CIMERLI™ (ranibizumab-eqrn) injection

CIMERLI Solutions™ Product Replacement Program

CIMERLI Solutions™ is part of the Coherus Solutions™ family of programs

Call 1-844-483-3692
Monday to Friday | 8 AM to 8 PM ET
FAX 1-877-226-6370
www.CIMERLISolutions.com

Program Description

- This program allows physician offices or hospital outpatient departments to receive CIMERLI™ (ranibizumab-eqrn) injection replacement product if all eligibility criteria are met
- This program does NOT require that providers have CIMERLI Solutions™ perform a benefit verification for the patient prior to therapy
- Providers may register claims for product replacement after an initial claim for CIMERLI™ is denied by a payer

Physician Offices or Hospital Outpatient Departments Are Eligible Only

- If CIMERLI™ is administered for a medically appropriate use, as determined by the specific payer's policies and coverage guidelines
- If the office conducted a product-specific benefit verification and followed all payer coverage requirements prior to treatment or has used CIMERLI Solutions™ services to conduct the benefit verification
- If CIMERLI™ is not reimbursed after all eligibility criteria are met

How the Program Works*

1. Identify the denied claim

2. Report the denied claim to CIMERLI Solutions™
   - Providers can register denied claims/appeals for CIMERLI™ with CIMERLI Solutions™
   - At registration, the provider receives a product replacement request form
   - The provider is required to submit required documentation
     - Signed product replacement request form and patient consent
     - Proof of benefit verification (medical record or payer reference number)
     - When appropriate, prior authorization (PA) results
     - Explanation of Benefits (EOB)
     - Denied appeals
   - If the provider meets eligibility requirements for product replacement, CIMERLI Solutions™ can support the remaining appeals process

3. Coordinate with CIMERLI Solutions™ on the appeal(s)
   - Providers work with CIMERLI Solutions™ on the appeal process to attempt to have the claim paid. If the claim remains unpaid after one unsuccessful appeal, the CIMERLI™ Field Reimbursement Manager should be contacted to help determine if a second appeal is required before the provider is eligible for product replacement

4. Your Field Reimbursement Manager (FRM) will review all necessary documentation and sign the product replacement program request form before final submission to CIMERLI Solutions™

5. If approved, CIMERLI Solutions™ ships the product to the provider's office

***Providers must adhere to all program terms and conditions (please see page 2). Provider must submit appeals within the timely filing limit.**

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Program Terms and Conditions

For each claim, prior to initiation of CIMERLI™ (ranibizumab-eqrn) injection therapy, providers must perform a product-specific benefit verification to confirm that CIMERLI™ will be covered by the payer for the intended use. The provider does not need to have this completed by CIMERLI Solutions™; however, CIMERLI Solutions™ can assist providers with the CIMERLI™ benefit verification process upon request if providers obtain patient consent. If required, the provider must also obtain PA approval from the payer.

The provider must keep a record of the benefit verification/PA results in the patient's record This should include: the dates of these interactions, the name of the insurance representative by whom coverage was verified, and written information from the payer. Whether the patient's primary insurer is Medicare, Medicaid, or a private commercial payer, the patient's claim must meet the specific payer's guidelines for use of the therapy. If providers need assistance identifying the Medicare guidelines or Medicaid guidelines for their respective state, they may contact CIMERLI Solutions™.

Once a provider receives a denial for a properly verified claim and contacts CIMERLI Solutions™, Patient Access Specialists will confirm that the office is registered in the CIMERLI Solutions™ Product Replacement Program and will request copies of the relevant information, including but not limited to:

- The initial submitted claim
- The EOB (denial)
- Supporting documentation to show proof of a benefit verification and/or secured PA

A Field Reimbursement Manager (FRM) will review all materials and documentation. A request form must have a FRM signature.

Once these materials are received, CIMERLI Solutions™ will: confirm appropriate benefit verification and review the denied claim, help determine the reason for the denial, and provide support to appeal the claim. If CIMERLI Solutions™ confirms that the patient's coverage was verified prior to treatment, and the original claim was submitted appropriately, CIMERLI Solutions™ will register the claim in the Product Replacement Program.

CIMERLI Solutions™ can assist the provider with the first and/or second appeal and the Field Reimbursement Manager can assist in identifying whether a second appeal is required based on the denial reason. If a second appeal is required and is subsequently unsuccessful, the provider must promptly notify CIMERLI Solutions™ to request enrollment in the Product Replacement Program for the registered claim. Coherus BioSciences will provide replacement product(s) to the provider for CIMERLI™ if all the above eligibility criteria are met.

The Product Replacement Program is available for outpatient use only and does not cover any costs related to office visits or administration of CIMERLI™. Coherus BioSciences may modify or terminate this program at any time without notice. Nothing in this program is intended to induce or reward referrals of product.

Providers should not bill the patient for any product that was replaced under this program. If providers receive any payments for products replaced under this program, they agree to return or pay Coherus BioSciences, Inc. for the cost of the product.

Providers that are reimbursed under a fully capitated rate for drug products or practices that account for drug products as part of their negotiated rates, the practice assumes full risk and cannot participate in the Product Replacement Program.

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