HEALTH INSURANCE UNDERSTANDING MAKES A DIFFERENCE

Skyrizi°complete



Please see Uses and Important Safety Information.

Please see full Prescribing Information, including Medication Guide, and discuss with your doctor.

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MAKING SENSEOF HEALTH INSURANCE

When you're taking a specialty medicine like SKYRIZI, understanding the insurance process can help you stay on track with your prescribed treatment plan and avoid disruptions.

THIS BROCHURE CAN HELP YOU BETTER UNDERSTAND:



Medical and prescription drug coverage



How to verify your coverage



Specialty pharmacies



Commonly used insurance terms

Dealing with interruptions



This brochure focuses mainly on commercial insurance. If you have questions about Medicare or other coverage, just call 1.866.SKYRIZI (1.866.759.7494).*

for holidays.

*Help is available Monday through Friday, from 8:00 AM to 8:00 PM ET, except



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WHAT IS HEALTH INSURANCE?



Health insurance is a type of insurance that helps cover what we spend to maintain our health and wellness.

TYPES OF COVERAGE



Medical Benefits

May cover your SKYRIZI injections and related costs.



Pharmacy Benefits

May cover SKYRIZI prescriptions, including the SKYRIZI Pen or pre-filled syringe.



Why this matters to you

You may have questions about your health insurance plan. An Insurance Specialist will work with you to find answers. Reach out to an Insurance Specialist at **1.866.SKYRIZI** (1.866.759.7494).

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TYPES OF HEALTH INSURANCE PROVIDERS

There are 2 major health insurance providers:

COMMERCIAL (PRIVATE)

Insurance offered by privately owned companies:

- Insurance you buy on your own
- Insurance provided by your employer
- An insurance plan you buy through "The Health Insurance Marketplace" provided by the Affordable Care Act (ACA)

GOVERNMENT

Insurance programs offered by the government:

- Medicare for people over 65
 - Medicare Part B Medical benefits, including SKYRIZI infusions
 - Medicare Part D Prescription drug benefits, including OBI
- Medicaid for people in financial need
- Veterans Affairs benefits for military veterans

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COMMERCIAL HEALTH INSURANCE PLANS

Some plans restrict you to using their network of doctors, hospitals, and other medical service providers. Others give you the option to use providers outside of the plan's network, and may pay a share of the outside provider's costs.

5 of the most common types are:

TYPE OF PLAN	Health Maintenance Organization (HMO)
TYPE OF NETWORK	Your doctors, hospitals, and health care services are all kept within one network.
OPTION TO GO OUT OF NETWORK?	No.

TYPE OF PLAN	Preferred Provider Organization (PPO)
TYPE OF NETWORK	You choose from a list of "preferred providers" who are considered "in network." Doctors not on the preferred list are considered "out of network."
OPTION TO GO OUT OF NETWORK?	Varies by plan.
2	
TYPE OF PLAN	High-Deductible Health Plan (HDHP)
TYPE OF NETWORK	Higher annual deductible and lower premiums than a typical health insurance plan.

OPTION TO GO OUT

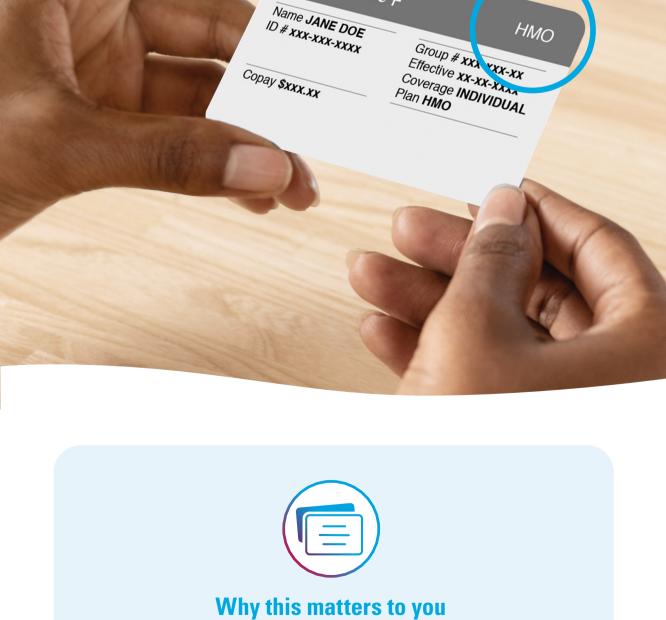
OF NETWORK?

