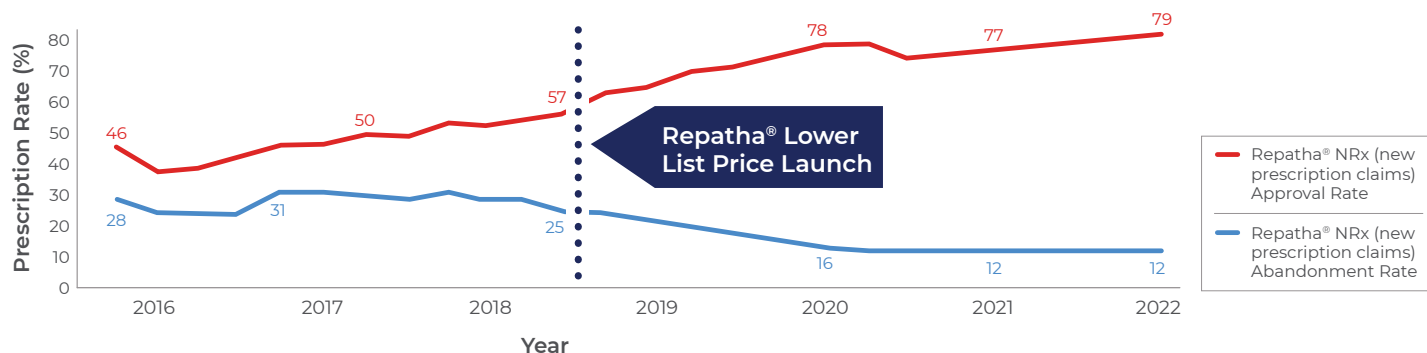


DON'T LET COVERAGE CONCERNS BE AN EXCUSE. ACT NOW. ADD REPATHA®.

9 OUT OF 10 PATIENTS ARE COVERED FOR REPATHA®^{1,*}

Repatha® approval rates have greatly improved over time^{2,†}



Have coverage and access questions regarding your patients? Speak to your Repatha® representative to obtain your Amgen® Access Specialist's contact information.

Access Specialist areas of focus:

- 1 Prior authorizations / reauthorizations
- 2 Appeals process
- 3 Insurance information / utilization management (UM) criteria
- 4 Financial support resources
- 5 General access information / education



HELP IS
AVAILABLE
IN PERSON OR
VIRTUALLY

*Includes commercial, health exchange, Medicaid and Medicare lives. As of April 2023, based on MMIT data. This information is subject to change without notice. For the most up-to-date and complete information regarding the status of Repatha®, please contact the relevant payer directly.

†Data from IQVIA LAAD Claims Database (January 1, 2016-December 31, 2022); New claims; Only Life Cycle claims.

INDICATIONS

Repatha® is indicated:

- In adults with established cardiovascular disease to reduce the risk of myocardial infarction, stroke, and coronary revascularization
- As an adjunct to diet, alone or in combination with other low-density lipoprotein cholesterol (LDL-C)-lowering therapies, in adults with primary hyperlipidemia, including heterozygous familial hypercholesterolemia (HeFH), to reduce LDL-C

IMPORTANT SAFETY INFORMATION

- **Contraindication:** Repatha® is contraindicated in patients with a history of a serious hypersensitivity reaction to evolocumab or any of the excipients in Repatha®. Serious hypersensitivity reactions including angioedema have occurred in patients treated with Repatha®.

Please see additional Important Safety Information throughout and [click here](#) for full Prescribing Information.

 **Repatha**[®]
(evolocumab) injection
140 mg/mL

INDICATIONS

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- As an adjunct to diet, alone or in combination with other low-density lipoprotein cholesterol (LDL-C)-lowering therapies, in adults with primary hyperlipidemia, including heterozygous familial hypercholesterolemia (HeFH), to reduce LDL-C
- As an adjunct to diet and other LDL-C-lowering therapies in pediatric patients aged 10 years and older with HeFH, to reduce LDL-C
- As an adjunct to other LDL-C-lowering therapies in adults and pediatric patients aged 10 years and older with homozygous familial hypercholesterolemia (HoFH), to reduce LDL-C

The safety and effectiveness of Repatha® have not been established in pediatric patients with HeFH or HoFH who are younger than 10 years old or in pediatric patients with other types of hyperlipidemia.

