

2022
EDITION



Actor portrayals.

Open Enrollment Information for Patients

Understanding your health plan coverage options

Be sure to:

- Download this brochure
- View in Adobe Acrobat Reader
- Enter cost information from your health plan



Mitsubishi Tanabe Pharma America

If your medication is administered by a healthcare professional, how it is covered and where it is given can determine your out-of-pocket costs.

[Get Started HERE](#)

Understanding Your Health Plan Coverage Options

During the open enrollment period, which typically occurs in the fall, you can reconsider your insurance coverage and make changes, or you can choose a new plan.

Your health plan coverage can determine your out-of-pocket costs. That's why Mitsubishi Tanabe Pharma America is providing this information to help you review your health insurance options for the coming year and make informed choices during the annual open enrollment period.

This brochure is provided for your background information only. It is not intended as a complete listing or description of health plan options. Please always contact your health insurance company and/or [Medicare.gov](https://www.Medicare.gov) for information specific to you.

How to use this information:

- 1 List all medications you and family members on your health plan are taking.**
This can help give you a better idea of your costs for next year.
- 2 Contact your health plan representative and evaluate your options for 2022.**
Find out about your medical and prescription plan insurance benefits and out-of-pocket costs for your medications and treatment administration.
- 3 Check if there is an out-of-pocket assistance program associated with your medication.**
A program representative may be able to help you determine your eligibility and discuss support options that may be available.

If your medication is administered by a healthcare professional, begin by reviewing some [important coverage considerations](#). Where you receive your treatment and how it is covered can determine your out-of-pocket costs.

Open Enrollment Calendar

OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH
Commercial or Private Insurance: Most plan decisions are made by November 30. Dates vary. Check with your plan.					
	Health Insurance Marketplace (HealthCare.gov): In many states, starts November 1 and ends December 15. Check with your plan. This is private insurance.				
	Medicare: Starts October 15 and ends December 7. You can select Original Medicare (Part B) . You can also select or change a Medicare Advantage plan or Medicare Part D prescription plan .		Medicare Advantage: Starts January 1 and ends March 31. You can switch to a different Medicare Advantage plan , or return to Original Medicare (Part B) and join a Medicare Part D prescription plan .		

Contact your health plan representative or [Medicare.gov](https://www.Medicare.gov) to help you review your plan options.

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Overview: Understanding health plan coverage

If you have Commercial or Private Insurance	Medical Benefit	Prescription Benefit
<p>Your medication may be covered under:</p> <ul style="list-style-type: none">• Your Medical Benefit, which typically covers medications given by a healthcare professional• Your Prescription Benefit, which may cover your medication if obtained through a specialty or retail pharmacy• Or both <p>If your medication is administered by a healthcare professional, your health insurance plan may require that the Prescription Benefit be used, no matter where your treatment is given. Check your plan for specific information.</p>	<p>What you can ask your plan:</p> <ul style="list-style-type: none"><input type="checkbox"/> Annual deductible<input type="checkbox"/> Coverage of your medication and the cost of your treatment administration<input type="checkbox"/> Co-pay or co-insurance for each treatment<input type="checkbox"/> Individual or family out-of-pocket maximum <p>Go to page 4</p> <p>Also, see page 10 on medications given by a healthcare professional</p>	<p>What you can ask your plan:</p> <ul style="list-style-type: none"><input type="checkbox"/> Annual deductible<input type="checkbox"/> Coverage of your medication<input type="checkbox"/> Co-pay or co-insurance for each prescription and refill <p>Go to page 5</p>
<p>If there is an out-of-pocket assistance program associated with your medication, a program representative may be able to help you determine your eligibility and discuss support options that may be available.</p>		
If you have Medicare	Medicare Part B or Part C (Medicare Advantage)	Medicare Part D
<p>Your costs may change next year. Visit Medicare.gov to find out more.</p> <div data-bbox="142 1299 589 1664"><p>If you have applied for Social Security Disability Insurance (SSDI), and if there is a support program associated with your medication, a program representative may be able to provide you with information to help you understand the transition to Medicare coverage. Visit ssa.gov/disabilityssi to learn more about Medicare and SSDI.</p></div> <p>See page 11 for a helpful glossary of health insurance terms.</p>	<p>What you can ask your plan:</p> <ul style="list-style-type: none"><input type="checkbox"/> Annual deductible<input type="checkbox"/> Co-insurance costs before Medicare pays its share <div data-bbox="656 1373 1066 1624"><p>Review information about a Medicare Supplement (Medigap) plan with Medicare Part B. (Not available with Medicare Advantage plans)</p></div> <p>Go to pages 6-7</p>	<p>What you can ask your plan:</p> <ul style="list-style-type: none"><input type="checkbox"/> Annual deductible<input type="checkbox"/> Co-insurance costs<input type="checkbox"/> Cost of your medication after you pay the annual deductible<input type="checkbox"/> Cost of your medication after you reach catastrophic coverage <p>Go to page 8</p>

