Health Insurance:
Understanding the basics.
For many people, health insurance is a mystery. They find the insurance process complex and confusing. When you’re being treated with a biologic, understanding the insurance process can be key to managing your treatment plan.

This brochure is designed to give you a better understanding of:

- Medical and prescription drug insurance
- The different kinds of coverage available
- The prescription benefits process and the steps to getting started on treatment
- Commonly used insurance terms

Questions? We’re here to help.

As you read through this brochure, you may have questions. Don’t keep them to yourself. Our Insurance Specialists are available at 1.800.448.6472 to help answer your questions, and help you better understand your plan’s coverage.
What is health insurance?

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

- **MEDICAL SERVICES** such as doctor visits, hospital stays, surgical care, laboratory tests, mental health care services, and preventive and wellness care

- **PRESCRIPTION DRUG EXPENSES** such as the cost of medicines you take

This brochure will focus primarily on Commercial Insurance.

Types of health insurance.

There are 2 major providers of health insurance:

1. **COMMERCIAL (PRIVATE)**
   - Insurance offered by privately owned companies:
     - Insurance you purchase on your own
     - Insurance provided by your employer
     - Insurance plan you purchase through the Affordable Care Act (aka Obamacare)

2. **GOVERNMENT**
   - Insurance programs offered by the government:
     - Medicare for people over 65
     - Medicaid for people in financial need
     - Veterans Affairs benefits for military veterans

Notes:
The different kinds of commercial insurance plans.

There are several different types of plans. Some restrict you to using the plan’s network of doctors, hospitals, and other medical service providers. Others offer you the option to use providers outside of the plan’s network, and may pay a share of their costs. Five of the most common types are:

<table>
<thead>
<tr>
<th>Type of Plan</th>
<th>Type of Network</th>
<th>Option to Go Out-of-Network</th>
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<tbody>
<tr>
<td>HEALTH MAINTENANCE ORGANIZATION (HMO)</td>
<td>Your doctors, hospitals, and health care services are all kept within one network.</td>
<td>No</td>
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<tr>
<td>PREFERRED PROVIDER ORGANIZATION (PPO)</td>
<td>You choose from a list of “preferred providers” who are considered “in-network.” Doctors not on the preferred list are considered “out-of-network.”</td>
<td>Varies with individual plan.</td>
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<tr>
<td>HIGH-DEDUCTIBLE HEALTH PLAN (HDHP)</td>
<td>Higher annual deductible and lower premiums than a typical health insurance plan (e.g., PPO)</td>
<td>Varies with individual plan.</td>
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<tr>
<td>POINT OF SERVICE PLAN</td>
<td>You can choose either a preferred provider or an outside provider.</td>
<td>You will need a referral from an in-network doctor and may likely have to pay more.</td>
</tr>
<tr>
<td>FEE FOR SERVICE PLAN INDEMNITY POLICIES</td>
<td>There is no network.</td>
<td>You can choose whichever doctor you want but you pay more.</td>
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Insurance costs: Two key things to consider.

1. MONTHLY PREMIUM
What you pay to purchase an insurance policy
Paid each month—similar to your mortgage or phone bill.

2. OUT-OF-POCKET COSTS
What you’ll pay in health care costs throughout the policy year

YOUR DEDUCTIBLE
What you have to pay before your insurance starts paying
Example: If your health care deductible is $1,500, that’s how much you have to spend before your insurance begins to pay for health care.

YOUR CO-PAY/CO-INSURANCE
Your share of the cost required 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 cost; you might pay 20% of the cost.

MAXIMUM OUT-OF-POCKET
If your yearly maximum is $3,900, once you have reached that amount, the insurance will pay 100% of your health care costs.

TRADE-OFFS WITH HIGH DEDUCTIBLE HEALTH PLANS.
A LOWER PREMIUM BUT HIGHER OUT-OF-POCKET COSTS
Choosing a plan with a lower monthly premium can require you to pay a larger portion of your yearly health care costs (maximum out-of-pocket). Depending on your needs, this could end up costing you more for the year. A Health Savings Account may help with these costs.

What you should know about prescription drug coverage.

Manufacturer savings cards can help reduce your costs.
However, some insurance plans may not allow patients to use these cards toward their deductible or other out-of-pocket costs. For questions on your specific benefits, call an Insurance Specialist at 1.800.448.6472.

The company you think of as your insurance company may not be who you deal with for 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 who you must deal with regarding coverage of the drugs in your treatment plan.

You may have to carry 2 separate insurance cards.

