

 Bristol Myers Squibb®
Access **Support**® >

Support with purpose



You are the reason
behind what we do.

Patient Brochure





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Welcome to BMS Access Support[®]

BMS Access Support[®] is committed to helping you access your prescribed BMS medications. We offer coverage assistance to support medication access as well as financial support options and educational resources to support you throughout your treatment journey.

Understanding and navigating the healthcare process can be complicated and overwhelming. This guide is intended to be a roadmap to help you understand the steps to gaining access to the medicine your doctor prescribed and to help you understand the resources that are available to you through BMS Access Support[®].

At BMS, we provide support with purpose:



Coverage and Access Assistance^{†*}: Upon your request, BMS Access Support[®] may be able to help you review your insurance benefits and understand your coverage for your medication. If your insurer requires prior authorization, BMS Access Support[®] may be able to provide you and your doctor information about this requirement.



Financial Support: We may be able help you find support to cover the costs of your prescribed BMS medications. If you have commercial insurance, you may be eligible for a \$0 co-pay offer.[†] If you are insured through a government program or do not have insurance, BMS Access Support[®] can provide you with information about independent charitable foundations.



Educational Resources: Understanding the insurance process and accessing your treatment can be challenging. BMS Access Support[®] offers a library of resources that can help you better understand your healthcare coverage and guide you through steps in your treatment journey.

For more information, you can give us a call at **1-800-861-0048**, 8 AM to 8 PM ET, Monday-Friday to speak with a Patient Access Specialist, or visit www.BMSAccessSupport.com.

*The accurate completion and submission of reimbursement- and coverage-related documentation to the patient's insurance plan is the responsibility of the provider and patient. Bristol Myers Squibb and its agents cannot guarantee coverage for any medication or treatment.

[†]Restrictions apply. Please go to www.BMSAccessSupport.com for full Terms & Conditions, including complete eligibility requirements.

Enrolling in BMS Access Support[®]

Your doctor will work with you to enroll in BMS Access Support[®] by completing either a printed or online enrollment form. There will be a few pages that you will need to review, complete, and sign. Here are some tips to help you complete your part of the enrollment form.

When your doctor is enrolling you in BMS Access Support[®], you may need to have the following information available:



Personal information, including your home address and phone number



Insurance information, including the type of insurance you have (e.g., private/employer-based insurance, Medicaid, Medicare, etc.), policy #, group #, and policyholder name



Secondary insurance and prescription insurance coverage information, if applicable



In certain cases, you will need information about your total household income



Once your enrollment has been processed by BMS Access Support[®], our Patient Access Specialists will review your insurance coverage and may help determine the following:

- ✓ Whether or not your medicine is covered by your insurance
- ✓ If there are specific requirements that you must meet in order to get your treatment covered
- ✓ How much of your treatment costs are covered by your insurance and what your out-of-pocket costs may be

Additionally, through BMS Access Support[®] you can:

- Find information about financial support programs that are available for eligible patients
- Better understand your treatment journey, with educational videos and tools available at www.BMSAccessSupport.com/patient
- Get answers to your coverage-related questions by speaking with a Patient Access Specialist at **1-800-861-0048**



Understanding the Insurance Coverage Journey: Oral Medications

Oral medications (in the form of capsules, tablets, pills, or liquid) are usually taken at home. If you are prescribed an oral medication, you will take this medication by mouth.¹

If your treatment requires both oral and HCP-administered medications, your care team will help to ensure that your medication shipment is aligned with your treatment regimen.

1. Oral Medications. informedhealth.org website. <https://www.informedhealth.org/oral-medications.html>. Accessed September 7, 2023 2. Affordable Care Act. Healthcare.gov website. <https://www.healthcare.gov/glossary/affordable-care-act/>. Accessed May 9, 2023

Your coverage journey may look something like this:

1

Doctor Appointment

You visit your doctor and receive medical care.

2

Treatment Decision

Your doctor decides which treatment is right for you.

3

Office Confirms Coverage

Your provider office may work with you, your insurance plan, the medicine manufacturer, and/or your specialty pharmacy to determine your coverage and which pharmacy to use.

If You Are Covered

Prescription triage

Your doctor's office will triage your prescription to the appropriate pharmacy for dispense.

Your specialty pharmacy will call you to determine shipment/pickup of medication.