Consider these questions as you review your health plan options:

- What is your premium?
- What is your deductible?
- What is your co-payment or co-insurance?
- If you have an out-of-pocket maximum, what is it?

For commercial or private insurance, see pages 4-5.

For Medicare, see pages 6-9.

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Review your commercial or private insurance

Medical Benefit

The Medical Benefit typically covers the cost of medications given by a healthcare professional **at your home or at another location**.

Call your health insurance plan—make sure you have coverage for your medication.

ENTER YOUR HEALTH PLAN COST INFORMATION BELOW to get a better idea of your costs for 2022:

Call your health plan representative to obtain your cost information^a

Does your plan include the following?	If so, what is the amount per year?
Individual or family premium Does not count toward your out-of-pocket maximum.	Premium: \$ _____
Individual or family deductible	Deductible: \$ _____
Co-pay OR co-insurance for your medication	Co-pay: \$ _____ OR Co-insurance: _____ %
Co-pay OR co-insurance for your treatment administration At your home or another location.	Co-pay: \$ _____ OR Co-insurance: _____ %

Out-of-pocket maximum
Your treatment costs for the rest of the year may be \$0 after you reach the out-of-pocket maximum.

Out-of-pocket maximum: \$ _____

^aMitsubishi Tanabe Pharma America, Inc. does not assume any responsibility or liability for the accuracy of the cost information provided by your health plan, which you may enter in the tables on this page. Please consult your health plan representative to confirm the accuracy of the information they have provided, and any calculations resulting from entry of the cost information provided by your health plan.

- **Some plans cover up to 100%** of the costs of your medication and the costs of your treatment administration
- Most plans include an individual or family out-of-pocket maximum
 - Your family's doctor and hospital visits and other medical services may count toward your out-of-pocket maximum
 - Typically includes out-of-pocket costs for your medication and the cost for your treatment administration

Applying for Social Security Disability Insurance Benefits and Medicare

People who have been diagnosed with amyotrophic lateral sclerosis (ALS) can apply for Social Security Disability Insurance (SSDI) benefits, and subsequently, for Medicare coverage. Visit ssa.gov/medicare or ssa.gov/disabilityssi to learn more about Medicare, SSDI, and to apply online.

Contact your health plan representative or [Medicare.gov](https://medicare.gov) to help you review your plan options.

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Prescription Benefit

The Prescription Benefit typically covers prescription medications you can obtain from a retail or specialty pharmacy and take at home.^a

Call your health insurance plan—make sure you have coverage for your medication.

ENTER YOUR HEALTH PLAN COST INFORMATION BELOW to get a better idea of your costs for 2022:
Call your health plan representative to obtain your cost information^b

Does your plan include the following?	If so, what is the amount per year?
A separate Prescription Benefit premium (not part of your Medical Benefit premium) Does not count toward your out-of-pocket maximum.	Premium: \$ _____
Deductible	Deductible: \$ _____
Co-pay OR co-insurance for your medication	Co-pay: \$ _____ OR Co-insurance: _____ %
Does your plan require you to obtain your medication from a specialty pharmacy?	Specialty pharmacy name _____

^aSome plans require that your medication be covered under the Prescription Benefit even if it is given by a healthcare professional. Check your health insurance plan for specific information.

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Check to see if there is an out-of-pocket assistance program associated with your medication. A program representative may be able to help you determine your eligibility and discuss support options that may be available.

Learn about Medicare coverage

Medicare Part B or Part B + Medigap (Medicare Supplement)

How Medicare Part B works:

Typically covers the cost of medications given by a healthcare professional.

