

Program Information & Eligibility Requirements:

Commercially insured patients may pay as little as \$100* for each ADSTILADRIN prescription.

*Available only for patients who meet eligibility requirements. Program does not cover the cost of administration, office visits, or any associated costs. Terms and conditions apply. Offer expires 12/31/24.

The program is open to commercially insured beneficiaries whose insurance plans cover ADSTILADRIN and who meet the following eligibility criteria:

- You must be 18 years of age or older
- You reside in the US
- You must be prescribed ADSTILADRIN by your physician

Patient & Healthcare Provider Instructions:

Patients: To learn more about the ADSTILADRIN Copay Program, please speak with your healthcare provider or call 1-844-NADOnow for more information.

Healthcare Providers: If purchasing ADSTILADRIN using standard Buy & Bill processes, you may redeem the copay program offer for an eligible patient by:

- By first enrolling your patient in the Ferring Access Support Program for ADSTILADRIN. A Program Case Manager will complete a full benefits investigation to understand your patient's insurance coverage for ADSTILADRIN, as well as screen your patient for eligibility in the copay program and other forms of financial assistance. You will be provided with additional details on how to redeem the copay offer on hcp.ferringcopay.com. For additional information or to get started with Ferring Access Support, please call 1-844-NADOnow.

Specialty Pharmacies: You may redeem the copay program offer for an eligible patient by:

- By first enrolling your patient in the Ferring Access Support Program for ADSTILADRIN. A Program Case Manager will complete a full benefits investigation to understand your patient's insurance coverage for ADSTILADRIN, as well as screen your patient for eligibility in the copay program and other forms of financial assistance. You will be provided with additional details on how to redeem the copay offer on sp.ferringcopay.com. For additional information or to get started with Ferring Access Support, please call 1-844-NADOnow.

Terms and conditions:

This offer is not contingent on any past, present or future purchase, including refills. This ADSTILADRIN Copay Program offer is good for use only upon the administration of ADSTILADRIN ("Product") for an FDA-approved indication in the US. The value of this program is exclusively for the benefit of patients and is intended to be credited towards patient out-of-pocket obligations for ADSTILADRIN including applicable co-payments, coinsurance, and deductibles. Ferring will provide the ADSTILADRIN Copay Program to eligible patients who may pay as a little as \$100 per dose to assist with their out of pocket costs for ADSTILADRIN with a maximum benefit of \$12,000 per dose. The value of this offer may not exceed the amount of the patient's out-of-pocket costs for the Product. Documentation including Explanation of Benefits (EOB) may be required. The ADSTILADRIN Copay Program is not health insurance. Offer is invalid for all transactions and claims submitted more than 180 days following the date of service. The ADSTILADRIN Copay Program is not valid for Product reimbursed in whole or in part by Medicare, Medicaid, or a Medicare Part D plan, TRICARE, US Department of Veteran Affairs, US Department of Defense, the Commonwealth of Puerto Rico, government health insurance plan, or any other federal or state-funded healthcare benefit program. The ADSTILADRIN Copay Program is void where prohibited by law, taxed, or restricted, as in the States of California and Massachusetts. The ADSTILADRIN Copay Program is not transferable and is limited to one program benefit per patient. No substitutions are permitted. The ADSTILADRIN Copay Program benefit cannot be combined with any other co-pay program, free trial, discount, prescription savings card, or other offers. Patients, pharmacists, and prescribers cannot seek reimbursement from health insurance or any third party for any part of the benefit received by the patient through this offer. Ferring Pharmaceuticals reserves the right to rescind, revoke, or amend this offer without notice. Offer expires 12/31/2024.