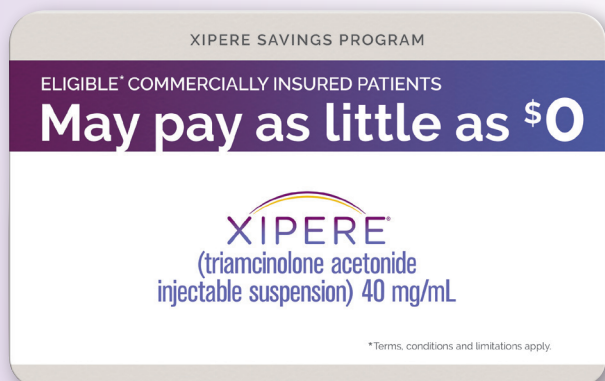


Help your patients manage their XIPERE[®] Savings Program benefits



XIPERE[®] Savings Program

Eligible commercially insured patients
may pay as little as \$0 out of pocket
through the XIPERE[®] Savings Program*

Terms, limitations and conditions apply. You can refer patients to the Focus on Access[™] program to determine eligibility for patient assistance.[†]

*There is a maximum program benefit of \$6,000 per year. Patients may pay out-of-pocket costs if enrollment period maximum benefit caps are met.

[†]Patients are not eligible if they have government insurance (i.e., patients are enrolled in any state or federally funded programs, including, but not limited to, Medicare, Medicaid, Medigap, Veterans Affairs [VA], Department of Defense [DoD], CHAMPVA or TRICARE). Void where prohibited by law, taxed or restricted.

Enrolling patients in the Savings Program

Eligible commercially insured patients are enrolled automatically in 1 of 2 ways:



By completing and submitting a
Patient Information and Enrollment Form

— or —



By being enrolled through the
Focus on Access[™] Provider Portal

Savings Program Guidelines

- Patients remain eligible for the XIPERE[®] Savings Program until the end of the calendar year as long as they continue to meet the eligibility requirements of the program
- At the end of the calendar year, the patient's eligibility will be reevaluated, and a reenrollment process must be completed
- Patients are required to inform the XIPERE[®] Savings Program of any changes in insurance and/or financial status
- Full program requirements can be found at Xipere.com/hcp/accessandresources/savings-program

Please see full [Prescribing Information](#) for XIPERE[®].

Submitting Savings Program claims for reimbursement

The patient may submit claims for reimbursement to the XIPERE[®] Savings Program or, at the patient's direction, the provider may submit claims on behalf of the patient. Confirm with your patient who will submit the claims, which **must be submitted within 180 days of the date of service.**

If you are submitting a claim on behalf of your patient:

- Claims can be submitted to the XIPERE[®] Savings Program by submitting a Claims Submission Form, which is available for download from the Focus on Access[™] Provider Portal at www.BauschLombFOA.com
- A submitted claim should include the following:
 - A completed and signed Claims Submission Form (patient's signature **is required** in authorization and Assignment of Benefits sections)
 - Detailed Explanation of Benefits (EOB), which includes the insurance carrier name and logo, name of the plan, patient's responsibility, date of service and drug code broken out by name, J-code or National Drug Code
- You can submit claims by fax or through the Provider Portal



Fax: 866-272-8839

— or —



Provider Portal at www.BauschLombFOA.com

(Use the direct message function to upload the required documentation.)

- If the provider submitted the claim request, copay funds will be remitted to the provider via check or ACH with statement

If the patient is submitting a claim:

- Patients will need to complete, sign and submit a XIPERE[®] Savings Program Claims Submission Form, including a copy of their EOB from their primary insurance provider and a copy of their receipt confirming payment to their health care provider



Include all required information so the claim is processed without delays.

**For More Information, call 866-272-8838,
Monday through Friday, 9:00 AM to 5:00 PM ET to speak to a XIPERE[®] Savings Program Representative**

Please see full [Prescribing Information](#) for XIPERE[®].

BAUSCH + LOMB

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