NOTE: Your out-of-pocket cost-share responsibility depends on your insurance plan. This may comprise co-pay, co-insurance, and/or deductible, depending on your plan. Be sure to confirm any out-of-pocket costs with your pharmacy before finalizing shipment/pickup details.

If You Are NOT Covered

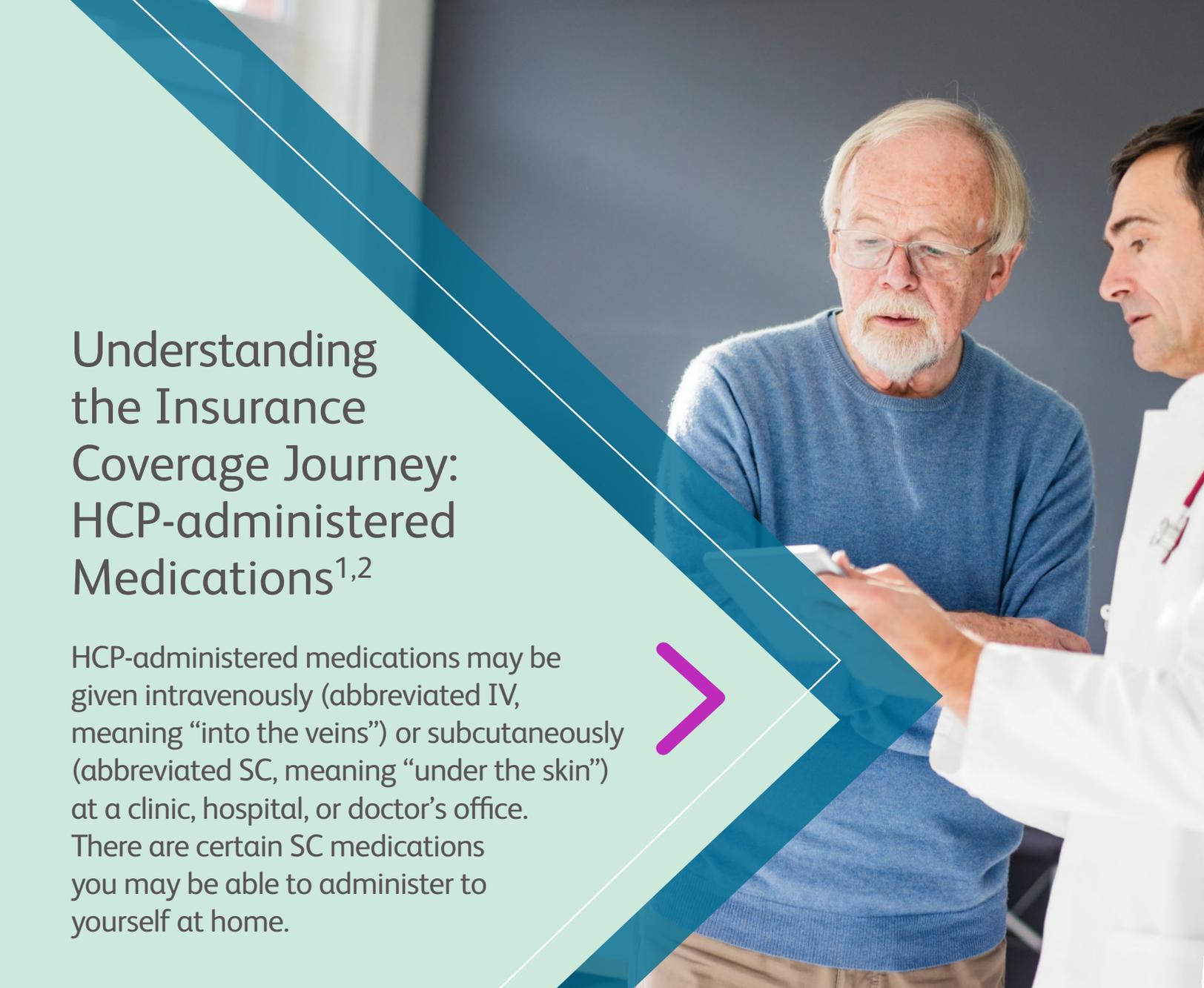
Your care team may be able to help you identify alternative options, such as:

- Affordable Care Act Plans: Health plans available under the Affordable Care Act may be able to help you pay for your healthcare, including prescription medications²
- Medicare, Medicaid, and Social Security Extra Help (low-income subsidy)
- Charitable foundations: BMS Access Support[®] can provide information about independent charitable foundations that may be able to provide financial support. It is important to note that these charitable foundations are independent from Bristol-Myers Squibb Company. Each foundation has its own eligibility criteria and evaluation process. Bristol Myers Squibb cannot guarantee that a patient will receive assistance. For more information, call BMS Access Support[®] at **1-800-861-0048**



Unsure about your type of coverage?

