A ROAD MAP FOR HELPING PATIENTS

How MySMA Support™ Can Help You and Your Patients

MySMA Support is a support service from Genentech that can help provide information to patients who have been prescribed Evrysdi® (risdiplam).

- The MySMA Support team can help you understand your patient's insurance coverage and refer your patients to appropriate financial assistance options to help them start and stay on Evrysdi
- MySMA Support does not provide medical advice and is not a substitute for the medical team. Health care providers should always be the main resource for any questions about patients' health and medical care

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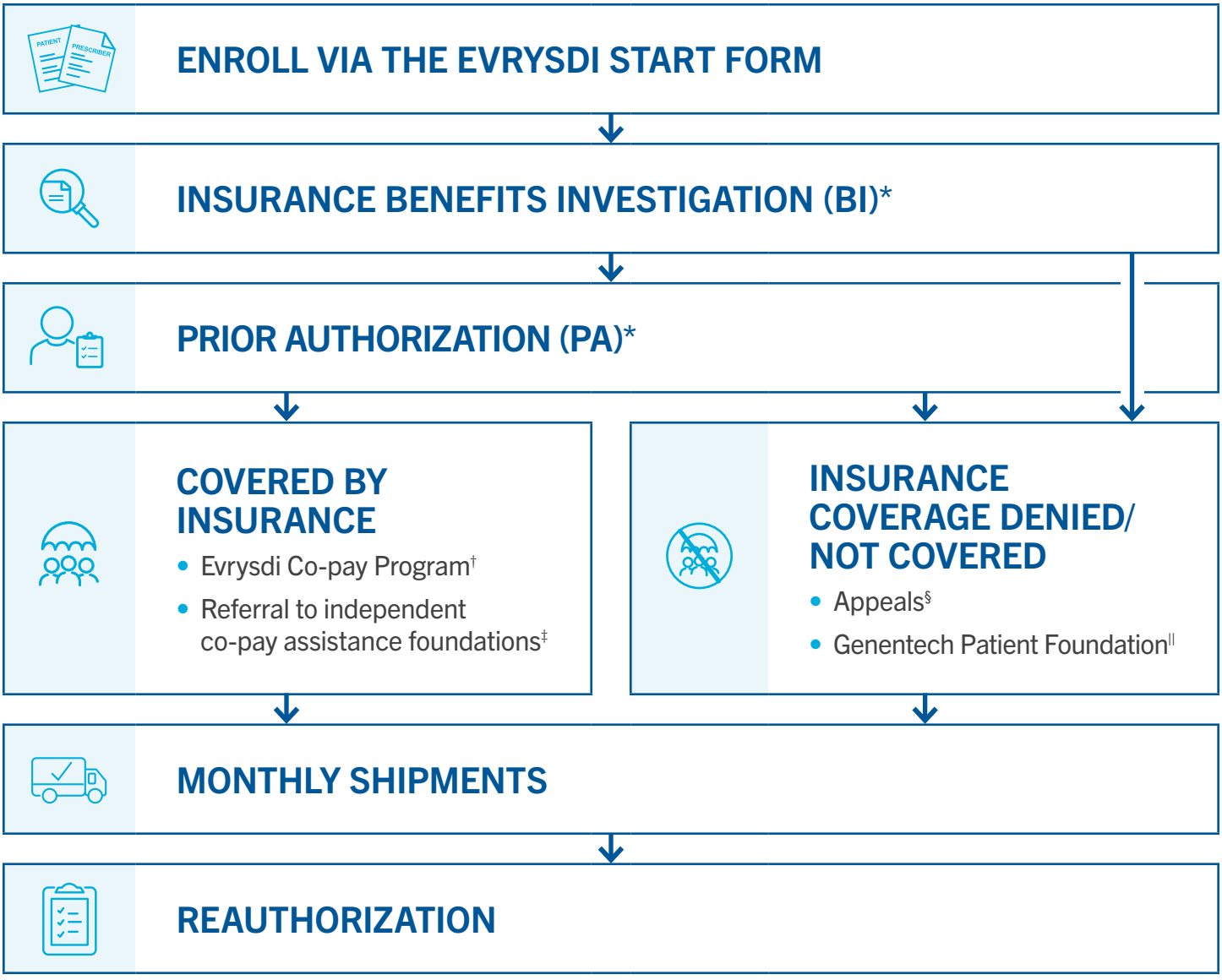
MySMA SUPPORT™ BY GENENTECH

FOR HEALTH CARE PROVIDERS

YOUR STEPS to Getting Evrysdi® (risdiplam) for Your Patients

This brochure will walk you through steps to getting Evrysdi for your patients and how MySMA Support™ may be able to help. A high-level snapshot of the process is below.



