



Committed to supporting  
your patients



**Phyllis**  
Takeda Oncology  
Here2Assist™ patient

We're here to help your patients with their coverage, financial, and educational resource needs

# Personalized support for patients prescribed Takeda Oncology products, including:



**Phyllis**  
Takeda Oncology  
Here2Assist patient

# Comprehensive support

AS OUR PROGRAMS CONTINUOUSLY EVOLVE TO ADAPT TO YOUR PATIENTS' NEEDS, TAKEDA ONCOLOGY HERE2ASSIST™:

- ▶ Works with your patients' insurance company to help get your patient started on their medication
- ▶ Identifies available financial assistance that may be right for your patients
- ▶ May help eligible patients get started on treatment in the event of an insurance delay
- ▶ Identifies specialty pharmacies to help fill and ship your patients' prescriptions appropriately
- ▶ Conducts regular follow-up calls to patients
- ▶ Sends text message status updates and reminders to patients\*

\*Patients will need to enroll in the texting program to receive text messages.

## Let's Talk



### BY PHONE

Speak with a Takeda Oncology Here2Assist case manager at 1-844-817-6468, Option 2, Monday-Friday, 8AM-8PM ET



### BY FAX

1-844-269-3038



### ONLINE

[www.Here2Assist.com/hcp](http://www.Here2Assist.com/hcp)



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# Enrolling your patients is simple



## 1. DOWNLOAD

and print the Takeda Oncology Here2Assist™ Enrollment Form from [www.Here2Assist.com](http://www.Here2Assist.com)



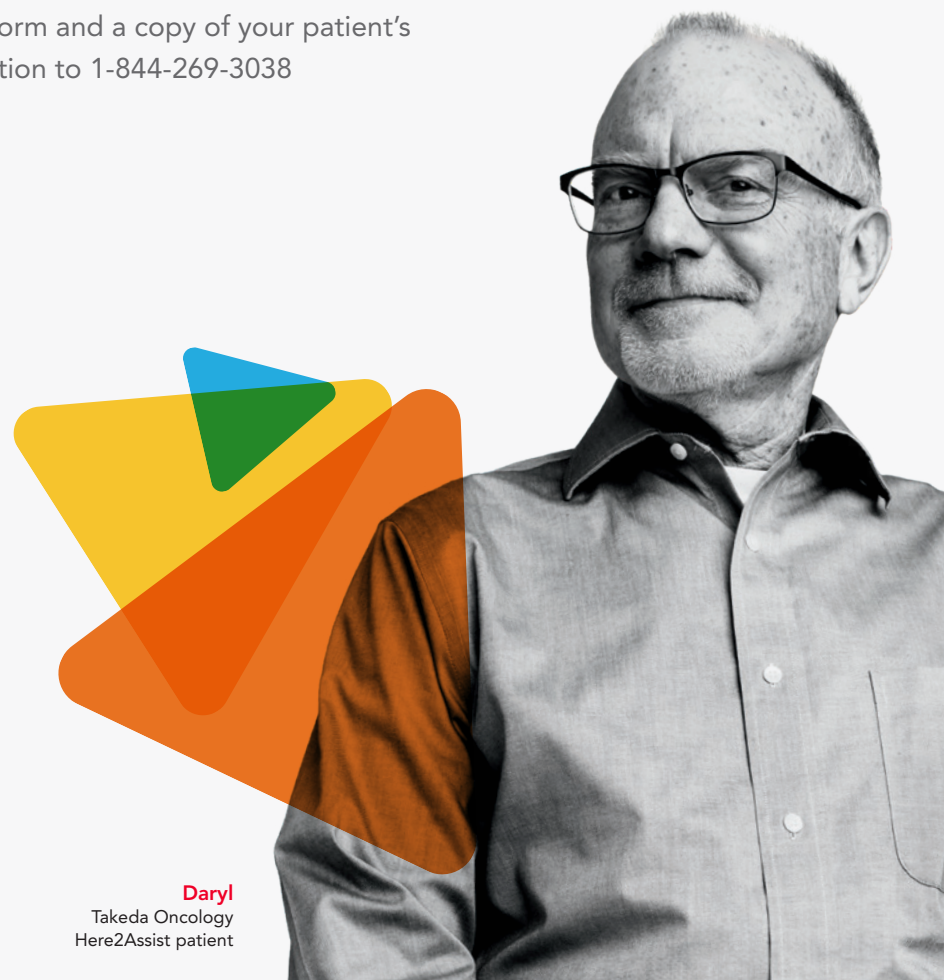
## 2. COMPLETE

and sign the enrollment form together with your patient



## 3. FAX

the completed enrollment form and a copy of your patient's insurance card and prescription to 1-844-269-3038



**Daryl**  
Takeda Oncology  
Here2Assist patient

# Access support

Our case managers are here to help your patients get access to their prescribed Takeda Oncology treatment through the following:

## BENEFITS VERIFICATION

Researching coverage guidelines for the prescribed medication on behalf of your patient, completing a benefits verification for your patient within 2 business days,\* and referring prescriptions to your preferred specialty pharmacy or helping to identify a specialty pharmacy in your patients' payer network

## PRIOR AUTHORIZATIONS

Providing information about the payer prior authorization process and submission requirements, sending renewal reminders, communicating status and expirations of prior authorizations to your office, and contacting the patient's specialty pharmacy to monitor and record the prior authorization status on behalf of your patient†

## PAYER DENIALS

Providing support by explaining reasons for the denial and the process for appeal to help patients access their medication†

- ▶ To download a Sample Letter of Medical Necessity or Sample Letter of Appeal, visit [www.Here2Assist.com/hcp](http://www.Here2Assist.com/hcp)

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## Questions about enrollment or access support?