From the company that provides your medical benefits.
From the company that manages your prescription benefits.
What is a formulary?
A formulary is a list of medications that have been approved for insurance coverage within a plan.

Within a formulary there may be differences in your share of the cost (your co-pay or co-insurance) based on “tiers.”

- Tier 1: Least expensive
- Tier 2: More expensive
- Tier 3: Most expensive

Some plans may have 4 or 5 tiers.

Your insurance may also have special requirements before it will cover a particular medication. For example, your doctor may have to prove that one drug didn’t work for you before your insurance company will cover another medicine.

It’s important that you know the limits and requirements that apply to your treatment plan.

Notes:

Steps to filling a prescription.

Because of prescription insurance requirements, there may be several steps that must be taken when a doctor prescribes certain types of medications (such as specialty medications, like biologics).

Step 1 BENEFITS VERIFICATION (BV)
The process that confirms:

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

Step 2 PRIOR AUTHORIZATION (PA)
Most insurance plans require a pre-authorization or approval. This means your health care provider must provide additional information (lab work, drug history, etc) to your insurance before they will cover a service/medication.

Questions about prescription drug coverage? That’s what we’re here for. Call one of our Insurance Specialists at 1.800.448.6472 to get answers to any questions you may still have.
How to get a Benefits Verification for your medication.

Step 1
The information you’ll need:

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

Step 2
One call does it:

- Call an Insurance Specialist at 1.800.4HUMIRA (1.800.448.6472)
- Tell the specialist that you want to complete a benefits verification for your medication
- Give the specialist the needed information

Step 3
Response in as little as 48 hours:

- You will receive 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

Take note

The cost of your coverage

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

<table>
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<tr>
<th>MY YEARLY DEDUCTIBLE IS:</th>
<th>MY CO-PAYMENTS AND CO-INSURANCE</th>
<th>MY OUT-OF-POCKET MAXIMUM:</th>
</tr>
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<tr>
<td>$</td>
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Other questions to ask during the follow-up phone call

Does my insurance:

- require a prior authorization?
- require me to use a Specialty Pharmacy?
  (If so, please note the name of the pharmacy and its phone number below)

worried about affording your medication?

We can help navigate cost savings.
Just call 1.800.448.6472.

Please see Important Safety Information on pages 19-21.
Please see full Prescribing Information, including Medication Guide, at www.rxabbvie.com/pdf/humira.pdf and discuss with your doctor.
HUMIRA Complete
is here to help.

Your Nurse Ambassador* can help you navigate insurance conversations with your insurance company or pharmacy (don’t have a Nurse Ambassador? Call to get one).

Call one of our Insurance Specialists to get the answers you need.

Save on the cost of HUMIRA, month after month
With a HUMIRA Complete Savings Card, eligible patients may pay as little as $5 a month† for HUMIRA. To get your savings card, talk with your Nurse Ambassador or visit HUMIRA.com

*Ambassadors do not give medical advice and will direct you to your health care professional for any treatment-related questions, including further referrals.

† Terms and Conditions apply. This benefit covers HUMIRA® (adalimumab) alone or, for rheumatology patients, HUMIRA plus one of the following medications: methotrexate, lefunomide (Arava®), or hydroxychloroquine (Plaquenil®). Eligibility: Available to patients with commercial prescription insurance coverage for HUMIRA® (adalimumab). Co-pay assistance program is not available to patients receiving prescription reimbursement under any federal, state or government-funded insurance programs (for example, Medicare [including Part D], Medicare Advantage, Medicaid, TRICARE, Department of Defense or Veteran’s Affairs programs) or where prohibited by law. If at any time a patient begins receiving prescription drug coverage under any such federal, state or government-funded healthcare program, patient will no longer be able to use the HUMIRA card and patient must call HUMIRA Complete at 1.800.4HUMIRA to stop participation. Patients may not seek reimbursement for value received from HUMIRA from any third-party payers. Offer subject to change or discontinuation without notice. Restrictions, including monthly maximums, may apply. This is not health insurance.

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Please see Important Safety Information on pages 19-21.
Please see full Prescribing Information, including Medication Guide, at www.rxabbvie.com/pdf/humira.pdf and discuss with your doctor.
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 health care 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:**
The health care items or services covered under a health insurance plan.

**Insurance Plans:**
- **Commercial Insurance:**
  Plans typically sold to consumers directly or to groups/employers.
- **Government Insurance:**
  Insurance programs paid for and operated by the federal and state governments. (Examples: Medicaid, Medicare, Veterans Affairs)

**Medicaid:**
A state government insurance plan that offers health care coverage and drug benefits to low-income individuals.

