

Teva-Fingolimod Patient Care ProgramSM

Important Information
You Should Know



teva

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You have been prescribed [®]Teva-Fingolimod, a medication used to treat adult patients with the relapsing and remitting form of multiple sclerosis (MS). We are pleased to inform you that you are eligible to take advantage of the benefits of the Teva-Fingolimod Patient Care ProgramSM.

After you are enrolled in this program, a Patient Care Specialist will help you navigate insurance and reimbursement for [®]Teva-Fingolimod, coordinate your first dose monitoring if needed and be available to answer any questions that you may have.

How do I enroll in the program?

Either your physician or pharmacist will complete the enrollment form and submit it to the Teva-Fingolimod Patient Care ProgramSM. You also have the option of enrolling yourself by calling 1-855-868-7622, 8am-8pm EST. They will require your name, date of birth, address, phone, email and information about private or group health insurance should you have it.

Within one business day of receiving your enrollment form, a Patient Care Specialist from the Teva-Fingolimod Patient Care ProgramSM will reach out to you with a welcome call to:

- Confirm information already provided
- Discuss insurance information and reimbursement navigation (what's covered, etc.)
- Confirm your pharmacy of choice
- Identify the clinic location for your first dose of Teva-Fingolimod if needed

What type of financial support is there?

A Patient Care Specialist will help determine the insurance coverage and reimbursement options for your [®]Teva-Fingolimod prescription. They will:

- Ask for information about private insurance/coverage information
- Contact insurance company(s) to collect coverage details
- Review coverage details with you
- Explain the co-pay card
- Discuss out-of-pocket expenses and any concerns you may have

When do I need First Dose Monitoring?

In addition to the initial assessment by your neurologist to determine that you are eligible to start therapy, the first dose of [®]Teva-Fingolimod needs to be monitored in all patients. If you have stopped taking your medication for a period of time, speak to your doctor, as you may require first dose monitoring again.

[®]Teva-Fingolimod may have side effects on the heart, therefore, a medical observation period for a minimum of 6 hours by a nurse and physician is required when you take your first dose.

This observation takes place in a clinic setting where you will have ongoing assessments to monitor for side effects of the drug.

If your first dose is well tolerated, your doctor will be informed, and you can continue taking the drug. If your first dose is not tolerated, your doctor will be informed and provide further directions. This may include longer observation or an overnight stay at a health care facility.

How do I set up my first dose monitoring appointment?

The clinic will call/follow-up with you to make the appointment for first dose monitoring once your Patient Care Specialist confirms coverage.

How do I access more information about the program?

For more information about the program, please call the Teva-Fingolimod Patient Care ProgramSM at 1-855-868-7622, 8am-8pm EST.

What if I experience an adverse event?

Tell your Patient Care Specialist at the Teva-Fingolimod Patient Care ProgramSM about any adverse events that you experience.

What if I become pregnant?

You should avoid becoming pregnant while taking [®]Teva-Fingolimod or in the two months after you stop taking it because of the risk of harming your unborn child. Talk with your doctor about the associated risk and about reliable methods of birth control that you should use during treatment and for 2 months after you stop treatment.

If you become pregnant while taking [®]Teva-Fingolimod, please let your health care practitioner know or contact Teva Canada Limited by calling 1-800-268-4127 ext. 3 or emailing druginfo@tevacanada.com.



**Teva-Fingolimod
Patient Care
ProgramSM**

**1-855-868-7622
8am-8pm EST**

Can I trust a generic medication to be the same as a brand-name medication?

Yes. To be approved by Health Canada, generic medications must:

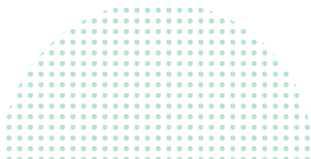
- contain the same amount of active ingredient as the brand-name product
- reach the same concentration (same level in the bloodstream in the same amount of time) to be considered “bioequivalent”
- meet the strict manufacturing-quality requirements that apply to both generic and brand-name medications.

What about non-active ingredients?

Non-active ingredients allow a tablet or capsule to be made homogeneously and deliver a correct and usable dosage of active ingredient. There are instances in which the non-active ingredients may differ slightly (although they must still meet rigorous testing and national standards). It is possible that some people are sensitive to this difference. All medications are accompanied by a patient-information leaflet. This leaflet provides information on nonactive ingredients.

Why does my medicine look different?

You have received a generic alternative to a brand-name medication. Generic medications contain the same amount of active ingredient as the brand-name product. Generic medications may contain different non-active ingredients that may affect the colour, size or shape of the drug. The manufacturer may also add their own marking or symbol.



Why is the name on my medicine bottle different from what was written on my prescription?

All medications have both a chemical or drug name and a brand name. The brand name is what the manufacture calls the drug once it comes to market. For example, there are several different brand-name drugs whose active ingredient (the drug name) is ibuprofen, such as Advil® and Motrin®.

Can I get what is written on the prescription rather than the generic alternative?

Many insurance companies require mandatory generic substitutions as a cost-saving measure on drug plans. This means that although your doctor writes the name of a brand-name drug on the prescription, your pharmacist dispenses a lower-priced equivalent which is usually a generic version. The generic alternative that you have received is equally safe and effective, at a fraction of the price.

Is there a way to get the "real drug"? I have had a bad experience with "substitutes" in the past.

The standards of quality are the same for both brand-name and generic drugs. Health Canada has evaluated the generic drug to ensure it has the same safety and effectiveness as the brand-name product. Health Canada also monitors the standards of manufacturing facilities very closely. Drug manufacturers must perform a series of tests, both during and after production, to demonstrate that every drug batch meets the quality requirements for that product. Please speak with your physician to determine the potential cause of your reaction.

Why do generic drugs cost less than brand name drugs?

When a company invents a new medication, they have to recoup their research investment, which is why brand-name drugs are protected by patents and their prices are higher. When the patent expires, generic versions of the drug can be produced. The generic-drug manufacturer can use much of the research that has already been conducted, allowing them to offer patients greatly reduced costs for the same medicine—on average, costs that are 60% to 80% lower. In addition to matching the safety, efficacy and quality of the brand-name products, generic drugs bring savings to you, your employer-sponsored drug plan and the healthcare system—savings that can be reinvested in other areas of healthcare for Canadians.

I have a card here that will pay for the brand name. Does my doctor want me to get the brand name because the generic is of lower quality?

When a drug loses its patent, some manufacturers provide third-party payment cards to doctors, to distribute to their patients. This is intended to discourage doctors from prescribing the generic alternative so that the brand-name company does not lose revenue. It is important to remember that generic drugs are subject to the same high-quality standards imposed by Health Canada as the brand-name drugs. By using these cards, it may be costing your third-party drug plan, which is paid by your employer, more money for the same medication. If your employer pays more than necessary for drugs, there may be less money available to pay for other benefits in the future, such as vision, dental or expensive specialty medicines.