TYPE OF PLAN	Point-of-Service Plan
TYPE OF NETWORK	You can choose either a preferred provider or an outside provider.
OPTION TO GO OUT OF NETWORK?	You will need a referral from an in-network doctor and may likely have to pay more.
5	
TYPE OF PLAN	Fee-for-Service Plan/ Indemnity Policies

Varies by plan.

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? ard.

HealthCare+



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Each plan has different rules around the healthcare providers, hospitals, and services you can use. Find out what options are available under your insurance plan.

discuss with your doctor.

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including Medication Guide, and



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INSURANCE COSTS:

2 THINGS TO KNOW

Monthly Premium

How much you pay each month for your insurance policy. This payment is similar to your mortgage or phone bill.

Out-of-Pocket Costs 2 What you'll pay in healthcare costs throughout the policy year.

OUT-OF-POCKET COSTS CAN INCLUDE:

Your Deductible

What you owe before your insurance starts paying.

Example: If your healthcare deductible is \$1,500, that's how much you have to spend before your insurance begins to pay for healthcare costs.

Your Co-Pay/Co-Insurance

The cost you pay for each prescription and/or medical service.

Example: A co-pay is a flat amount; you might pay \$25 for an antibiotic. Co-insurance is a percentage of the costs; for example, you might pay 20% of the cost.

Out-of-Pocket Maximum

The most you'll pay in medical expenses in a year before you're fully covered. Example: If your yearly maximum is \$3,900, once

you have spent that amount, the insurance may pay 100% of your healthcare costs.



High-deductible health plans (HDHP) can be

a balancing act. You may pay a lower monthly premium but higher out-of-pocket costs. Depending on your medical needs, you may end up spending more out-of-pocket on healthcare costs before meeting your deductible, which is when your insurance company starts paying its share. Combining a HDHP with a Health Savings Account (HSA) may help with these costs. An HSA allows you to set aside pre-taxed money to pay for certain healthcare expenses.

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WHAT YOU SHOULD KNOW **ABOUT PRESCRIPTION**

DRUG COVERAGE

Your insurance company may not be the company that handles your drug coverage. While your insurance plan may offer drug benefits, the coverage may be managed through a separate company called a "pharmacy benefit manager."

This company helps set the costs and requirements for the drugs you take, and can provide you with more information about your coverage.

You may have to carry 2 separate insurance cards:

HealthCare+ НМО Name JANF DOF Group # xxx-xxx-xx Effective xx-xx-xxxx ID # xxx-xxx-xxxx Coverage **INDIVIDUAL** Plan HMO Copay \$xxx.xx

From the company that provides your **medical benefits**.

Prescription Card Rx Name JANE DOE Copay \$xxx.xx ID # xxx-xxx-xxxx Coverage INDIVIDUAL Plan **HMO** Rx **YES** Rx **YES RXBIN xxxxx** RXBIN xxxxx RXPCN xxxxxxx RXPCN xxxxxxx

From the company that manages your pharmacy benefits.

same card for both medical and pharmacy coverage.

Note: Some insurance companies may have the



under your **medical benefit** and pen or pre-filled syringe

treatments under your pharmacy benefit, you will need two different benefit verifications. See "STEPS TO FILLING A PRESCRIPTION" on page 10.

including **Medication Guide**, and

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WHAT IS A FORMULARY?

A formulary is a list of medications that have been approved for coverage by an insurance plan.

Within a formulary, there may be differences in your share of the cost (your copay or co-insurance) based on which "tier" your medication is in. Some plans have 4 or 5 tiers, but generally, the lower the tier, the lower the cost. Here's an example:

TIER 1:

Generic drugs



TIER 2:

Common or preferred brand name medications



TIER 3:

Non-preferred brand name medications



TIER 4:

Specialty medications such as SKYRIZI





Why this matters to you

Your insurance plan may have special requirements before it will cover certain medicines.

An Insurance Specialist can help explain how SKYRIZI is covered on your formulary. Just call 1.866.SKYRIZI (1.866.759.7494).