**Medicare:**
A federal government insurance plan that provides health care 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-sponsored health insurance plan.

**Patient Out-of-Pocket Costs:**
The shared health care costs between the insurance company and the patient.

**Cost-Sharing Methods:**
- **Co-Insurance:**
The percentage of cost that you will have to pay for a prescription or a medical service. Example: You may pay 25% and the insurance pays 75%.
- **Co-Pay:**
  Your share of the cost for a medical service or prescription that is a fixed amount. For example, you may pay $25.

HUMIRA is a prescription medicine used:

- **To reduce the signs and symptoms of:**
  - Moderate to severe rheumatoid arthritis (RA) in adults. HUMIRA can be used alone, with methotrexate, or with certain other medicines. HUMIRA may prevent further damage to your bones and joints and may help your ability to perform daily activities.
  - Moderate to severe polyarticular juvenile idiopathic arthritis (JIA) in children 2 years of age and older. HUMIRA can be used alone, with methotrexate, or with certain other medicines.
  - Psoriatic arthritis (PsA) in adults. HUMIRA can be used alone or with certain other medicines. HUMIRA may prevent further damage to your bones and joints and may help your ability to perform daily activities.
  - Ankylosing spondylitis (AS) in adults.
  - Moderate to severe Crohn’s disease (CD) and to achieve and maintain clinical remission in adults who have not responded well to certain other medications. HUMIRA is also used to reduce signs and symptoms and to achieve clinical remission in these adults who have lost response to or are unable to tolerate infliximab.
  - Moderate to severe Crohn’s disease (CD) and to achieve and maintain clinical remission in children 6 years of age and older when certain other treatments have not worked well enough.
  - Moderate to severe hidradenitis suppurativa (HS) in people 12 years and older.
  - In adults, to help get moderate to severe ulcerative colitis (UC) under control (induce remission) and keep it under control (sustain remission) when certain other medicines have not worked well enough. It is not known if HUMIRA is effective in people who stopped responding to or could not tolerate anti-TNF medicines.
  - To treat moderate to severe chronic plaque psoriasis (Ps) in adults who are ready for systemic therapy or phototherapy, and are under the care of a doctor who will decide if other systemic therapies are less appropriate.
  - To treat non-infectious intermediate (middle part of the eye), posterior (back of the eye), and panuveitis (all parts of the eye) in adults and children 2 years of age and older.

**IMPORTANT SAFETY INFORMATION**

Serious infections have happened in people taking HUMIRA. These serious infections include tuberculosis (TB) and infections caused by viruses, fungi, or bacteria that have spread throughout the body. Some people have died from these infections. HUMIRA may increase the chance of getting lymphoma, including a rare kind, or other cancers. HUMIRA can cause serious side effects including hepatitis B infection in carriers of the virus, allergic reactions, nervous system problems, blood problems, heart failure, certain immune reactions including a lupus-like syndrome, liver problems, and new or worsening psoriasis.

Please see additional Important Safety Information on pages 19-21.

Please see full Prescribing Information, including Medication Guide, at www.rxabbvie.com/pdr/humira.pdt and discuss with your doctor.
Important Safety Information About HUMIRA® (adalimumab)¹

What is the most important information I should know about HUMIRA?
You should discuss the potential benefits and risks of HUMIRA with your doctor. HUMIRA is a TNF blocker medicine that can lower the ability of your immune system to fight infections. You should not start taking HUMIRA if you have any kind of infection unless your doctor says it is okay.

• Serious infections have happened in people taking HUMIRA. These serious infections include tuberculosis (TB) and infections caused by viruses, fungi, or bacteria that have spread throughout the body. Some people have died from these infections. Your doctor should test you for TB before starting HUMIRA, and check you closely for signs and symptoms of TB during treatment with HUMIRA, even if your TB test was negative. If your doctor feels you are at risk, you may be treated with medicine for TB.

• Cancer. For children and adults taking TNF blockers, including HUMIRA, the chance of getting lymphoma or other cancers may increase. There have been cases of unusual cancers in children, teenagers, and young adults using TNF blockers. Some people have developed a rare type of cancer called hepatosplenic T-cell lymphoma. This type of cancer often results in death. If using TNF blockers including HUMIRA, your chance of getting two types of skin cancer (basal cell and squamous cell) may increase. These types are generally not life-threatening if treated; tell your doctor if you have a bump or open sore that doesn’t heal.

