

# Personalized support from the start

## Key steps to accessing SKYTROFA<sup>®</sup>

The Ascendis Signature Access Program™ (A-S-A-P) offers a range of services to assist your patients from the start. This guide is designed to help you better understand and communicate what to expect in the coming weeks.



### Step 1: Program enrollment

#### Statement of Medical Necessity (SMN) form

- **The SMN form is a prescription enrollment form that must be submitted by the provider. Patients must be enrolled in A-S-A-P to receive their SKYTROFA Auto-Injector**
- Submit it via fax to **1-888-436-0193** or email to **info@ascendissupport.com**
- Once the completed SMN form is submitted to A-S-A-P, your patient's case will be created in the system **within 1 business day**

#### Patient Consent form

- **Patients will be required to give their consent to A-S-A-P, which may not be available at the time of SMN submission**
- The Patient Consent form can be obtained from the Nurse Advocate during the patient Welcome Call or downloaded at any time at **Skytrofa.com**

#### A Nurse Advocate is assigned to each patient at enrollment in A-S-A-P

The Nurse Advocate is assigned as the single point of care between you and your patient. The A-S-A-P support team assists with insurance support, delivery of the Auto-Injector, and injection training

### Step 2: Insurance authorization



#### Benefits verification

- The assigned Nurse Advocate will begin verifying insurance coverage and determining next steps
- Benefits verification begins once the completed SMN form has been received

#### Tip: Properly completing the SMN form is crucial for verification

Missing information can slow the verification process, insurance authorization, and FastStart Program or treatment fulfillment. In the event key information is missing from the SMN form, your office may be contacted as patient-specific plan details are entered into our system

#### Follow-up notification: Healthcare provider

- The Summary of Benefits will be sent via fax **on the same day** that benefits verification is completed
- After the initial notification, future communications can be modified to phone, email, or fax notifications

#### Your dedicated team is a valuable resource

The A-S-A-P Field Reimbursement Specialist (FRM) and Nurse Advocate are available for support throughout the insurance process, including prior authorizations, formulary exceptions, and appeals. They are able to provide helpful information, such as answering questions about transitioning patients previously on treatment and navigating dose changes

#### Follow-up notification: Patient and caregiver

- Patients will receive a Welcome Call from 1-844-442-7236 to discuss the outcome of benefits verification with their assigned Nurse Advocate
- During this call, the Nurse Advocate will also cover:
  - FastStart and Co-Pay Program eligibility
  - Enrollment status and next steps
  - Additional insurance requirements, such as a prior authorization or planned formulary exception

#### Tip: Expect a call from 1-844-442-7236

Your office should expect a call from **1-844-442-7236** to review the Summary of Benefits with the Nurse Advocate. Remind your patients to look for a call from the same number

### Step 3: FastStart and Co-Pay Programs



**The FastStart Program is available for commercially insured patients\* experiencing a delay in treatment due to denied coverage determination or appeals, who have an open active-insurance authorization**

\*Patients are not eligible if they participate in any federal or state healthcare program.

- If requested by the healthcare provider and patient, the Nurse Advocate will initiate the FastStart Program enrollment process for eligible patients
- **Within 7 business days of FastStart Program approval**, an initial 4-week supply of medication and the SKYTROFA<sup>®</sup> Auto-Injector will be shipped directly to patients

If FastStart Program enrollment is not requested, fulfillment and shipping times may vary and are dependent on the patient's case approval.

#### Note: During this time, A-S-A-P is working to help facilitate the insurance authorization process

Your FRM or Nurse Advocate can provide an overview of the FastStart Program, including managing appeals.

**For appeals assistance or additional support, please contact your FRM or Nurse Advocate at 1-844-442-7236**

**The Co-Pay Program for SKYTROFA helps eligible patients pay as little as ("PALA") \$5 per monthly prescription with no monthly cap and an annual maximum cap of \$6000 per calendar year<sup>†</sup>**

#### Eligibility and Restrictions:

- Patient must be enrolled in, and must seek reimbursement from or submit a claim for reimbursement to, a commercial insurance plan. The SKYTROFA prescription being filled must be covered by the patient's commercial insurance plan
- Offer not valid for patients enrolled in Medicaid, Medicare, Medigap, VA, DOD, TRICARE, or any similar federal or state health care program
- Offer excludes full cash-paying patients and may not be redeemed for cash



For full Co-Pay Program terms, conditions, and eligibility criteria, scan the QR code

<sup>†</sup>Terms & Conditions apply. See Eligibility and Restrictions.

For any questions about A-S-A-P, how to train your own patients, or these steps, please call **1-844-442-7236** to speak with a member of our team



## Step 4: Auto-Injector training

- Once the SKYTROFA® Auto-Injector is shipped to patients, the Nurse Advocate will initiate injection training with a Clinical Educator
- Patients can expect a call from the Clinical Educator after receiving their medicine and Auto-Injector
- Patients have the option to choose in-person or virtual injection training
- Your office will be notified via fax of the patient's completion of training **on the same day** as their training session



**Tip: Remind patients that they should wait to receive training by a healthcare professional before using their Auto-Injector for the first time**

If you would like to train your own patients in-office for their first injection, you may request training through A-S-A-P

## Patient initiation checklist

A-S-A-P offers a range of support services to help your patients navigate the entire treatment journey, including the initiation process.