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STEPS TO FILLING A PRESCRIPTION

When your doctor prescribes a specialty medication, they must first contact your insurance company to check your eligibility under your plan's requirements. This process includes "benefits verification" and "prior authorization."

BENEFITS VERIFICATION (BV)

The process that confirms:

- Your coverage for your medicine
- Any specific pharmacy requirements
- How much insurance will pay
- What your deductible, co-pay, and co-insurance will be

PRIOR AUTHORIZATION (PA)

The process that confirms:

 Your prescription meets the plan's coverage requirements

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HOW TO GET A BENEFITS VERIFICATION FOR YOUR MEDICINE

It's important to understand your insurance coverage for SKYRIZI. Changing circumstances may affect your coverage, such as enrolling in a new plan, or changes to your existing insurance benefits in the new calendar year.

Follow these steps to stay "in the know" about your SKYRIZI coverage:

STEP 1 - THE INFORMATION YOU'LL NEED



- Your name and address
- The name and address of your prescribing doctor
- Your Pharmacy Benefits Card
- Your Medical Benefits Card

Note: Some insurance companies may have the same card for both medical and prescription coverage.

STEP 2 - ONE CALL DOES IT



- Call an Insurance Specialist at **1.866.SKYRIZI** (1.866.759.7494)
- Tell the Insurance Specialist that you want to complete a benefits verification for your medicine.
- Give the Insurance Specialist the needed information.

STEP 3 - RESPONSE WITHIN 48 HOURS



- You will receive benefits verification in a follow-up phone call within 24-48 hours
- A written benefits verification summary will arrive in the mail in about 1-2 weeks

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TAKE NOTE:THE COST OF YOUR COVERAGE

Once you receive a benefits verification and understand your coverage, take a moment **to write down your out-of-pocket costs** for your medicine.

MY YEARLY DEDUCTIBLE IS:



Other questions to ask during the follow-up phone call. Does my insurance:

- Require a prior authorization? This is something your healthcare provider must complete.
- Require me to use a specific specialty pharmacy?
 If yes, note its name and number:
 - Specialty Pharmacy Name: _____
 - Specialty Pharmacy Phone Number:_____

MY CO-PAYMENTS AND CO-INSURANCE:



Your doctor may have specified a specialty pharmacy for your prescriptions or already sent them to one. You can call that pharmacy to confirm:

- If this specialty pharmacy is in or out of your insurance network.
- If this specialty pharmacy is out of network, how many "grace fills" are allowed, and would your prescription need to be transferred to an in-network pharmacy?
- Where is my prescription in the process of being filled?

MY OUT-OF-POCKET MAXIMUM:





Why this matters to you

Understanding how your insurance covers SKYRIZI can help you plan for out-of-pocket costs.

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WORRIED ABOUTAFFORDING YOUR MEDICINE?

You aren't alone with financial challenges and concerns. Skyrizi Complete is here to provide you with information and insights that can help you.

Here are some of the ways you may be able to save.



Use the Skyrizi Complete Savings Card:

You could pay as little as \$0* per treatment, if eligible.



Submit rebates*:

If eligible, you can submit claims if you have a SKYRIZI injections bill or have already paid out-of-pocket.



Navigate insurance decisions:

An Insurance Specialist can explain your coverage and answer your questions so you can choose the plan that's best for you.



Understand insurance and savings options that meet your needs:

Maybe you're unemployed or uninsured.

Or your insurance doesn't cover SKYRIZI. Whatever your situation, an Insurance Specialist can **explain your coverage options and potential ways to save.**



call one of our **Insurance Specialists** at **1.866.SKYRIZI** (1.866.759.7494).

*For eligible, commercially insured patients only. Please see Terms and

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Conditions on page 17.

UNDERSTANDING SPECIALTY PHARMACIES



What is a specialty pharmacy?

It's a pharmacy that manages the handling, dispensing, and specific requirements of specialty medicines.



What are specialty medicines?

They are medicines used to treat complex or rare conditions. They may need monitoring, special handling or shipping, or additional insurance approvals.

Getting your SKYRIZI from a specialty pharmacy

Once your health insurance approves your SKYRIZI, a specialty pharmacy fills your prescription.

STEP 1

Find out which specialty pharmacy your prescription was sent to, and ask your doctor for its name and phone number.

