

LIBTAYO Surround Patient Assistance Program

LIBTAYO Surround Patient Assistance Program (PAP) helps eligible patients who are uninsured or who lack coverage for LIBTAYO receive LIBTAYO at no cost

Patient eligibility for the LIBTAYO Surround PAP



Insurance

Patients who are uninsured, lack coverage for LIBTAYO, or have Medicare Part B with no supplemental insurance coverage



Residency

Residents of the United States or its territories or possessions



Enrollment in LIBTAYO Surround

Patients must enroll by signing Section 9 of the LIBTAYO Surround Enrollment Form and the HIPAA Authorization in Section 10



Income

Patients must have an annual gross household income that does not exceed the greater of:

\$100,000

or

500% of the federal poverty level (FPL).
(See reverse for the 2018 FPL income eligibility requirements)

If patients meet these eligibility criteria, they
may qualify for the LIBTAYO Surround PAP

For more information, call LIBTAYO Surround at 1-877-LIBTAYO
(1-877-542-8296) Option 1, Monday–Friday, 8 AM–8 PM Eastern time,
or visit LIBTAYOhcp.com

Patient eligibility for the LIBTAYO Surround PAP under the 2018 FPL income criteria

LIBTAYO Surround PAP patient income eligibility requirements

Number of people in patient's household	500% of the FPL ¹
	\$60,700
	\$82,300
	\$103,900
	\$125,500

For households exceeding 4 members, add \$21,600 for each additional member. Income eligibility is the greater of \$100,000 or the income amounts shown above.

LIBTAYO Surround facilitates the PAP enrollment process

To assist patients who wish to enroll in the PAP, a LIBTAYO Surround Reimbursement Specialist is available to...

Step 1: Investigate
the patient's eligibility criteria

Step 2: Notify
you of your patient's eligibility and confirm enrollment in the LIBTAYO Surround PAP

Step 3: Coordinate
shipment of LIBTAYO to your practice or other site of care

Step 4: Confirm
continued enrollment in the LIBTAYO Surround PAP and contact your office to coordinate future shipments

For more information about how LIBTAYO Surround can help your patients enroll in the LIBTAYO Surround PAP, call 1-877-LIBTAYO (1-877-542-8296) Option 1, Monday–Friday, 8 AM–8 PM Eastern time, or visit LIBTAYOhcp.com

Reference: 1. Office of the Assistant Secretary for Planning and Evaluation. Poverty guidelines. US Department of Health and Human Services website. <https://aspe.hhs.gov/poverty-guidelines>. Accessed September 6, 2018.

For any questions or concerns, or to report side effects with a Regeneron and Sanofi product for patients enrolled in LIBTAYO Surround, please contact LIBTAYO Surround at **1-877-LIBTAYO (1-877-542-8296) Option 1**, Monday–Friday, 8 AM–8 PM Eastern time.