You can find an overview of useful information about how health insurance helps you pay for treatment at www.BMSAccessSupport.com.



Understanding the Insurance Coverage Journey: HCP-administered Medications^{1,2}

HCP-administered medications may be given intravenously (abbreviated IV, meaning “into the veins”) or subcutaneously (abbreviated SC, meaning “under the skin”) at a clinic, hospital, or doctor’s office. There are certain SC medications you may be able to administer to yourself at home.

If your treatment requires both oral and HCP-administered medications, your care team will help to ensure that your medication shipment is aligned with your treatment regimen.

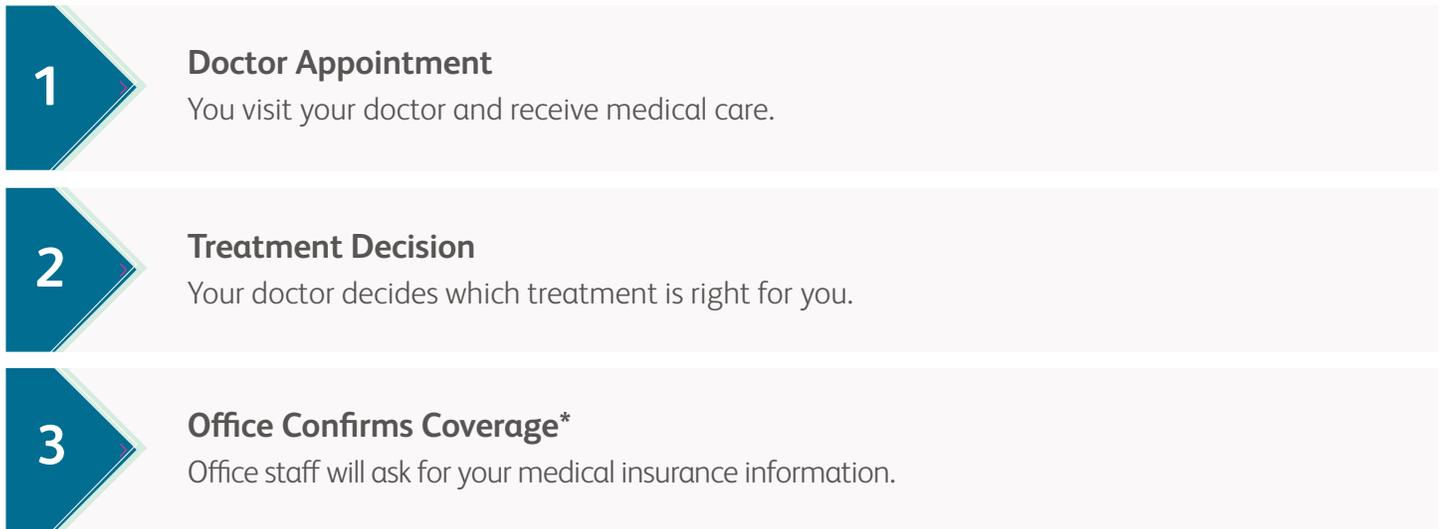
*Bristol Myers Squibb (BMS) Access Support[®] may be able to assist your doctor with questions relating to your access to a prescribed BMS medication.

†BMS Access Support[®] can help identify financial assistance programs for patients who need help managing the cost of treatment. The appropriate program will depend on the patient’s coverage.

‡For patients with no prescription drug insurance: BMS Access Support[®] can provide information to your doctor regarding independent charitable programs that may be able to provide financial support, including the BMS Patient Assistance Foundation, a charitable organization that provides medicine, free of charge, to eligible, uninsured patients who have an established financial hardship. These charitable organizations are independent from Bristol-Myers Squibb Company and have their own eligibility criteria and evaluation process. Bristol-Myers Squibb Company cannot guarantee that a patient will receive assistance.

