

**COPAY ASSISTANCE CARD PLAN ANNOUNCEMENT – CHANGE ALERT NEW DMARD NDC
HUMIRA® (adalimumab)**

- **Processor:** OPUS Health
- **BIN / PCN:** 601341 / OHCP
- **Group Numbers:** OH9003231, OH9003241, OH9003251, OH9003261, OH9003271, OH9003411, OH9003451, OH9003521, OH9003551, OH9003621, OH9003591, OH9003381, OH9003691, OH9003681

- **Eligibility:** Insured & Cash Patients
- **Cardholder ID:** Use 12 digit Rx ID number as it appears on card.
- **Person Code:** Use 2 digit suffix code as it appears on card.
- **Submission Version:** D.0 only
- **Copayment:** Assistance up to \$1600.00, after the patient pays the first \$5.00. Remaining dispensing up to \$500.00.
- **Reimbursement :** Reduction amount + Pharmacy Professional Fee
- **Mfg. / Program:** Abbott Laboratories – HUMIRA® Protection Plan - Rheumatology
- **Program Dates:** Program effective through 12/31/2013
- **Plan Limitations:** Card valid one year from activation date. Renewable.
**HUMIRA Copay Card available for use in Massachusetts.
In Massachusetts DMARD benefit not valid.**

- **Product Coverage**

Product	NDC
METHOTREXATE INJ 50MG/2 ML	00703-3671-03

PROVIDER AND MEMBER SERVICES

This is a copay program. It may be used to reduce the patient's amount due on a prescription where permitted by law. The card can be processed electronically or the patient can mail it in for reimbursement using a form available from OPUS Health. This offer is not valid for prescriptions covered under Medicaid, Medicare or any other public payer programs. **Note:** Card language states cards not valid in MA, but OPUS Health will process claims submitted for MA residents as copay cards are now allowed in MA. Submit the claim to the patient's primary insurance first, then submit the copay authorized as a secondary transaction to OPUS Health. For patients without insurance, submit the claim at U&C. For questions regarding electronic claim status or related member services such as eligibility, plan coverage information, or provider enrollment, please call **OPUSHealth** at: **(800) 364-4767**.

Payor Sheet and other documentation, including test data for certification testing, can be found at: www.opushealth.com/certificationtesting.

HUMIRA PROTECTION PLAN
Helping Patients Access HUMIRA

1.800.4HUMIRA

Please see Important Safety Information, and accompanying full Prescribing Information, including Medication Guide, in brochure.

OPUSHEALTH

RxBIN: 601341
RxPCN: OHCP
RxGrp: OH9003251
RxID: 000000000000
Suf: 01

Patient Instructions:

This is a patient discount program. Patients must enroll in the HPP program to receive discounts. To enroll in the HPP program call **1.800.4HUMIRA** between 8 AM and 8 PM EST, Monday through Friday. Following enrollment, present this card to your pharmacist along with your prescriptions for processing. Eligible discounts will be applied after your initial minimum payment. For questions (or if your pharmacy does not accept this card), please call **1.800.4HUMIRA**. Monthly co-pay covers HUMIRA (adalimumab) alone or HUMIRA plus one of the following medications: methotrexate, leflunomide (Arava®), or hydroxychloroquine (Plaquenil®).

This card is the property of Abbott Laboratories and must be surrendered upon demand. This card is not valid for persons eligible for reimbursement of these products, in whole or in part, under Medicare Part D, Medicare Advantage, Medicaid, or similar federal or state programs, or in Massachusetts. Offer also void where prohibited by law. Program may be discontinued at any time without notice.

Please see Important Safety Information, and accompanying full Prescribing Information, including Medication Guide, in brochure.

Pharmacist Instructions:

Please submit the co-pay authorized by the patient's primary insurance as a secondary transaction to OPUS Health or, for self-pay patients, submit the claim as U&C. Please process HUMIRA and any accompanying medication separately. You will receive a professional fee from OPUS Health with your next remittance. If you have questions, call OPUS Health at **1.800.364.4767**.

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Leflunomide (Arava®) and hydroxychloroquine (Plaquenil®) are not registered trademarks of Abbott.