IMPORTANT SAFETY INFORMATION

- **Contraindication:** Repatha® is contraindicated in patients with a history of a serious hypersensitivity reaction to evolocumab or any of the excipients in Repatha®. Serious hypersensitivity reactions including angioedema have occurred in patients treated with Repatha®.
- **Hypersensitivity Reactions:** Hypersensitivity reactions, including angioedema, have been reported in patients treated with Repatha®. If signs or symptoms of serious hypersensitivity reactions occur, discontinue treatment with Repatha®, treat according to the standard of care, and monitor until signs and symptoms resolve.
- **Adverse Reactions in Adults with Primary Hyperlipidemia:** The most common adverse reactions (>5% of patients treated with Repatha® and more frequently than placebo) were: nasopharyngitis, upper respiratory tract infection, influenza, back pain, and injection site reactions.

From a pool of the 52-week trial and seven 12-week trials: Local injection site reactions occurred in 3.2% and 3.0% of Repatha®-treated and placebo-treated patients, respectively. The most common injection site reactions were erythema, pain, and bruising. Hypersensitivity reactions occurred in 5.1% and 4.7% of Repatha®-treated and placebo-treated patients, respectively. The most common hypersensitivity reactions were rash (1.0% versus 0.5% for Repatha® and placebo, respectively), eczema (0.4% versus 0.2%), erythema (0.4% versus 0.2%), and urticaria (0.4% versus 0.1%).

Please see additional Important Safety Information throughout and [click here](#) for full Prescribing Information.

IMPORTANT SAFETY INFORMATION (cont'd)

- **Adverse Reactions in the Cardiovascular Outcomes Trial:** The most common adverse reactions (>5% of patients treated with Repatha® and more frequently than placebo) were: diabetes mellitus (8.8% Repatha®, 8.2% placebo), nasopharyngitis (7.8% Repatha®, 7.4% placebo), and upper respiratory tract infection (5.1% Repatha®, 4.8% placebo).

Among the 16,676 patients without diabetes mellitus at baseline, the incidence of new-onset diabetes mellitus during the trial was 8.1% in patients treated with Repatha® compared with 7.7% in patients that received placebo.

- **Adverse Reactions in Pediatric Patients with HeFH:** The most common adverse reactions (>5% of patients treated with Repatha® and more frequently than placebo) were: nasopharyngitis, headache, oropharyngeal pain, influenza, and upper respiratory tract infection.
- **Adverse Reactions in Adults and Pediatric Patients with HoFH:** In a 12-week study in 49 patients, the adverse reactions that occurred in at least two patients treated with Repatha® and more frequently than placebo were: upper respiratory tract infection, influenza, gastroenteritis, and nasopharyngitis. In an open-label extension study in 106 patients, including 14 pediatric patients, no new adverse reactions were observed.
- **Immunogenicity:** Repatha® is a human monoclonal antibody. As with all therapeutic proteins, there is potential for immunogenicity with Repatha®.

Please [click here](#) for full Prescribing Information.

REPATHA® MAY COST YOUR PATIENTS LESS THAN YOU THINK

MEDICARE

~**71%** of prescriptions cost patients
\$49 OR LESS^{3,†}

MEDICAID

99% of prescriptions cost patients
\$10 OR LESS^{3,*}

COMMERCIAL

Commercially insured patients
MAY PAY \$5 A MONTH[‡]
with the Repatha® Co-pay Card

Have your commercial patients enroll in the Repatha® Co-pay Card by visiting [Repatha.com/enroll](https://www.repatha.com/enroll) or by **scanning the QR code** on the Repatha® Co-pay Card brochure.



*Based on IQVIA data from 1/2022 – 12/2022 using the respective Medicare or Medicaid data

†The patient's out-of-pocket costs can vary throughout the year depending on which phase of the Part D benefit the patient is currently in. Medicare Part D drug coverage is divided into four phases, each with a different cost-sharing amount. Those phases are 1) Deductible, 2) Initial coverage, 3) Coverage gap, 4) Catastrophic.

‡Subject to eligibility criteria and program maximums. Visit www.repatha.com/copay for full terms and conditions.

IMPORTANT SAFETY INFORMATION (cont'd)

- **Immunogenicity:** Repatha® is a human monoclonal antibody. As with all therapeutic proteins, there is potential for immunogenicity with Repatha®.

Please see additional Important Safety Information throughout and [click here](#) for full Prescribing Information.

References: 1. Data on file, Amgen; [1]; 2023. 2. Data on file, Amgen; [2]; 2023. 3. Data on file, Amgen; [3]; 2023.