

Your patient's health plan benefits and treatment-related out-of-pocket costs can impact their ability to access prescribed therapy with VYVGART[®] (efgartigimod alfa-fcab) or VYVGART[®] Hytrulo (efgartigimod alfa and hyaluronidase-qvfc).

At argenx, we believe treatment decisions should be made between a patient and their healthcare provider based on clinical needs. Once the decision is made to prescribe VYVGART or VYVGART Hytrulo, it is important that patients and providers are well informed about access considerations in order to successfully navigate each step of the treatment journey.

Considering all available coverage options will help you and your patient identify the therapy that best meets your patient's needs. Review this tool to help you understand how different types of health plan benefits and other factors influence access.

Your patient's financial responsibility and coverage restrictions for treatment can vary based on multiple factors, such as:

Their specific health plan benefits

- Insurance type (commercial or government)
- Coverage under medical or prescription drug benefits
- Prior authorization (PA) requirements

How the drug is administered

- Intravenous infusion or subcutaneous injection

Where they receive therapy

- Healthcare provider (HCP) office, infusion center, hospital outpatient setting, or home health (if applicable)

Tips for Supporting Patient Access



My VYVGART Path will provide a comprehensive benefits verification to help you determine how the site of care may impact patient access to VYVGART or VYVGART Hytrulo.

Enroll your patients in My VYVGART Path for a patient-specific benefits verification that provides ways patients can access prescribed therapy.

If your patient has insurance but is concerned about their ability to afford treatment, My VYVGART Path can help with the following:

- Enroll eligible patients in the VYVGART Co-pay program or provide referrals for other potential financial assistance options
- Determine the patient's out-of-pocket financial responsibility, such as deductible, co-pay or co-insurance amounts, and annual cap on patient spending for different sites of care
- Confirm which treatment sites and specialty pharmacies are in-network based on the patient's insurance
- Research coverage requirements and coding guidelines
- Compare payer requirements, including PA, step therapy, and formulary exclusions
- Verify primary and secondary coverage policies
- Connect patients to their health plan's denial and appeal processes

If your patient is uninsured, they may be eligible for financial assistance through the My VYVGART Path Patient Support Program.



If you have questions about insurance coverage for your patients, your Territory Business Manager (TBM) can connect you with your Field Reimbursement Manager (FRM) or you can contact **My VYVGART Path** at **1-833-MY-PATH-1 (1-833-697-2841)**.

You can learn more and access downloadable resources by visiting VYVGARTHCP.com/access.

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

Please see full [Prescribing Information](#) for VYVGART Hytrulo.