What should I tell my doctor BEFORE starting HUMIRA?
Tell your doctor about all of your health conditions, including if you:
• Have an infection, are being treated for infection, or have symptoms of an infection
• Get a lot of infections or infections that keep coming back
• Have diabetes
• Have TB or have been in close contact with someone with TB, or were born in, lived in, or traveled where there is more risk for getting TB
• Live or have lived in an area (such as the Ohio and Mississippi River valleys) where there is an increased risk for getting certain kinds of fungal infections, such as histoplasmosis, coccidioidomycosis, or blastomycosis. These infections may happen or become more severe if you use HUMIRA. Ask your doctor if you are unsure if you have lived in these areas
• Have or have had hepatitis B

• Are scheduled for major surgery
• Have or have had cancer
• Have numbness or tingling or a nervous system disease such as multiple sclerosis or Guillain-Barré syndrome
• Have or had heart failure
• Have recently received or are scheduled to receive a vaccine. HUMIRA patients may receive vaccines, except for live vaccines. Children should be brought up to date on all vaccines before starting HUMIRA
• Are allergic to rubber, latex, or any HUMIRA ingredients
• Are pregnant, planning to become pregnant, breastfeeding, or planning to breastfeed
• Have a baby and you were using HUMIRA during your pregnancy. Tell your baby’s doctor before your baby receives any vaccines

Also tell your doctor about all the medicines you take. You should not take HUMIRA with ORENCIA® (abatacept), KINERET® (anakinra), REMICADE® (infliximab), ENBREL® (etanercept), CIMZIA® (certolizumab pegol), or SIMPONI® (golimumab). Tell your doctor if you have ever used RITUXAN® (rituximab), IMURAN® (azathioprine), or PURINETHOL® (mercaptopurine, 6-MP).

What should I watch for AFTER starting HUMIRA?
HUMIRA can cause serious side effects, including:
• Serious infections. These include TB and infections caused by viruses, fungi, or bacteria. Symptoms related to TB include a cough, low-grade fever, weight loss, or loss of body fat and muscle.
• Hepatitis B infection in carriers of the virus. Symptoms include muscle aches, feeling very tired, dark urine, skin or eyes that look yellow, little or no appetite, vomiting, clay-colored bowel movements, fever, chills, stomach discomfort, and skin rash.
• Allergic reactions. Symptoms of a serious allergic reaction include hives, trouble breathing, and swelling of your face, eyes, lips, or mouth.
• Nervous system problems. Signs and symptoms include numbness or tingling, problems with your vision, weakness in your arms or legs, and dizziness.
• Blood problems (decreased blood cells that help fight infections or stop bleeding). Symptoms include a fever that does not go away, bruising or bleeding very easily, or looking very pale.
• Heart failure (new or worsening). Symptoms include shortness of breath, swelling of your ankles or feet, and sudden weight gain.

Please see full Prescribing Information, including Medication Guide, at www.rxabbvie.com/pdf/humira.pdf and discuss with your doctor.
• **Immune reactions including a lupus-like syndrome.** Symptoms include chest discomfort or pain that does not go away, shortness of breath, joint pain, or rash on your cheeks or arms that gets worse in the sun.

• **Liver problems.** Symptoms include feeling very tired, skin or eyes that look yellow, poor appetite or vomiting, and pain on the right side of your stomach (abdomen). These problems can lead to liver failure and death.

• **Psoriasis** (new or worsening). Symptoms include red scaly patches or raised bumps that are filled with pus.

Call your doctor or get medical care right away if you develop any of the above symptoms.

**Common side effects of HUMIRA include injection site reactions (pain, redness, rash, swelling, itching, or bruising), upper respiratory infections (sinus infections), headaches, rash, and nausea.** These are not all of the possible side effects with HUMIRA. Tell your doctor if you have any side effect that bothers you or that does not go away.

**Remember, tell your doctor right away if you have an infection or symptoms of an infection, including:**

- Fever, sweats, or chills
- Muscle aches
- Cough
- Shortness of breath
- Blood in phlegm
- Weight loss
- Warm, red, or painful skin or sores on your body
- Diarrhea or stomach pain
- Burning when you urinate
- Urinating more often than normal
- Feeling very tired

**HUMIRA is given by injection under the skin.**

This is the most important information to know about HUMIRA. For more information, talk to your health care provider.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://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/myAbbVieAssist](http://AbbVie.com/myAbbVieAssist) to learn more.
