

Savings Program

for eligible commercially insured patients

Pay \$5 per infusion

\$26,000 maximum program benefit per calendar year.
Terms expire at the end of each calendar year and may change.
See program requirements below.



Get savings on your out-of-pocket medication costs for RYBREVANT[®]. Depending on your health insurance plan, savings may apply toward co-pay, co-insurance, or deductible.

Program does not cover costs to give you your infusion.

1 Enroll in the Savings Program



By phone

877-CarePath (877-227-3728)

–OR–



Online at

[MyJanssenCarePath.com](https://www.MyJanssenCarePath.com)

Am I eligible?

You may be eligible for the Janssen CarePath Savings Program if you are age 18 or older and currently use commercial or private health insurance for RYBREVANT[®]. There is no income requirement.

The Janssen CarePath Savings Program is based on medication costs only and does not include costs to give you your infusion.

Other requirements

- This program is only for people age 18 or older using commercial or private health insurance for their Janssen medication. This includes plans from the Health Insurance Marketplace. This program is not for people who use any state or federal government-funded healthcare program. Examples of these programs are Medicare, Medicaid, TRICARE, Department of Defense, and Veterans Administration.
- You may not seek payment for the value received from this program from any health plan, patient assistance foundation, flexible spending account, or healthcare savings account.
- You must meet the program requirements every time you use the program.
- Program terms will expire at the end of each calendar year. The program may change or end without notice, including in specific states.
- To use this program, you must follow any health plan requirements, including telling your health plan how much co-payment support you get from this program. By getting a Savings Program benefit, you confirm that you have read, understood, and agree to the program requirements on this page, and you are giving permission for information about your Savings Program transactions to be shared with your healthcare provider(s). These transactions include rebates and any funds placed on the card or balance remaining on the card.
- Before you enroll in the program, you will be asked to provide personal information that may include your name, address, phone number, email address, and information related to your prescription medication insurance and treatment. This information is needed for Janssen Biotech, Inc., the maker of RYBREVANT[®], and our service providers to enroll you in the Janssen CarePath Savings Program. We may also use the information you give us to learn more about the people who use RYBREVANT[®], and to improve the information we give them. Janssen Biotech, Inc., will not share your information with anyone else except where legally allowed.
- If you use medical/primary insurance to pay for your medication, you need to submit a rebate request with an Explanation of Benefits (EOB) to get payment from the Savings Program. With your permission, your provider may submit the rebate request and EOB for you. Please make sure you and your provider know who will submit the rebate request.
- This program offer may not be used with any other coupon, discount, prescription savings card, free trial, or other offer. Offer good only in the United States and its territories. Void where prohibited, taxed, or limited by law.

You may end your participation in Janssen CarePath at any time by calling 877-CarePath (877-227-3728).

Please read the full [Prescribing Information and Patient Information](#) for RYBREVANT[®] and discuss any questions you have with your doctor.

② How to use your Savings Program benefits

Use our streamlined process for requesting a rebate

Here's how it works:

- Your provider or pharmacy may or may not collect your co-pay, based on your insurance coverage
- You receive your treatment with RYBREVANT® (amivantamab-vmjw)
 - Your provider or pharmacy submits your claim to your healthcare insurance provider
- You and your provider receive an Explanation of Benefits (EOB) statement from your insurance
 - You are responsible for submitting the EOB to the Janssen CarePath Savings Program, or you can request your provider to submit the EOB on your behalf (see *How to submit a rebate request* below)
- The Janssen CarePath Savings Program reviews your EOB and issues rebate to your card, to you by check, or to your provider, if you have assigned your benefits to your provider

NOTE: Your provider must provide a copy of the Health Insurance Claim Form—CMS-1500 (HICF) or Uniform Billing Form—CMS-1450 (UB-04) with EOB submissions.

Your Janssen CarePath Savings Program Virtual Payment Card can be used only for RYBREVANT® medication costs. **Your card is not a credit card. There is no charge for your card.**

Your healthcare provider can visit [JanssenCarePathPortal.com](https://www.janssencarepath.com) to create a Provider Portal Account to enroll you in the Janssen CarePath Savings Program, upload EOB forms from your insurance provider, and view your Savings Program requests and transactions.

With a Janssen CarePath online account, you can manage your Savings Program benefits



- Review your available benefits
- Submit Savings Program requests
- View benefit payment transactions
- Receive timely alerts and program updates

Get started now...

Visit [MyJanssenCarePath.com](https://www.janssencarepath.com)



Need help? Call **877-CarePath (877-227-3728)**
Monday–Friday, 8:00 AM–8:00 PM ET

If you only want to check your eligibility and enroll in the Janssen CarePath Savings Program, visit [MyJanssenCarePath.com/express](https://www.janssencarepath.com/express) or call 877-CarePath (877-227-3728).

How to submit a rebate request

If you have created an online account, you may submit rebate requests online in your account. You can also submit your EOB by fax or by mail.

At your request, your provider may submit rebate requests to the Savings Program on your behalf via the Provider Portal or by fax or mail.



Online:
[MyJanssenCarePath.com](https://www.janssencarepath.com)



Fax:
833-512-0489



Mail:
Janssen CarePath Savings Program
2250 Perimeter Park Drive, Suite 300
Morrisville, NC 27560

Confirm with your provider who will submit rebate requests to the program—you or your provider at your request.

Please read the full [Prescribing Information and Patient Information](#) for RYBREVANT® and discuss any questions you have with your doctor.