1. Case-Lo C. Intravenous medication administration: what to know. Healthline. July 5, 2021. Accessed May 9, 2023. <https://www.healthline.com/health/intravenous-medicationadministrationwhatto-know> **2.** Case-Lo C. What is subcutaneous injection? Healthline. Updated September 17, 2018. Accessed May 9, 2023. <https://www.healthline.com/health/subcutaneous-injection#types-of-medications>

Your coverage journey may look something like this:



If You Are Covered

Office will schedule an appointment with you for treatment.

- 1. Treatment Received**
Doctor administers your treatment.
- 2. Claims Process**
Office submits a claim to your medical insurance for payment. Once the claim is processed, your doctor's office will receive payment for the medications you received and the physician services rendered.

If You Are Covered But With Cost Share*

Ensure understanding of insurance coverage/requirements and which out-of-pocket costs are your responsibility. If cost sharing is a concern, see below.[†]

- 1. Treatment Received**
Doctor administers your treatment.
- 2. Claims Process**
Office submits a claim to your medical insurance for payment. Once the claim is processed, your doctor's office will receive payment for the medications you received and the physician services rendered.
- 3. Office bills patient***
Doctor's office bills you for your out-of-pocket cost-share responsibility (comprising co-pay, deductible, or co-insurance payment).[†]

If You Are NOT Covered**

If you do not have medical insurance or if your medication is not covered by your insurer, there may be options to discuss with your doctor. These include:

- Monthly payment plan
- Affordable Care Act options, if eligible
- Independent charitable foundations[‡]



Unsure about your type of coverage?

You can find an overview of useful information about how health insurance helps you pay for treatment at www.BMSAccessSupport.com.

Learn About Financial Support Offerings

One of the ways we can support your treatment journey is by sharing information about financial support options. The options available are based on the type of insurance you have.

BMS Access Support Co-Pay Assistance Program

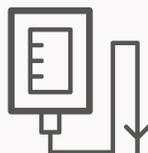
The BMS Access Support Assistance Program helps eligible, commercially insured patients who have been prescribed select BMS medications with out-of-pocket deductibles, co-pays, or co-insurance requirements.



For select oral medications

\$0 Co-pay*
per one-month supply

Subject to annual maximum benefit



For select HCP-administered medications

\$0 Co-pay*
per dose

Subject to annual maximum benefit

*Restrictions apply. For additional information about eligibility, please see the Terms & Conditions provided at www.BMSAccessSupport.com.



Scan the QR code to learn more about financial support options.



Independent charitable foundations

For patients who have government insurance (Medicare, Medicaid, or TRICARE) or who do not have insurance, independent charitable foundations may be able to assist with treatment costs. Your doctor's office may be able to help you identify available charitable support.

- BMS Access Support® may be able to offer information about available independent charitable foundations
- It is important to note that these charitable foundations are independent from Bristol Myers Squibb Company
- Each foundation has its own eligibility criteria and evaluation process. Bristol Myers Squibb cannot guarantee that a patient will receive assistance



Questions?

Call **1-800-861-0048** to talk to a Patient Access Specialist.

To sign up for the BMS Access Support Co-pay Program, talk to your doctor or visit www.bmsaccesssupport.com for more information.

Resources For Your Treatment Journey

The resource center includes educational guides and videos with information to help you navigate the insurance coverage process, find potential financial support options, and understand how we can support your journey.

Downloadable resources



Understanding Your Healthcare Benefits

Information on how health insurance works and ways BMS Access Support® can help



A Guide to Medicare Part D

A step-by-step guide through each phase of Medicare Part D coverage for specialty drugs



Medicare Low-Income Subsidy Brochure

An overview of additional financial assistance that may be available to some people who receive Medicare prescription drug coverage (Medicare Part D)



Video resources



What is Health Insurance?

Health insurance can have a lot of moving parts. Watch this video at BMSAccessSupport.com to understand the basics of health insurance, coverage, payments, and more.



What is an Explanation of Benefits (EOB)?

If this is not a bill, then what is it? Watch this video at BMSAccessSupport.com to get a better understanding of the EOB.

Visit www.BMSAccessSupport.com to access helpful information to support your journey, including the resources shown here.



Scan the QR code to see all available resources at www.BMSAccessSupport.com

Glossary

Knowing common insurance terms can be helpful when trying to understand your healthcare coverage.