STEP 2

If eligible, sign up for the **Skyrizi Complete Savings Card** by calling **1.866.SKYRIZI** (1.866.759.7494). Always mention your Savings Card when you talk with your specialty pharmacy.

STEP 3

After your insurance approves your prescription, you should expect a call from your specialty pharmacy to arrange payment and delivery. For each of your SKYRIZI treatments, it's important to call your pharmacy to confirm your medicine has been shipped and delivered to help ensure it arrives when you need it.

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LIFE DOESN'T ALWAYS GO

EXACTLY AS PLANNED

Unexpected events can disrupt your ability to stay on track with your prescribed SKYRIZI treatment plan. Skyrizi Complete has resources to help you navigate these disruptions.



Changes in insurance coverage or costs?

Our **Health Insurance Comparison Chart** can help you choose the plan that's best for you:

- During Open Enrollment
- At other times when your insurance changes

Once your new coverage goes into effect, we can help you run a benefits verification. See the 3 simple steps **here**.



Job changes?

There may be a gap between when your previous coverage ends and your new employer's coverage begins.



If you need specific information such as when

Need guidance during a life change?

your coverage changes or when you need to know exactly what your out-of-pocket costs will be, contact an Insurance Specialist. They will work with you to make sure you have the answers you need.



Reach out to an Insurance Specialist at

Get answers when you need them

1.866.SKYRIZI (1.866.759.7494).



treatment, including costs for SKYRIZI Injections.
Skyrizi Complete Rebate may also be an option if you have a bill for your injection or have already paid out-of-pocket for your SKYRIZI.*

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Skyrızı* risankizumab-rzaa

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USES AND IMPORTANT SAFETY INFORMATION ABOUT

SKYRIZI[®] (risankizumab-rzaa)¹

SKYRIZI USES¹ SKYRIZI is a prescription medicine used to treat adults:

with moderate to severe plague psoriasis who may benefit from

- taking injections or pills (systemic therapy) or treatment using ultraviolet or UV light (phototherapy). with active psoriatic arthritis (PsA).
- IMPORTANT SAFETY INFORMATION¹

What is the most important information I should know about SKYRIZI® (risankizumab-rzaa)?

SKYRIZI is a prescription medicine that may cause serious side effects, including:

Serious allergic reactions: · Stop using SKYRIZI and get emergency medical help right away if you get any of the following symptoms of a serious allergic reaction:

- fainting, dizziness, feeling lightheaded (low blood pressure) - swelling of your face, eyelids, lips, mouth, tongue, or throat
- trouble breathing or throat tightness
- chest tightness
- skin rash, hives
- itching
- Infections:

SKYRIZI may lower the ability of your immune system to fight infections and may increase your risk of infections. Your healthcare

provider should check you for infections and tuberculosis (TB) before starting treatment with SKYRIZI and may treat you for TB before you begin treatment with SKYRIZI if you have a history of TB or have active TB. Your healthcare provider should watch you closely for signs and symptoms of TB during and after treatment with SKYRIZI. • Tell your healthcare provider right away if you have an infection or have symptoms of an infection, including: - fever, sweats, or chills

- cough shortness of breath
 - blood in your mucus (phleam)
 - muscle aches
 - warm, red, or painful skin or sores on your body different from
 - weight loss

passes into your breast milk.

reactions, and fungal skin infections.

doctor for medical advice about side effects.

diarrhea or stomach pain

your psoriasis

- burning when you urinate or urinating more often than normal Do not use SKYRIZI if you are allergic to risankizumab-rzaa or any

Brief Summary for a complete list of ingredients.

of the ingredients in SKYRIZI. See the Medication Guide or Consumer

your medical conditions, including if you: · have any of the conditions or symptoms listed in the section "What is the most important information I should know about SKYRIZI?"

Before using SKYRIZI, tell your healthcare provider about all of

 have TB or have been in close contact with someone with TB. have recently received or are scheduled to receive an immunization

(vaccine). Medications that interact with the immune system

may increase your risk of getting an infection after receiving live

have an infection that does not go away or that keeps coming back.

vaccines. You should avoid receiving live vaccines right before, during, or right after treatment with SKYRIZI. Tell your healthcare provider that you are taking SKYRIZI before receiving a vaccine. • are pregnant or plan to become pregnant. It is not known if SKYRIZI can harm your unborn baby.