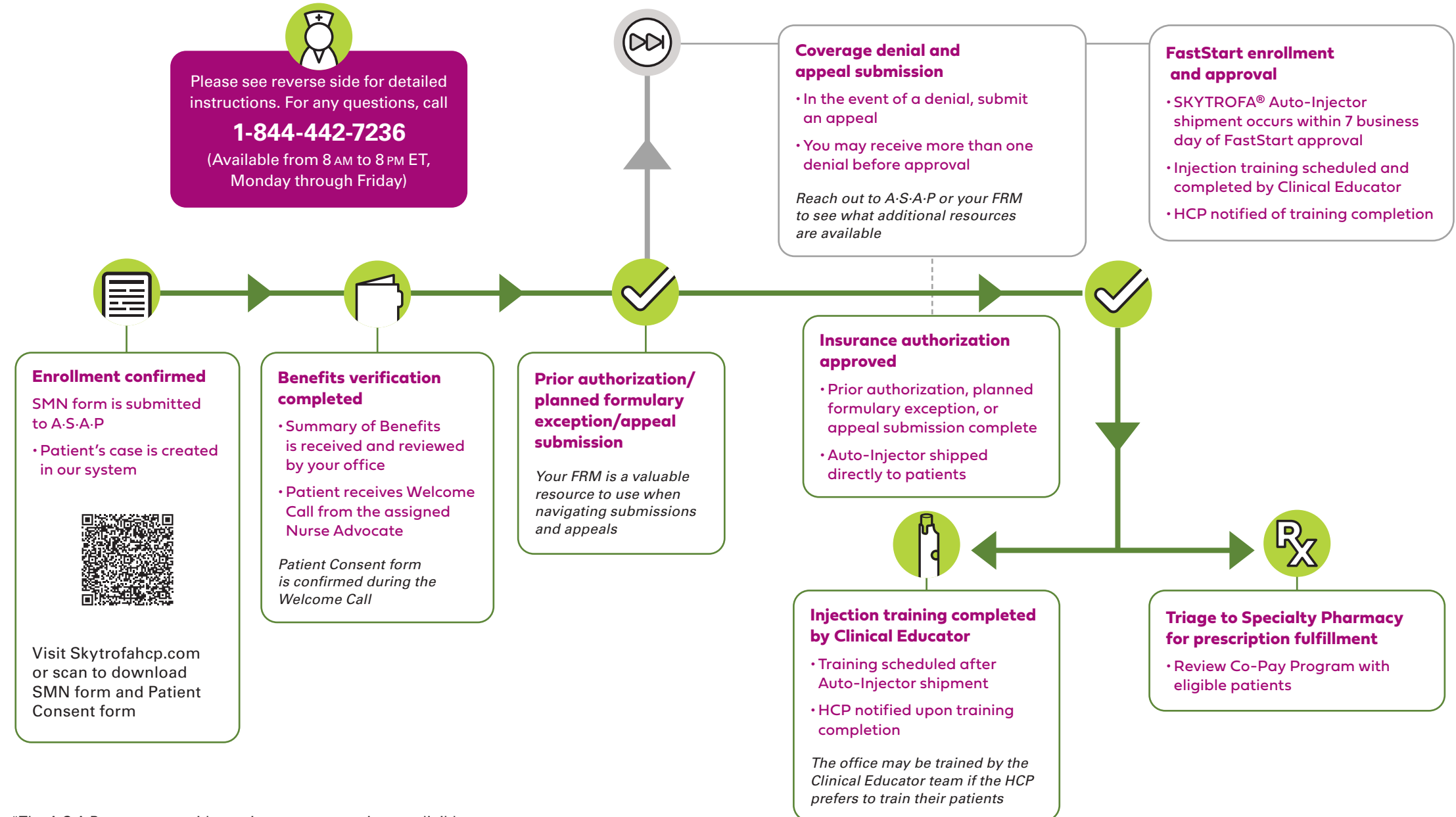
Here are some key steps in the initiation process:

<b>Step 1</b>	<p><b>Submit the SMN form with all completed information, including:</b></p> <ul style="list-style-type: none"> <li>○ ICD-10 diagnosis code</li> <li>○ Medical assessment section</li> </ul>
<b>Step 2</b>	<p><b>Confirm your office has received and reviewed the Summary of Benefits with the Nurse Advocate or FRM</b></p> <p><b>Submit the prior authorization/planned formulary exception to the insurance, as required</b></p>
<b>Step 3</b>	<b>Request enrollment into the FastStart Program*</b>
<b>Step 4</b>	<b>Confirm that Auto-Injector training has been completed</b>

\*Program eligibility and requirements apply.

## Personalized support from the start\*

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ACCESS PROGRAM™

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