Affordable Care Act: A law enacted in March 2010 (sometimes called ACA or “Obamacare”) that makes health insurance affordable to more people.¹

Claims Appeal: A special process to appeal a coverage decision. You and/or your doctor would prepare paperwork to support the appeal.²

Co-insurance: A type of cost sharing after you meet your annual deductible in some health plans. You pay a certain percentage of the cost of a covered service (typically 20%) and your plan pays the remaining amount.³

Co-pay/Co-payment: Another type of cost sharing in some health plans. You pay a fixed amount (\$20, for example) for a covered healthcare service or drug after you’ve paid your deductible. Co-pays can vary for different items or services within the same plan, like drugs, lab tests, and visits to specialists.³

Co-pay Accumulator: Health plan program that does not begin counting patient out-of-pocket (OOP) costs toward deductible and OOP maximum until after the maximum value of manufacturer-sponsored support (coupon/card) is reached.⁴

Co-pay Maximizer: Health plan program that applies maximum value of manufacturer-sponsored support (coupon/card) evenly throughout a benefit year.⁴

Deductible: After you pay your insurance premium, the deductible is the amount you pay for healthcare services each year before the health plan starts to pay its share. Each health plan may have a different deductible amount. After you pay your deductible, you usually pay either a co-pay or co-insurance for covered services. Your insurance company pays the rest.³

Explanation of Benefits: An Explanation of Benefits (EOB) may look like a bill, but it is not a bill. It comes from your health insurance plan (not your doctor). It is a statement that explains how your insurance company processed a claim from your doctor for services performed.⁵



Federal Programs: The main federal healthcare programs are Medicare and Medicaid. Both are run by the Centers for Medicare & Medicaid Services (CMS), an agency of the federal government.⁶

Formulary: A list of prescription drugs covered by a drug plan or another health plan offering prescription drug benefits (also called a drug list). Drugs may be grouped into “tiers” depending on how expensive they are. More expensive “higher-tier” drugs may require additional cost sharing.⁷

Out-of-Pocket Costs: Expenses for medical care that are not reimbursed by insurance, including deductibles, co-insurance, and co-payments for covered services, plus all costs for services that are not covered.⁴

Prior Authorization: A Prior Authorization (PA) is a verification from your doctor that states that your medication is medically necessary. Your insurance company may require a PA before they will cover certain medications.⁸

1. Affordable Care Act. Healthcare.gov website. Accessed May 9, 2023. <https://www.healthcare.gov/glossary/affordable-care-act/> 2. US Centers for Medicare & Medicaid services. Appeal. Accessed April 21, 2023. <https://www.healthcare.gov/glossary/appeal/> 3. Mayo Clinic. Glossary of billing and insurance terms. Accessed April 20, 2023. <http://www.mayoclinic.org/patient-visitor-guide/billing-insurance/glossary> 4. Co-pay Accumulators and Co-pay Maximizers Policy Brief. American Society of Clinical Oncology website. <https://old-prod.asco.org/sites/new-www.asco.org/files/content-files/advocacy-and-policy/documents/2021-AccumulatorsPolicyBrief.pdf>. Accessed April 20, 2023 5. Healthinsurance.org. Explanation of Benefits. Accessed April 21, 2023. <https://www.healthinsurance.org/glossary/explanation-of-benefits/> 6. Centers for Medicare and Medicaid Services. National Library of Medicine Website. Accessed April 20, 2023. https://www.nlm.nih.gov/nichsr/stats_tutorial/section4/ex6_CMS.html#:~:text=The%20Centers%20for%20Medicare%20and,are%20looking%20for%20health%20data 7. US Centers for Medicare & Medicaid Services. What Medicare Part D drug plans cover. Accessed April 20, 2023. <https://www.medicare.gov/drug-coverage-part-d/what-medicare-part-d-drug-plans-cover> 8. Academy of Managed Care Pharmacy. Concepts: prior authorization. Accessed April 20, 2023. https://www.amcp.org/prior_authorization

Looking for support? We're here for you.

Coverage assistance, educational resources, and financial support options may be available through **BMS Access Support®**



Call a Patient Access Specialist at
1-800-861-0048, 8 AM to 8 PM ET,
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The accurate completion of reimbursement- or coverage-related documentation is the responsibility of the healthcare provider and the patient. Bristol Myers Squibb and its agents make no guarantee regarding reimbursement for any service or item.