You pay monthly Premium \$158^a	You pay annual Deductible \$203^b	You pay 20% of medication and treatment administration costs	Medicare Part B covers 80% of medication and treatment administration costs
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The Medicare Part B monthly premium is based on income level. Visit [Medicare.gov](https://www.medicare.gov) for more information.

If you are being treated at home, a [Medicare Advantage plan](#) may cover the cost of your medication and treatment administration. [Go to page 7.](#)

If you are NOT being treated at home, Medicare Part B with a [Medigap \(Medicare Supplement\)](#) plan can help with the 20% of costs for your treatment not covered by [Medicare Part B](#). See below.

How Medicare Part B + Medigap works:

A number of Medigap plans are available. You can use the table below to compare them.

ENTER YOUR HEALTH PLAN COST INFORMATION BELOW to get a better idea of your costs for 2022:

Call your health plan representative to obtain your cost information^c

You pay Medicare Part B <u>and</u> Medigap Premiums ^d	You or your Medigap plan pay annual Deductible	You and/or your Medigap plan pay 20% of medication and treatment administration costs ^f	Medicare Part B covers 80% of medication and treatment administration costs
Monthly Medicare Part B premium: \$ _____ Monthly Medigap premium: \$ _____ Total premiums for year: \$ _____	Medicare Part B deductible: \$ 203^b Does the Medigap plan cover the deductible? ^e <input type="checkbox"/> Yes <input type="checkbox"/> No Your deductible with Medigap plan: \$ _____	Does the Medigap plan cover all of the 20% Medicare Part B costs? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the Medigap plan have an out-of-pocket limit? <input type="checkbox"/> Yes <input type="checkbox"/> No Out-of-pocket limit: \$ _____	With a Medigap plan, your out-of-pocket costs may be as low as \$0^{e,f}

Visit your [State Health Insurance Assistance Program \(SHIP\)](#) or [Medicare.gov](https://www.medicare.gov) for additional information.

^aMedicare Part B premium shown is an estimate only for 2022 and is subject to change. Check [Medicare.gov](https://www.medicare.gov) for updates.

^bMedicare Part B deductible shown is for 2021 and is an example/estimate only. Medicare Part B deductible for 2022 will be released by the Centers for Medicare & Medicaid Services (CMS) in 4th quarter of 2021. Check [Medicare.gov](https://www.medicare.gov) for updates.

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^dPremiums do not count toward your out-of-pocket limit.

^eOnly 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](https://www.medicare.gov) for more information.

^fMedigap 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](https://www.medicare.gov) for more information.

Medicare Part C (Medicare Advantage)

Medicare Advantage typically covers the cost of medications given by a healthcare professional.

A [Medicare Advantage plan](#) may include prescription drug coverage and may help with co-pay and/or co-insurance costs for your medication. It may be available as an alternative to Original Medicare coverage (Medicare Part A and Part B). Some limitations apply.

If you are being treated at home with a medication that requires administration by a healthcare professional, a [Medicare Advantage plan](#) may cover the cost of your medication and your treatment administration.

If you enroll in a Medicare Advantage plan, you cannot enroll in a Medigap plan. Call your Medicare Advantage Plan Administrator to learn more.

How a Medicare Part C (Medicare Advantage) plan works:

ENTER YOUR HEALTH PLAN COST INFORMATION BELOW to get a better idea of your costs for 2022:
Call your health plan representative to obtain your cost information^a

You pay Premium ^b	You may pay annual Deductible ^b	You pay co-pay and/or co-insurance ^{b,c}	Medicare Advantage covers remaining medication and treatment costs
Medicare Advantage monthly premium: \$ _____ Total premiums for year: \$ _____ PLEASE NOTE: Does not count toward your out-of-pocket maximum	Deductible: \$ _____	For medication and treatment costs: Co-pay: \$ _____ Co-insurance: _____ %	Consider your out-of-pocket costs when selecting a Medicare Advantage plan. Out-of-pocket maximum: \$ _____ IMPORTANT: If you use out-of-network services, your costs may exceed the plan's out-of-pocket maximum

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^bCheck your plan—premiums and out-of-pocket costs vary by plan.

^cMedicare Advantage plans have a yearly limit on your out-of-pocket costs for medical services. Once you reach this limit, you may pay \$0 for covered services.

