICAVA ORS?

RADICAVA and RADICAVA ORS may cause serious side effects, including hypersensitivity (allergic) reactions and sulfite allergic reactions.

- Hypersensitivity reactions have happened in people receiving RADICAVA or taking RADICAVA ORS and can happen after your medicine has been given.
- RADICAVA and RADICAVA ORS contain sodium bisulfite, a sulfite that may cause a type of allergic reaction that can be serious and life-threatening. Sodium bisulfite can also cause less severe asthma episodes in certain people. Sulfite sensitivity can happen more often in people who have asthma than in people who do not have asthma.
- Tell your healthcare provider right away or go to the nearest emergency room if you have any of the following symptoms: hives; swelling of the lips, tongue, or face; fainting; breathing problems; wheezing; trouble swallowing; dizziness; itching; or an asthma attack (in people with asthma).

Your healthcare provider will monitor you during treatment to watch for signs and symptoms of all the serious side effects and allergic reactions.

The most common side effects include bruising (contusion), problems walking (gait disturbance), and headache. These are not all the possible side effects of RADICAVA or RADICAVA ORS. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088. You may also report side effects to www.fda.gov/medwatch or Mitsubishi Tanabe Pharma America, Inc. at 1-888-292-0058.

Check with your health plan to get the answers you need about coverage and costs for your treatment.



Insurance & Access Specialist 1-844-772-4548

Monday-Friday, 8:00 AM-8:00 PM ET radicava.com

Please see full <u>Prescribing Information</u>, including <u>Patient Information</u>.







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JourneyMate Support Program is a trademark of Mitsubishi Tanabe Pharma America, Inc.

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Dedicated Team. Patient-Focused Approach.

Definitions you may find helpful

Co-insurance: A percentage of the cost of your medications and healthcare services that you are responsible for paying. Typically, this is a lower percentage amount than what your health plan pays.

Commercial or Private insurance: Health insurance provided by private companies or non-governmental organizations. If your health insurance plan is not provided through government organizations such as Medicare, Medicaid, TRICARE, or Veterans Affairs, you have commercial or private insurance.

Co-pay: A set amount, determined by your health plan, that you pay for medications and healthcare services at the time of service.

Coverage determination: A decision that a health insurance plan makes on whether it will cover some or all of the cost of a treatment or healthcare service.

Deductible: The out-of-pocket amount you must pay before your health plan begins to pay.

Medicare Advantage (Medicare Part C): Health plans approved by Medicare but offered by private insurance companies. Covers all the services that Original Medicare covers. Most of these plans also offer Part D prescription medication coverage. **Note:** If you are enrolled in a Medicare Advantage Plan, you cannot enroll in a Medigap plan.

Medigap (Medicare Supplement): Supplemental policy sold by private insurance companies that may cover some healthcare costs that Original Medicare doesn't cover, like co-pays, co-insurance, and deductibles.

Original Medicare: Federal health insurance coverage that includes Medicare Part A (hospital costs) and Part B (outpatient and doctor fees).

Out-of-pocket maximum: The total maximum amount you may pay for your medications and healthcare services during one year.

Specialty pharmacy: A state-licensed pharmacy that solely or largely provides only medications for people with serious health conditions requiring complex therapies.