Choose OMIDRIA® (phenylephrine and ketorolac intraocular solution) 1% / 0.3% for your next patient—with confidence that it’s covered

OMIDRIAssure® provides support for commercially insured patients

**We Pay the Difference Patient Reimbursement Program**

Assistance for patients with insufficient commercial insurance
- Omeros will pay your facility, on behalf of your patient, the difference between your facility’s acquisition cost for OMIDRIA and the amount covered by your commercially insured patient’s insurance
- The benefits apply even if the annual commercial deductible obligation has not yet been met

1. Use OMIDRIA for the surgery and bill your patient’s commercial insurance carrier showing OMIDRIA as an itemized charge
2. After the claim is processed, if the commercial insurance payment for OMIDRIA does not cover the facility’s acquisition cost, your facility submits an itemized explanation of benefits (EOB) showing the date of service and the covered amount for OMIDRIA
3. Omeros sends a check to your facility on behalf of your patient that covers the difference between acquisition cost of OMIDRIA and the amount covered by insurance, independent of your patient’s remaining deductible amount after that required for the surgical procedure

**LIVE ASSISTANCE REIMBURSEMENT HOTLINE**

Talk to your OMIDRIA representative or Omeros reimbursement specialist today, or call **1-877-OMIDRIA (1-877-664-3742)** 9 AM–5 PM ET, Monday–Friday

OMIDRIAssure program services are subject to change without notice. The We Pay The Difference Commercially Insured Patient Reimbursement Program patient benefit is not available for patients with any government insurance. Facility acquisition cost is determined after application of any volume-based discount. Claims must be submitted within 1 year of date of surgery. Omeros does not guarantee coverage or reimbursement.
Follow these steps to obtain assistance for eligible patients

Steps to submit We Pay the Difference claims

After a primary commercial claim is processed for a patient with only commercial insurance, if the insurer payment does not fully cover the acquisition cost for OMIDRIA, your facility should follow the process below:

• Complete the We Pay the Difference submission form including patient name, date of birth, date of surgery, and physician name for every commercial claim for which your facility is seeking assistance
• Provide a clear, legible copy of the explanation of benefits (EOB) for every patient
• Your facility administrator or physician provides your facility name/address and signs the We Pay the Difference submission form to verify the accuracy of the information
• Facility faxes the We Pay the Difference submission form(s) and all of the EOBs to OMIDRIAssure at 1-855-664-3741

If all information is provided and there is no missing information, your facility should receive payment on behalf of your patient for the difference between your facility’s acquisition cost for OMIDRIA and the reimbursed amount within 15 BUSINESS days after submitting the forms.

If there is any missing information, the claim(s) will not be processed until the information is received. When all of the information is received, your facility should expect to receive payment on behalf of your patient within 15 business days.

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INDICATIONS AND USAGE
OMIDRIA® (phenylephrine and ketorolac intraocular solution) 1% / 0.3% is added to ophthalmic irrigating solution used during cataract surgery or intraocular lens replacement and is indicated for maintaining pupil size by preventing intraoperative miosis and reducing postoperative ocular pain.

IMPORTANT SAFETY INFORMATION
OMIDRIA must be added to irrigating solution prior to intraocular use.
OMIDRIA is contraindicated in patients with a known hypersensitivity to any of its ingredients.
Systemic exposure of phenylephrine may cause elevations in blood pressure.
Use OMIDRIA with caution in individuals who have previously exhibited sensitivities to acetylsalicylic acid, phenylacetic acid derivatives, and other nonsteroidal anti-inflammatory drugs (NSAIDs), or have a past medical history of asthma.
The most commonly reported adverse reactions at ≥ 2% are eye irritation, posterior capsule opacification, increased intraocular pressure, and anterior chamber inflammation.

Please see the Full Prescribing Information for OMIDRIA at www.omidria.com/prescribinginformation.
You are encouraged to report Suspected Adverse Reactions to the FDA.
Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

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