



# **JELMYTO Affordability Options for Patients**

# **UroGen Support™ is here to help**

We are committed to helping patients access JELMYTO® (mitomycin) for pyelocalyceal solution. UroGen Support may help identify financial assistance programs. These programs are for eligible patients who have been prescribed JELMYTO and who need help managing the cost of treatment. The appropriate program will depend on the patient's coverage.







#### For Patients with Commercial Insurance

Patients with commercial health insurance may qualify for the UroGen Support™ Copay Program. Eligible patients will pay as little as \$50 per dose of JELMYTO for the cost of the drug. In order to qualify for the program, patients must be enrolled in the UroGen Support program.

The maximum benefit is \$4000 per dose with a maximum total benefit of up to \$13,800 per year.

Physicians bill the program as secondary insurance, once primary insurance benefit is adjudicated.

Additional terms and conditions apply. See back page for more details.



#### For Patients Without Insurance

If your patient does not have health insurance, the UroGen Support Patient Assistance Program (PAP) may be able to help. To qualify for the PAP, the following requirements must be met:

 Patient must have been prescribed JELMYTO for an on-label indication

 Patient must have an adjusted gross income of ≤400% of the Federal Poverty Level based on household income



Enroll your patients in UroGen Support by completing the patient enrollment form on <a href="www.JELMYTO.com/hcp/support">www.JELMYTO.com/hcp/support</a>.

If you have any questions, contact UroGen Support at **855-JELMYTO**.







## For Patients Insured by Medicare or Medicaid

Charitable foundations may help cover the cost of cancer treatment for patients with federally funded insurance like Medicare or Medicaid patients.

Some organizations have assistance programs specifically for people with urological cancer. These foundations are *not affiliated with UroGen Pharma*. Each organization has its own eligibility requirements for enrollment. UroGen cannot guarantee that these outside organizations can help. Contact them directly for more information.

CancerCare Co-Payment Assistance Foundation www.cancercare.org
1-866-55-COPAY (1-866-552-6729)

Good Days Fund www.mygooddays.org 1-877-968-7233

HealthWell Foundation www.healthwellfoundation.org 1-800-675-8416

Patient Access Network Foundation www.PANfoundation.org 1-866-316-7263

Patient Advocate Foundation www.patientadvocate.org 1-800-532-5274

Patient Services, Inc. www.patientservicesinc.org 1-800-366-7741

The Assistance Fund www.tafcares.org 1-855-845-3663









### **UroGen Support™ Copay Program Terms and Conditions**

- Patients are not eligible to use this program if they are enrolled in a state or federally funded insurance program, including but not limited to Medicare, Medicaid, TRICARE, Veteran Affairs health care, a state prescription drug assistance program, or the Government Health Insurance Plan available in Puerto Rico
- Patient must have private insurance. Offer is not valid for cash-paying patients
- With this program, eligible patients will pay as little as \$50 per dose of JELMYTO for the cost of the drug. In order to qualify for the copay program, patients must be enrolled in the UroGen Support program. The maximum benefit is \$4000 per dose with a maximum total benefit of up to \$13,800 per year
- You are responsible to comply with any use restrictions as mandated by your insurer or health plan

- •This copay program is not valid where prohibited by law
- The program cannot be combined with any other savings, free trial, or similar offer for the specified prescription
- •Offer good only in the U.S. and Puerto Rico
- No other purchase is necessary
- Data related to your redemption of the copay program may be collected, analyzed, and shared with UroGen for market research and other purposes related to assessing UroGen's programs. Data shared with UroGen will be aggregated and de-identified; it will be combined with data related to other copay program redemptions and will not identify you
- UroGen reserves the right to rescind, revoke, or amend this offer without notice
- •Offer expires 12/31/2021







Please click here for Full Prescribing Information for JELMYTO.