*The completion and submission of coverage- or reimbursement-related documentation are the responsibility of the patient and health care provider. Genentech makes no representation or guarantee concerning coverage or reimbursement for any service or item.

†Eligibility criteria and benefit limits apply. Not valid for patients whose prescriptions are reimbursed under any federal or state government programs to pay for their Genentech medicine. Patients must be taking the Genentech medicine for an FDA-approved indication. Please visit the Co-pay Program website for the full list of Terms and Conditions.

‡Independent co-pay assistance foundations have their own rules for eligibility. Genentech has no involvement or influence in independent foundation decision-making or eligibility criteria and does not know if a foundation will be able to help your patient. We can only refer your patient to a foundation that supports their disease state. Genentech does not endorse or show preference for any particular foundation. The foundations to which we refer your patient may not be the only ones that might be able to help.

§Appeals cannot be completed or submitted by MySMA Support on your behalf.

‖To be eligible for free Genentech medicine from the Genentech Patient Foundation, insured patients who have coverage for their medicine should try to pursue other forms of financial assistance, if available, and meet certain income requirements. Uninsured patients and insured patients without coverage for their medicine must meet a different set of income requirements. Genentech reserves the right to modify or discontinue the program at any time and to verify the accuracy of information submitted.

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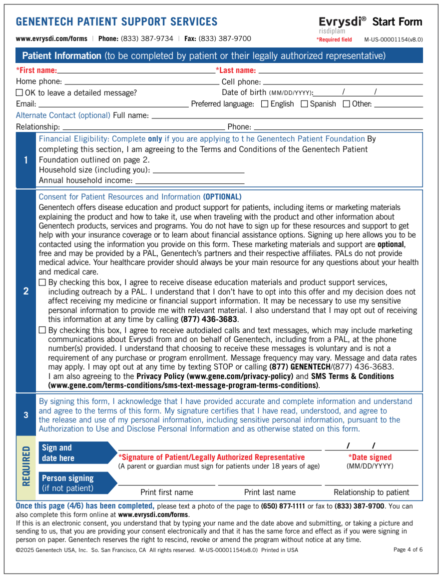
MySMA SUPPORT

ENROLL VIA THE EVRYSDI START FORM

The Evrysdi Start Form is an optional form used to enroll people who have been prescribed Evrysdi into MySMA Support.

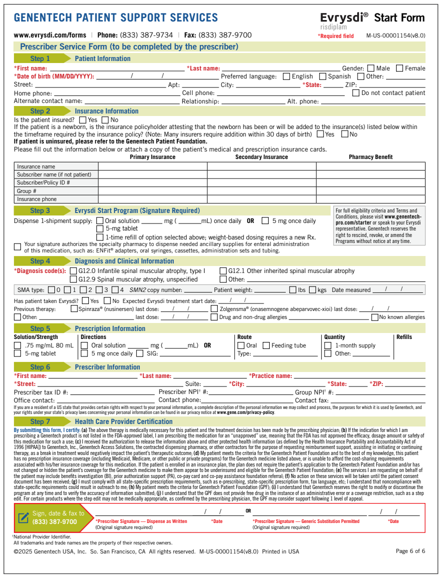

GENENTECH PATIENT SUPPORT SERVICES

Evrysdi® Start Form

www.evrysdi.com/forms | Phone: (833) 387-9734 | Fax: (833) 387-9700

Patient Information (to be completed by patient or their legally authorized representative)

Page 4 of 6


GENENTECH PATIENT SUPPORT SERVICES

Evrysdi® Start Form

www.evrysdi.com/forms | Phone: (833) 387-9734 | Fax: (833) 387-9700

Prescriber Service Form (to be completed by the prescriber)

Page 6 of 6

The Evrysdi Start Form includes:

- The Patient Consent Form (page 4), which is to be completed by the patient
- The Prescriber Service Form (page 6), which is to be completed by the health care provider

Both pages must be completed for enrollment.

If you believe there may be a delay in health insurance coverage, you can request to enroll your patient in the Evrysdi Starter Program by completing step 6 of the prescriber portion of the form.

INSURANCE BI*

MySMA Support will conduct an insurance BI to help determine if Evrysdi is covered by your patient's health insurance plan and patient's out-of-pocket (OOP) responsibilities.

YOUR STEPS to Getting Evrysdi® (risdiplam) for Your Patients

PRIOR AUTHORIZATION (PA)*

A PA will likely be required for Evrysdi. The MySMA Support™ team can help identify if a PA is necessary and identify the required forms and documents you will need to complete and submit to the health insurance plan. The PA expiration or reauthorization date, documentation and/or clinical assessment requirements may vary by plan.