Visit us at [www.Here2Assist.com](http://www.Here2Assist.com) or call us at 1-844-817-6468, Option 2.

**Let's Talk.** We're available Monday-Friday, 8AM-8PM ET.

\*Verification of benefits is not a guarantee of payment and does not take the place of written policy information. Healthcare providers should carry out their own benefits investigation, as necessary.

†Takeda Oncology Here2Assist does not complete forms, file claims, or appeal claims for callers. It cannot guarantee success in overturning a payer denial.



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# Access support (continued)

If your patient experiences a delay in insurance coverage determination of at least 5 days, your patient may be eligible to receive a 1-month supply of Takeda Oncology medication at no cost to them. Terms and Conditions apply.\*

## ENROLL YOUR PATIENTS IN THE **RAPIDSTART PROGRAM\***



### 1. ENSURE

your patient has a completed Takeda Oncology Here2Assist™ Enrollment Form on file



### 2. VISIT

[www.Here2Assist.com](http://www.Here2Assist.com) to download the appropriate RapidStart Request Form



### 3. WORK

with your patient to complete the RapidStart Request Form



### 4. FAX

the completed RapidStart Request Form, along with an on-label prescription for your patient's medication, to 1-844-269-3038

RapidStart Program eligibility to be determined upon enrollment.

**Speak with your patient's case manager for more details.**

\*The RapidStart Program provides a 1-month supply of treatment of the prescribed Takeda Oncology medication at no charge for eligible patients new to therapy experiencing a delay in insurance coverage determination of at least 5 business days. There is no purchase obligation by virtue of a patient's participation in the RapidStart Program. Patients must have an on-label, valid prescription for the Takeda Oncology medication, and a medical necessity for being prescribed the Takeda Oncology medication. Patients must be enrolled in the Takeda Oncology Here2Assist Program to qualify. Free product for the RapidStart Program will only be available through the RapidStart Program noncommercial specialty pharmacy. A delay in coverage determination of at least 5 days is required for patients to be eligible for the RapidStart Program. The program may not be combined with any other offer and is not available to patients whose insurers have made a final determination to deny the patient coverage for the prescribed Takeda Oncology medication. Takeda reserves the right to change or end the program at any time. Benefits provided under the program are not transferable.

Takeda Oncology Here2Assist works with you to help get Takeda Oncology medication to your patient.

### **SPECIALTY PHARMACY REFERRAL AND COORDINATION**

Our case managers can assist in referring your Takeda Oncology medication prescription to the appropriate specialty pharmacy based on your patient's coverage.

### **IN-OFFICE DISPENSING†**

In-office dispensing may be available for some Takeda Oncology medications. To arrange in-office dispensing, please contact Takeda Oncology Here2Assist at 1-844-817-6468, Option 5, Monday-Friday, 8AM-8PM ET.

## Questions about access support?

Visit us at [www.Here2Assist.com/hcp](http://www.Here2Assist.com/hcp) or call us at 1-844-817-6468, Option 2.

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†May not apply to all products.



**Hans**  
Takeda Oncology  
Here2Assist patient



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# Financial assistance



## TAKEDA ONCOLOGY CO-PAY ASSISTANCE PROGRAM

For patients who are commercially insured and concerned about their out-of-pocket costs, the Takeda Oncology Co-Pay Assistance Program\* may be able to help.

### HELP YOUR PATIENTS ENROLL TODAY

Visit [www.TakedaOncologyCopoly.com](http://www.TakedaOncologyCopoly.com) or call to speak with a Takeda Oncology Here2Assist™ case manager at 1-844-817-6468, Option 2, Monday-Friday, 8AM-8PM ET.



**Your patient could  
pay as little as \$0  
per prescription.**

Terms and Conditions apply.\*

\*By enrolling in the Takeda Oncology Co-Pay Assistance Program (the "Program"), you acknowledge that you currently meet the eligibility criteria and will comply with the following terms and conditions:

You must be at least 18 years old, a resident of the United States or a US Territory, and have commercial (private) prescription insurance that does not cover the entire cost of the medication. The Program is not valid for patients whose prescription claims are eligible to be reimbursed, in whole or in part, by any state or federal government program, including, but not limited to, Medicare, Medicare Advantage, Medigap, Medicaid, Department of Defense (DoD), Veterans Affairs (VA), TRICARE, Puerto Rico Government Insurance, or any state patient or pharmaceutical assistance program. Patients who become eligible for or start using government insurance will no longer be eligible for the Program. The Program is not valid if the entire cost of your prescription is reimbursable by a private insurance plan or other private health or pharmacy benefit programs. You are responsible for reporting receipt of Program assistance to any insurer, health plan, or other third party who pays for or reimburses any part of the medication cost, as may be required.

