

AURYXIA has three comprehensive AkebiaCares programs to help your patients with access solutions. AkebiaCares has dedicated Care Managers that can help patients talk through their coverage and access to AURYXIA.

### **AKEBIACARES COPAY PROGRAM:** If you have commercial insurance, you may be eligible for our copay program

- Commercial health insurance is any type of health benefit not affiliated with a federal or state government program, such as Medicare, Medicaid, or Veterans Affairs
- With the AURYXIA Copay Coupon, eligible commercially insured patients can **pay as little as \$0 per fill of AURYXIA\***



### Thank you!

Your copay card is ready to use.  
Print this copay card to bring with you to the pharmacy.

**Pay as little as** **\$0\*** per fill for your prescription of **Auryxia<sup>®</sup>**  
(ferric citrate) tablets

Powered by: **CHANGE HEALTHCARE**  
**BIN:** 600426      **PCN:** 54      **Group:** EC44001001      **ID:**

- This image is for example only; check your eligibility and enroll for the copay card at [AkebiaCares.com/copay-card](https://AkebiaCares.com/copay-card)
- If you qualify, you'll be able to download your copay card to start saving on your medication
- If you don't qualify, work with your healthcare provider to complete an AkebiaCares enrollment form to see if additional support is available



Scan this QR code to find out more about AkebiaCares.

**REIMBURSEMENT HELP:** One-on-one assistance with dedicated Care Managers for insurance questions and challenges for **anyone prescribed AURYXIA**

### What does it offer?

- Insurance assistance to **anyone prescribed AURYXIA**
- Verification of insurance and information on prescription drug benefits for AURYXIA
- Coordination of prior authorizations and medical exceptions for AURYXIA\*
- Identification of patients eligible for Low-Income Subsidy (LIS) assistance, copay assistance, or state-funded programs<sup>†</sup>

**AURYXIA** may be available free of charge for eligible patients, including those who are uninsured or underinsured<sup>‡</sup>



**SPEAK WITH A DEDICATED CARE MANAGER TODAY**

1-855-686-8601 | Monday-Friday | 8AM - 8PM EST

**AkebiaCares.com**

**AkebiaCares does not guarantee coverage and/or reimbursement for all patients.**

\*Prior authorization and/or medical exception is required for Medicare Part D patients. Prior authorization or medical exception is required from a payor that mandates an additional review for the prescribed therapy before the payor will cover the costs. The payor will not always cover the entire cost of the copay, but it varies by the patient's plan design.

<sup>†</sup>Patients may be eligible for LIS if they have an income of  $\leq 150\%$  of the federal poverty level (FPL).

<sup>‡</sup>Medicare Part D patients with an annual income of  $\leq 150\%$  of the FPL are eligible for LIS assistance (also called "Extra Help").