PA requirements may include:

- A copy of genetic testing results confirming SMA diagnosis
- A diagnosis of SMA: pre-symptomatic, Type 1, 2, or 3 and corresponding ICD-10 code
- SMN2 copy number
- Age of symptom(s) onset
- List of treatments prescribed for SMA that have been discontinued or attestation that previous treatments will not be used in combination with Evrysdi
- Other relevant aspects of patient history including patient's weight and date measured
- Lab urine pregnancy test for women of childbearing age
- Results of baseline Motor Function Assessment (verify which Motor Function Assessments are accepted by the patient's insurance provider)

The Case Manager can follow up with the patient's health insurance plan about the status of the PA. If the PA is delayed, your patient may be able to receive free medicine through the Evrysdi Start Program† (if requested on the Evrysdi Start Form) or the Evrysdi Bridge Program† (if requested on the Evrysdi Bridge Program Form).

You may receive additional information from the specialty pharmacy (SP) regarding the PA or authorization process.

Once the coverage determination is received from the patient's health insurance plan, consider notifying the SP. If a denial is received, you may contact MySMA Support about potential financial assistance resources and information about appeals.

*The completion and submission of coverage- or reimbursement-related documentation are the responsibility of the patient and health care provider. Genentech makes no representation or guarantee concerning coverage or reimbursement for any service or item.

†Subject to eligibility requirements and terms and conditions. This program is void where prohibited by law and may not be used in or by residents of restricted states, if applicable.

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MySMA SUPPORT

COVERED BY INSURANCE

At Genentech, we understand patients may have health insurance coverage but still have affordability concerns related to their treatment. We are dedicated to helping ensure Evrysdi is accessible for your patients.

Evrysdi Co-pay Program[‡]

If eligible commercially insured patients need assistance with their OOP costs, the Evrysdi Co-pay Program may help. Eligible patients pay as little as $0 per co-pay or co-insurance until the $25,000 calendar year limit is reached.

Referrals to independent co-pay assistance foundations[§]

For eligible patients with commercial or public health insurance, MySMA Support offers referrals to independent co-pay assistance foundations.

EVRYSDI STARTER PROGRAM

Patients facing a coverage delay may be eligible for the Evrysdi Starter Program while awaiting a coverage determination. If you would like your patient considered for the Evrysdi Starter Program, you can indicate this when enrolling in MySMA Support with the Evrysdi Start Form.

Eligible patients can receive up to a ~30-day supply of Evrysdi. If the patient continues to experience a coverage delay, the patient may be eligible for one refill (up to a ~30-day supply) of Evrysdi. Once coverage has been determined, the patient no longer qualifies for the Evrysdi Starter Program.

Subject to eligibility requirements and terms and conditions. This program is void where prohibited by law and may not be used in or by residents of restricted states, if applicable.

[‡]This Evrysdi Co-pay Program is valid ONLY for patients with commercial insurance who have a valid prescription for a Food and Drug Administration (FDA)-approved indication of a Genentech medication. Patients using Medicare, Medicaid or any other federal or state government program to pay for their medications are not eligible.

Under the program, the patient will pay a co-pay. After reaching the maximum program benefit, the patient will be responsible for all remaining out-of-pocket expenses. The amount of the program benefit cannot exceed the patients' out-of-pocket expenses for the cost associated with Evrysdi.

All participants are responsible for reporting the receipt of all program benefits as required by any insurer or by law. No party may seek reimbursement for all or any part of the benefit received through this Program. The program is only valid in the United States and U.S. Territories. This program is void where prohibited by law and shall follow state restrictions in relation to AB-rated generic equivalents (e.g., MA, CA) where applicable. The patient, guardian, prescriber, hospital and any other person using the program agree not to seek reimbursement for all or any part of the benefit received by the patient through the offer of this program. Genentech reserves the right to rescind, revoke or amend the program without notice at any time. Additional terms and conditions apply. Please visit EvrysdiCopay.com for the full list of Terms and Conditions.

[§]Independent co-pay assistance foundations have their own rules for eligibility. Genentech has no involvement or influence in independent foundation decision-making or eligibility criteria and does not know if a foundation will be able to help your patient. We can only refer your patient to a foundation that supports their disease state. This information is provided as a resource for you. Genentech does not endorse or show preference for any particular foundation. The foundations in this list may not be the only ones that might be able to help your patient.

YOUR STEPS to Getting Evrysdi® (risdiplam) for Your Patients

INSURANCE COVERAGE DENIED/NOT COVERED

Appeals*

If your patient's health insurance plan has issued a denial or does not cover Evrysdi, your MySMA Support™ team can provide resources as you prepare an appeal submission.

