

Your offer* is activated and ready to use.

**Available to all who have a valid prescription†
for SCEMBLIX® (asciminib) tablets regardless of insurance.**


Novartis
Patient Support™

**FREE
TRIAL
OFFER**

30-Day Supply

 **SCEMBLIX®**
(asciminib) 20 mg, 40 mg tablets

BIN **601341**
PCN **OHS**
GRP **OH7146021**
Rx ID **SCE205482190**



How does this Free Trial Offer work?

- ▶ Good for a 30-day supply
- ▶ One-time use only
- ▶ Present to your specialty pharmacy along with a valid prescription for SCEMBLIX

Questions?

Call Novartis Patient Support at **866-433-8000**, Monday-Friday, 8:00 AM-8:00 PM ET, excluding holidays.
Or visit **scemblix.com** for more information.

***No purchase required.** This free trial is not health insurance. Void where prohibited by law. Product dispensed pursuant to terms and conditions of offer. Valid only in the US and Puerto Rico. Claims shall not be submitted to any public or private third-party payer or any federal or state health care program for reimbursement. Offer not valid if reproduced or submitted to any other payer. It is illegal for any person to sell, purchase or trade, or offer to sell, purchase or trade, or to counterfeit, this offer. Prescriber ID# is required on prescription. This is the property of Novartis Pharmaceuticals Corporation and must be returned upon request. Novartis Pharmaceuticals Corporation reserves the right to rescind, revoke, or amend offer without notice.

Pharmacist Instructions: Limit one offer per patient. Redeem for SCEMBLIX only when accompanied with a valid, signed prescription form for SCEMBLIX. No substitutions permitted. For reimbursement, please submit this offer as a primary claim to IQVIA using BIN 601341. Do not submit to any other payer, public or private. The information printed above should be used when submitting for reimbursement. For questions, please call the Pharmacist Help Desk at 1-866-370-2107. This offer is property of Novartis and IQVIA and must be returned upon request. Both parties reserve the right to rescind, revoke, or amend this program without notice.

†Confirm your specialty pharmacy accepts this offer before filling your prescription.

Novartis Patient Support is a trademark of Novartis AG.

