NORDITROPIN® ACCESS CONTINUES TO IMPROVE IN 2021

NORDITROPIN[®] IS COVERED FOR NEARLY 8 OF 10 PATIENTS

on Commercial and Medicaid Plans Nationwide¹

National PBMs choose NORDITROPIN®1-3

Exclusive



• Prime Therapeutics

Preferred

- CVS Caremark Performance
- Express Scripts National Formulary

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OptumRx

PBM=pharmacy benefit manager.

Intended as a guide. Lower acquisition costs alone do not necessarily reflect a cost advantage in the outcome of the condition treated because there are other variables that affect relative costs. Formulary status is subject to change.

Multiple products within the same therapeutic class may be considered "preferred" and on the same tier.

References: 1. Data on File. **2.** CVS Caremark. Value formulary. https://www.caremark.com/portal/asset/Value_Formulary_OE.pdf. Accessed November 12, 2020. **3.** Formulary data are provided by Fingertip Formulary[®] and current as of November 11, 2020.

NovoCare[®] is here to assist your patients throughout their treatment journey

Benefits Verification | Reimbursement Support | Patient Resources



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norditropin[®] (somatropin) injection 5 mg, 10 mg, 15 mg, 30 mg pens