There are typically 3 levels of appeals, which vary by insurance plan and state guidelines. Insurance plan processes may vary.

1st Request for reconsideration

If a PA is denied, practices can submit documentation to address the reason for the denial. As a health care provider, you may be able to speak with a plan specialist within the appropriate specialty.

2nd Medical Director

The resubmitted appeal will be reviewed by a Medical Director who was not involved in the claim decision. It may be helpful to seek a peer-to-peer review with a neurologist. Appeal timing may vary per health insurance plan.

3rd Independent review

After all internal appeals are exhausted, the case can be discussed with an external review board or independent external reviewer. Most health insurance plans allow patients to file a request for an external review if the request is filed within 4 months after the final denial of the claim. State laws can vary.

Genentech Patient Foundation†

People who do not have health insurance, who have health insurance that does not cover Evrysdi, or who can't afford their OOP costs and meet eligibility criteria may get free medicine from the Genentech Patient Foundation.

Patients enrolled in the Genentech Patient Foundation will keep getting free Evrysdi as long as they qualify. Re-enrollment is not required.

To enroll eligible patients directly into the Genentech Patient Foundation, you must complete the Prescriber Foundation Form and your patients complete the Patient Consent Form (page 4 of the Evrysdi Start Form).

*Appeals cannot be completed or submitted by MySMA Support on your behalf.

†To be eligible for free Genentech medicine from the Genentech Patient Foundation, insured patients who have coverage for their medicine should try to pursue other forms of financial assistance, if available, and meet certain income requirements. Uninsured patients and insured patients without coverage for their medicine must meet a different set of income requirements. Genentech reserves the right to modify or discontinue the program at any time and to verify the accuracy of information submitted.

MONTHLY (IN SOME CASES 90-DAY SUPPLY) SHIPMENTS[‡]

The specialty pharmacy (SP) contacts your patient or their caregiver to schedule delivery of Evrysdi. The SP may call from an unknown number. Be sure to tell your patients or their caregivers to answer and return all calls from the SP. The SP will ship Evrysdi directly to your patient's door or another preferred location.

REAUTHORIZATION[§]

Reauthorizations are typically required at 6 and 12 month intervals to assess clinical response to treatment. Your practice will need to resubmit documentation to your patient's health insurance plan to get coverage; this resubmittal may be done via fax or a PA portal.

Health plans vary widely in their requirements for reauthorization, but can include:

- A diagnosis of SMA Type 0, 1, 2, 3 or 4
- Genetic testing confirming the diagnosis and number of SMN2 copies
- Diagnostic criteria and documentation of efficacy
- Evidence of efficacy (e.g., maintenance of or improvement in motor function)
- Clinical evaluations and documentation (e.g., evidence of progress in meeting motor milestones)

It may be helpful to track patient progress throughout treatment to prevent delays in the reauthorization process.

[‡] Specialty pharmacies are not part of Genentech and maintain independence in their operations and in their role as a health care provider.

[§] The completion and submission of coverage- or reimbursement-related documentation are the responsibility of the patient and health care provider. Genentech makes no representation or guarantee concerning coverage or reimbursement for any service or item.

THE MySMA SUPPORT™ TEAM

Partnership and Access Liaison (PAL)

The local, main point of contact from Genentech who supports your patients.

- PALs are not part of your medical team and do not provide medical advice. A PAL will always direct patients to their health care providers for any questions about the patient's health and/or medical care

Neurological Rare Disease Account Manager (NRD AM)

The local, dedicated support resource for practices who answers questions about Genentech's approved products and services.

This can include answering:

- Evrysdi® (risdiplam) clinical questions
- General reimbursement and insurance questions
- Evrysdi Start Form questions
- Evrysdi Bridge Program questions

Case Manager (CM)

Partners closely with you and other members of the MySMA Support team to help your patients understand the health insurance process and identify potential financial support options for Genentech's approved products.

Specialty pharmacy (SP)

Prepares and ships Evrysdi directly to patients. Although the SP is not a part of Genentech, it is an important part of the MySMA Support team.*

*Specialty pharmacies are not part of Genentech and maintain independence in their operations and in their role as a health care provider.

Contact information

PAL: _____ NRD AM: _____

CM: _____ SP Representative: _____

For additional information or resources about MySMA Support:

Visit Genentech-Access.com/Evrysdi

Contact our support center at **(833) EVRYSDI** (833-387-9734), Monday through Friday, 9 a.m.–8 p.m. ET

M-US-00003764(v6.0) 07/25

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