Check your Medicare Advantage plan’s support for your treatment.

If your Medicare Advantage plan does not include prescription drug coverage, you may also need to enroll in a [Medicare Part D prescription drug plan](#).

Medicare prescription coverage

Medicare Part D—Prescription Drug Coverage

[Medicare Part D prescription drug plans](#) typically cover prescription medications, including:

- Medications administered by a healthcare professional at home (only the cost of the medication)
- Medications you obtain from a retail or specialty pharmacy and take at home

How it works:

ENTER YOUR HEALTH PLAN COST INFORMATION BELOW to get a better idea of your costs for 2022:

Call your health plan representative to obtain your cost information^a

You pay Premium	You pay annual Deductible	After the annual deductible, you pay co-insurance	After you reach catastrophic coverage, you pay co-insurance
Medicare Part D monthly premium: \$ _____ ^b	Deductible \$ 480	25% of medication costs up to \$7,050 minus deductible ^c	5% of medication costs above \$7,050
Total premiums for year: \$ _____ ^b		25% of \$7,050 minus deductible = \$ 1,642	5% above \$7,050 = \$ _____
		Part D Program pays 75%^d	Medicare pays 95%

NOTE: Dollar values and cost sharing information in this table are from information published by CMS on 1/15/2021. Check [Medicare.gov](#) for updates.

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^bCheck your plan—premiums vary by plan.

^cCo-insurance for specialty medications may be up to 33% for medication costs up to \$4,430, minus deductible.

^dMedicare pays 75% of medication costs up to \$4,430 minus deductible. For medication costs between \$4,430 and \$7,050 (formerly known as the “donut hole” or coverage gap), the manufacturer pays 70%; Medicare pays 5%.

^eBased on the total annual cost of your medications.

Call your health insurance company—make sure you have coverage for your medication.

Find a plan that works for you

- Understand that out-of-pocket costs for prescription medications may vary depending on the plan you choose
- Be sure to consider all the prescription medications you and your family are taking
- Look at total out-of-pocket medication costs, not just premiums and deductible

Supplemental coverage may be available. Some people with limited resources and income may qualify for [Medicare Extra Help](#) to help pay for prescription drug plan costs, including deductibles and out-of-pocket expenses.

Visit [Medicare.gov](#) for more information or contact your Medicare insurance plan representative.

Contact your health plan representative or [Medicare.gov](#) to help you review your plan options.

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Medicare and Medicaid Dual Eligibility

Some people qualify for both Medicare and Medicaid. If eligible, Medicare pays for covered medical services first, and Medicaid may then cover some of the out-of-pocket costs that Medicare does not cover.

- Dual Eligible benefits vary by state
- A **Dual Eligible Special Needs Plan (D-SNP)** may be available to coordinate care for people enrolled in both Medicare and Medicaid

The information above is a summary. Be sure to talk with your health plan representative about Dual Eligible benefits and requirements in your state.

Learn about Dual Eligibility requirements and coverage options at [Medicaid.gov](https://www.Medicaid.gov).

Medicare Resources

If you have questions about what your coverage includes, contact your Medicare insurance plan representative.

State Health Insurance Assistance Program (SHIP)

Your local SHIP may be able to provide in-depth, objective counseling and assistance to Medicare beneficiaries and can help you find a plan that's right for you. To find a SHIP in your area, visit [shiptacenter.org](https://www.shiptacenter.org) or call 1-877-839-2675.

Medical Benefit

Medicare Supplemental Insurance: Getting Started
(Information about Medigap plan options)
[Medicare.gov/publications](https://www.Medicare.gov/publications) (keyword: 11575)

Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare
[Medicare.gov/publications](https://www.Medicare.gov/publications) (keyword: 02110)

Medicare Part B Costs
[Medicare.gov/your-medicare-costs/part-b-costs](https://www.Medicare.gov/your-medicare-costs/part-b-costs)

What's a Medicare Advantage Plan?
[Medicare.gov/sites/default/files/2018-07/11474.pdf](https://www.Medicare.gov/sites/default/files/2018-07/11474.pdf)

Prescription Benefit

Your Guide to Medicare Prescription Drug Coverage
[Medicare.gov/publications](https://www.Medicare.gov/publications) (keyword: 11109)

How Medicare Prescription Drug Coverage Works with a Medicare Advantage Plan or Medicare Cost Plan
[Medicare.gov/publications](https://www.Medicare.gov/publications) (keyword: 11135)

Extra Help with Medicare Prescription Drug Plan Costs
ssa.gov/benefits/medicare/prescriptionhelp

Medicare Plan Finder
(Search tool enabling users to compare Medicare Part D prescription drug plans in their local area)
[Medicare.gov/plan-compare](https://www.Medicare.gov/plan-compare)





How it is covered and where it is given can determine your out-of-pocket costs.