• are breastfeeding or plan to breastfeed. It is not known if SKYRIZI

 become pregnant while taking SKYRIZI. You are encouraged to enroll in the Pregnancy Registry, which is used to collect

information about the health of you and your baby. Talk to your

- healthcare provider or call 1-877-302-2161 to enroll in this registry. 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 SKYRIZI?

SKYRIZI may cause serious side effects. See "What is the most important information I should know about SKYRIZI?" The most common side effects of SKYRIZI in people treated for plaque psoriasis and psoriatic arthritis include: upper

These are not all the possible side effects of SKYRIZI. Call your

SKYRIZI is available in a 150 mg/mL prefilled syringe and pen.

Use SKYRIZI exactly as your healthcare provider tells you to use it.

respiratory infections, headache, feeling tired, injection site

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088. If you are having difficulty paying for your medicine, AbbVie may be able to help. Visit AbbVie.com/

PatientAccessSupport to learn more. Skyrizi Complete Savings Card Terms & Conditions Eligibility: Available to patients with commercial insurance coverage for SKYRIZI® (risankizumab-rzaa) who meet eligibility criteria. This co-pay assistance program is

under any federal, state, or government-funded insurance programs (for example, Medicare [including Part D], Medicare Advantage, Medigap, Medicaid, TRICARE, Department of Defense, or Veterans Affairs programs) or where prohibited by law. Offer subject to change or termination without notice. Restrictions, including monthly maximums, may apply. This is not health insurance. For full Terms and Conditions,

visit SKYRIZISavingsCard.com or call 1.866.SKYRIZI for additional information. To learn about AbbVie's privacy practices and your privacy choices, visit https://abbv.ie/corpprivacy. Reference: 1. SKYRIZI [package insert]. North Chicago, IL: AbbVie Inc.

not available to patients receiving prescription reimbursement

including Medication Guide, or visit https://www.rxabbvie.com/pdf/ skyrizi_pi.pdf and discuss with your doctor. To learn more about AbbVie's privacy

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COMMONLY USED INSURANCE TERMS

Benefits Verification (BV):

The process that confirms your benefits and eligibility or your insurance coverage for a prescription or medical service.

Deductible:

The amount you will have to pay for your healthcare costs before your insurance starts paying. **Explanation of Benefits (EOB):**

A statement from the insurance administrator that tells you what

portion of the provider's charges are eligible for benefits under your insurance. **Formulary:**

The list of medicines that your health insurance plan will pay for

or cover. **Health Insurance Benefits:**

insurance plan.

Health Savings Account (HSA): A savings account that lets you set aside money, tax free, to pay

The healthcare items or services covered under a health

for qualified medical expenses.

Insurance Plans: Commercial Insurance:

Plans typically sold to consumers directly or to groups/

Government Insurance:

employers.

Insurance programs paid for and operated by the federal and state governments (examples: Medicaid, Medicare, and Veterans Affairs insurance) **Medicaid:**

A government insurance plan that offers healthcare coverage

and drug benefits to low-income individuals. **Medical Benefits:** The health care items or services covered under a health insurance

plan. **Medicare:**

A federal government insurance plan that provides healthcare coverage options and drug benefits for persons over 65 years old,

or disabled persons under the age of 65. **Open Enrollment:** An annual period during which people can enroll in a group-

Out-of-Pocket Costs:

sponsored health insurance plan.

Your expenses for medical care that aren't reimbursed by insurance.

25%, and the insurance pays 75%.

Co-Insurance:

Cost-Sharing Methods:

• Co-Pav:

Your share of the cost for a medical service or prescription that is a fixed amount. For example, you may pay \$25.

before your insurance plan begins paying 100%.

A third-party administrator hired by the insurance plan

The percentage of the cost that you will have to pay for a prescription or a medical service. Example: You may pay

Pharmacy Benefit Manager (PBM):

Pharmacy Benefits:

office.

to manage prescription drug coverage/programs for its insured population.

The most you have to pay for covered services in a plan year

Covered prescription drugs, usually self-administered, such as oral, injectable, or taken in other ways outside the physician's

Out-of-pocket Maximum:

Premium: The amount you pay for your health insurance every month. **Prior Authorization (PA):** The preapproval process your insurance plan uses to ensure that

your medicine is covered before your doctor orders it.



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