You agree that you will not submit the cost of any portion of the product dispensed pursuant to this Program to a federal or state healthcare program (including, but not limited to, Medicare, Medicare Advantage, Medicaid, TRICARE, VA, DOD, etc.), for purposes of counting it toward your out-of-pocket expenses, and to notify Takeda Oncology Here2Assist™ if you become eligible for a federal or state healthcare program. This Program is not conditioned on any past, present or future purchase of any Takeda product, including refills. This Program is valid for 12 months, and your co-pay card may be renewed every 12 months, subject to continued eligibility. This offer is not valid with any other program, discount, or offer involving your prescribed Takeda Oncology medication. This offer may be rescinded, revoked, or amended without notice. No reproductions. This offer is void where prohibited by law, taxed, or restricted. Limit one offer per purchase. No income requirements or membership fees. This Program is not health insurance. Cash value of 1/100 of 1¢. For questions about this offer, please contact the Takeda Oncology Co-Pay Assistance Program, a patient support service of Takeda Oncology Here2Assist, at 1-844-817-6468, Option 2, Monday-Friday, 8AM-8PM ET.



## TAKEDA ONCOLOGY PATIENT ASSISTANCE PROGRAM

If your patient is uninsured or the prescribed medication is not covered, the patient may be eligible to receive their Takeda Oncology medication at no cost through our Patient Assistance Program (PAP).†

### HELP YOUR PATIENTS APPLY FOR PAP TODAY

- ▶ Visit [www.Here2Assist.com](http://www.Here2Assist.com) to download the Takeda Oncology Patient Assistance Program Application
- ▶ Work with your patient to complete and submit the application with a valid prescription for his or her medication

If your patient qualifies, he or she may be enrolled for up to 1 year. Upon enrollment, a Takeda Oncology Here2Assist case manager will notify you and your patient. A 1-month supply of medication will be delivered to your patient at no cost to them. Each month, a Takeda Oncology Here2Assist case manager will follow up with your patient to confirm that he or she is still being treated and is eligible to receive another month's supply of medication.

### TAKEDA ONCOLOGY HERE2ASSIST NOTES:

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## Looking for more?

Visit us at [www.Here2Assist.com/hcp](http://www.Here2Assist.com/hcp) or call us at 1-844-817-6468, Option 2.

Let's Talk. We're available Monday-Friday, 8AM-8PM ET.

†To be eligible for the Patient Assistance Program, patients must meet certain financial and insurance coverage criteria. A Patient Assistance Program Application must be submitted in order to confirm patient eligibility.



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# Helpful resources

TAKEDA ONCOLOGY HERE2ASSIST™ CASE MANAGERS CAN PROVIDE INFORMATION ABOUT AVAILABLE SUPPORT SERVICES FOR PATIENTS INCLUDING:

- ▶ Financial assistance for eligible patients
- ▶ Regular follow-up calls
- ▶ Nurse navigators to support their product education journey\*

\*For EXKIVITY® (mobocertinib) patients only.

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## Questions about additional resources?

Visit us at [www.Here2Assist.com/hcp](http://www.Here2Assist.com/hcp) or call us at 1-844-817-6468, Option 2.

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# Talk to your patients about Takeda Oncology Here2Assist™ today

## A GUIDE TO TAKEDA ONCOLOGY HERE2ASSIST

Visit [www.Here2Assist.com](http://www.Here2Assist.com) to access your comprehensive patient support services.

### ACCESS SUPPORT

Connect your patients to personalized support

- Visit [www.Here2Assist.com](http://www.Here2Assist.com) together with your patient to download, complete, and submit the enrollment form
- Once enrolled, our Takeda Oncology Here2Assist case managers can assist your patients with navigating access support
- Case managers can also help eligible patients get started on their Takeda Oncology therapy in the event of an insurance delay

### FINANCIAL SUPPORT

Assist your patients with financial assistance programs

- Learn about our Takeda Oncology Co-Pay Assistance Program,\* including a link to the enrollment website and downloadable enrollment forms
- Find out more about our Takeda Oncology Patient Assistance Program,\* including downloadable enrollment forms

### HELPFUL RESOURCES

Provide your patients with information about additional resources

- Learn about general medical terms with our Guide to Understanding Medication Coverage



# Enrollment is simple

Takeda Oncology Here2Assist™ can be your patients' connection to personalized support



## 1. DOWNLOAD

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## 2. COMPLETE

and sign the enrollment form together with your patient



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## Still have questions about Takeda Oncology Here2Assist?

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Please see accompanying ICLUSIG® full [Prescribing Information](#), including Boxed Warning.

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