

Medicare Extra Help/Low-Income Subsidy and VASCEPA® (icosapent ethyl)

Your patients taking VASCEPA may have a lower copay through the Medicare Extra Help/Low-Income Subsidy program

Extra Help—also referred to as **Low-Income Subsidy (LIS)**—is a program that helps **dual eligible (Medicare and Medicaid)** patients with limited income and resources pay for their prescription drug costs. To qualify for Extra Help, patients' annual income must be no more than \$18,735 for an individual or \$25,365 for a married couple living together. Patients may be able to get some help even with higher annual income—criteria may vary by state or circumstance.¹ Currently, about 3 in every 10 Medicare patients receive premium and cost-sharing assistance through the program.²

Extra Help enrollment for top national plans*

Plan	Coverage	Percent of Extra Help lives
AARP MedicareRx Saver Plus	Covered—Exclusive Omega-3	20%
Aetna Medicare Rx Saver	Covered—Exclusive Omega-3	37%
Cigna/Healthspring Rx Secure	Covered—Exclusive Omega-3	74%
Envision Rx Plus	Covered—Parity with Omega-3	20%
Express Script (PDP)	Preferred Omega-3	36%
Humana Basic Rx (PDP)	Covered—Exclusive Omega-3	38%
Humana Walmart Value Rx (PDP)	Covered—Parity with Omega-3	29%
SilverScript Choice	Covered—Exclusive Omega-3	44%
UnitedHealthcare Dual Complete	Preferred—Parity with Omega-3	43%
Wellcare Classic	Covered—Exclusive Omega-3	49%

There is no therapeutic equivalent or generic substitution for VASCEPA.

VASCEPA is covered on most Medicare Part D plans with >95% unrestricted access*

Extra Help copay

- Extra Help patients have a copay of no more than \$8.95 for branded drugs³
- >72% of Medicare patients on VASCEPA are paying less than \$9*
- Extra Help patients are not subject to a deductible or the coverage gap (donut hole)⁴

*Contact your Amarin sales professional.

INDICATIONS AND LIMITATIONS OF USE

- VASCEPA® (icosapent ethyl) is indicated as an adjunct to maximally tolerated statin therapy to reduce the risk of myocardial infarction, stroke, coronary revascularization and unstable angina requiring hospitalization in adult patients with elevated triglyceride (TG) levels (≥ 150 mg/dL) and established cardiovascular disease or diabetes mellitus and 2 or more additional risk factors for cardiovascular disease
- VASCEPA is indicated as an adjunct to diet to reduce TG levels in adult patients with severe (≥ 500 mg/dL) hypertriglyceridemia

The effect of VASCEPA on the risk for pancreatitis in patients with severe hypertriglyceridemia has not been determined.

IMPORTANT SAFETY INFORMATION

- VASCEPA is contraindicated in patients with known hypersensitivity (e.g., anaphylactic reaction) to VASCEPA or any of its components
- VASCEPA was associated with an increased risk (3% vs 2%) of atrial fibrillation or atrial flutter requiring hospitalization in a double-blind, placebo-controlled trial. The incidence of atrial fibrillation was greater in patients with a previous history of atrial fibrillation or atrial flutter

Please see additional Important Safety Information for VASCEPA on the back.
Please see accompanying full Prescribing Information for VASCEPA
or go to www.vascepahcp.com.

Vascepa[®]
(icosapent ethyl)



THE NEXT LEVEL OF HEART PROTECTION

IMPORTANT SAFETY INFORMATION (cont'd)

- It is not known whether patients with allergies to fish and/or shellfish are at an increased risk of an allergic reaction to VASCEPA. Patients with such allergies should discontinue VASCEPA if any reactions occur
- VASCEPA was associated with an increased risk (12% vs 10%) of bleeding in a double-blind, placebo-controlled trial. The incidence of bleeding was greater in patients receiving concomitant antithrombotic medications, such as aspirin, clopidogrel or warfarin
- Common adverse reactions in the cardiovascular outcomes trial (incidence $\geq 3\%$ and $\geq 1\%$ more frequent than placebo): musculoskeletal pain (4% vs 3%), peripheral edema (7% vs 5%), constipation (5% vs 4%), gout (4% vs 3%) and atrial fibrillation (5% vs 4%)
- Common adverse reactions in the hypertriglyceridemia trials (incidence $\geq 1\%$ more frequent than placebo): arthralgia (2% vs 1%) and oropharyngeal pain (1% vs 0.3%)
- Adverse Events, Product Complaints, or Special Situations may be reported by calling 1-855-VASCEPA or the FDA at 1-800-FDA-1088
- Patients receiving VASCEPA and concomitant anticoagulants and/or anti-platelet agents should be monitored for bleeding

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For additional information and to see whether they qualify for Extra Help, patients may

- Visit the Social Security Administration Extra Help page at ssa.gov/extrahelp or call **1-800-772-1213** or
- Call Medicare at **1-800-MEDICARE** or
- Visit their state Medicaid office

References: **1.** Social Security Administration. Apply online for Extra Help with Medicare prescription drug costs. Publication No. 05-10525. <https://www.ssa.gov/pubs/EN-05-10525.pdf>. Published March 2019. Accessed February 4, 2020. **2.** Henry J. Kaiser Family Foundation. 10 things to know about Medicare Part D coverage and costs in 2019. <https://www.kff.org/medicare/issue-brief/10-things-to-know-about-medicare-part-d-coverage-and-costs-in-2019/>. Accessed February 4, 2020. **3.** Centers for Medicare & Medicaid Services. Find your level of Extra Help (Part D). <https://www.medicare.gov/your-medicare-costs/get-help-paying-costs/find-your-level-of-extra-help-part-d>. Accessed February 4, 2020. **4.** Centers for Medicare & Medicaid Services. Costs in the coverage gap. <https://www.medicare.gov/drug-coverage-part-d/costs-for-medicare-drug-coverage/costs-in-the-coverage-gap>. Accessed February 4, 2020.



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