Here's what to do:

- 1 Consider all the places where you may be receiving your medications in 2022.
- 2 Determine if you are covered for your medication and the cost of your treatment administration.
- 3 Refer to the Open Enrollment Brochure to help you understand health plan options.

This is not a complete list of health plan options.

Contact your health plan representative or [Medicare.gov](#) to help you review your plan options.

Commercial or Private Coverage Refer to your health plan for specific information.		Your Treatment Location	Medicare Coverage Refer to Medicare.gov for specific information.	
Cost for Medication	Cost for Treatment Administration		Cost for Medication	Cost for Treatment Administration
Medical Benefit OR Prescription Benefit	Medical Benefit	 Home	Part C Medicare Advantage Part D Prescription Drug Plan (see page 8) Dual Eligible Special Needs Plan (D-SNP)*	Part C Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)*
Medical Benefit OR Prescription Benefit	Medical Benefit	 Clinic/Doctor's Office	Part B Part C Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)*	Part B Part C Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)*
Medical Benefit OR Prescription Benefit	Medical Benefit	 Infusion Center	Part B Part C Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)*	Part B Part C Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)*
Medical Benefit	Medical Benefit	 Hospital Outpatient	Part B Part C Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)*	Part B Part C Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)*

Commercial or private coverage may allow or mandate that the medication be covered by the Prescription Benefit, no matter where your treatment is given.
[Go to pages 4 and 5.](#)

NOW USE THE BROCHURE
to find the coverage that may apply to you

Review information about Part B coverage with a Medigap plan or a Part C (Medicare Advantage) plan.
[Go to pages 6 and 7.](#)

*Dual eligible benefits and coverage vary by state. To learn more about Dual Eligible Special Needs Plans (D-SNPs), [see page 9.](#)

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Glossary

Catastrophic coverage: Once you've met your plan's out-of-pocket cost requirements for the year, you automatically get "catastrophic coverage." With catastrophic coverage, you only pay a reduced amount or co-payment for covered drugs for the rest of the year.

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.

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

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 the Veterans Administration, you have commercial or private insurance.

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

"Donut hole" or coverage gap: A term formerly used for a limit on the amount that a Medicare Part D prescription plan will cover after your out-of-pocket prescription costs reach a certain level. After your costs pass the higher limit of this range, you pay just 5% of all your prescription medication costs for the rest of your coverage year.

Dual Eligible Special Needs Plan (D-SNP): Provides dual coverage for those who qualify for both Medicare and Medicaid. Medicaid requirements and coverage vary by state.

Health Insurance Marketplace or "Exchange": The Health Insurance Marketplace helps people find health insurance plans that meet their needs and fit their budget. People who use the Marketplace may qualify for a subsidy to help cover the cost of their insurance.

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 prescription medication coverage. Note: If you are enrolled in a Medicare Advantage plan, you cannot enroll in a Medigap plan.

Medicare Extra Help: A Medicare program to help people with limited income and resources pay for prescription drug plan costs, including deductibles and out-of-pocket expenses. Offered at full and partial levels.

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.

Premium: The periodic payment to Medicare or a health insurance company for healthcare or prescription drug coverage.

Prior authorization: Your health plan may require your doctor to confirm that your prescribed medication is medically necessary before the plan will cover it. If your prior authorization has expired, work with your doctor to renew it.

Secondary health plan: Some people may be covered by more than one health plan. In most cases, the secondary plan provides payment after the primary plan pays its share of the costs.

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

Check with your health plan to get the answers you need.

If there is a manufacturer-sponsored out-of-pocket support program associated with your medication, a representative of the manufacturer's support program may be able to help you determine your eligibility and discuss support options that may be available.



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CP-MTPA-US-0143 09/21