

PLENVU®

Powder for Oral Solution

PEG 3350, Sodium Ascorbate, Sodium Sulfate, Ascorbic Acid, Sodium Chloride, and Potassium Chloride

140g | 48.11g | 9g | 7.54g | 5.2g | 2.2g

SUCCESS WITH LITTLE PEG

Dear Patient,
Your healthcare provider has prescribed **PLENVU**. Below are all of the resources to support your bowel prep success!



PLENVU offers cutting-edge patient support

Dosing Instructions

To help ensure proper administration, you can visit www.myPLENVU.com to download and print instructions.

Plenvu Dosing Calculator



You can also utilize the **PLENVU DOSING CALCULATOR** tool on the website to determine recommended dosing times based on when your colonoscopy is scheduled. However, be sure to follow any specific directions from your physician.

PLENVU Dosing Instruction \ Videos

To help ensure proper administration, you may visit myPLENVU.com to watch firsthand how to take **PLENVU**. Both dosing regimens are available to watch; **Same-Day Morning-of-Colonoscopy Dosing*** and **2-Day Split-Dosing**.



"It's Go Time" Texting Program**



You can sign up to receive text messages tips and alerts to remind you:

- How to obtain a savings card
- When to take each dose of PLENVU
- Tips on how to stay hydrated
- When to stop drinking liquids
- How to improve the bowel prep experience

To sign up, text **PLENVU** to **84883****

Text **SAVE** to **84883** to generate a **PLENVU** savings card

PLENVU Hotline

If you have any questions or concerns while taking PLENVU, you can call the **free PLENVU** hotline at **1-855-MY-PLENVU**

Live operators are available during daytime and evening hours to fit your needs, Sunday, 4 PM to Friday, 8 PM EST and can answer a variety of questions, including those related to dosing. Many different language translations are available.

Complimentary support calls made directly to patients from the PLENVU Support Team to educate how to take PLENVU are also available.†



PLENVU Co-pay Assistance Cards‡



Access to patient savings for both Commercial and/or Medicare Part D insurance plans. Even if PLENVU isn't covered by your insurance, or requires authorization, you may still be able to save!

Here's how: Ask your healthcare provider or member of the office staff for a co-pay card, visit www.myplenvu.com to download one or text **SAVE** to **84883**.

Remember to **register** and **activate** your co-pay assistance card before bringing it to the pharmacy for processing. You may register your co-pay assistance card online at www.myPLENVU.com or by calling **1-855-202-3208**.

Note: for illustrative purposes only.

*The "One-Day Morning Dosing Regimen" (as it is labeled in the Prescribing Information) is referred to as "Same-Day Morning-of-Colonoscopy Dosing."

**At no cost with an unlimited texting plan; otherwise, message and data rates may apply. Message frequency determined by user. Text HELP to 84883 for help. Text STOP to 84883 to cancel. For terms, visit cs1.me/plenvu.

†Patients must opt-in through the "It's Go Time Program".

‡Restrictions apply. Not available to patients enrolled in federal, state, or governmental health care programs, including, but not limited to, Medicare, TRICARE, Veterans Administration, Department of Defense, CHAMPUS, the Puerto Rico Government Health Insurance Plan, or any other federal or state health care program.

INDICATION

PLENVU® (polyethylene glycol 3350, sodium ascorbate, sodium sulfate, ascorbic acid, sodium chloride, and potassium chloride for oral solution) is a prescription medication used by adults to clean the colon before a colonoscopy.

IMPORTANT SAFETY INFORMATION

- Do not take PLENVU® if you have a blockage in your intestine (bowel obstruction), an opening in the wall of your stomach or intestine (bowel perforation), problems with food or fluid emptying from your stomach (gastric retention), a problem with food moving too slowly through your intestines (ileus), a very dilated large intestine, or an allergy to any of the ingredients in PLENVU®.

Please see additional Important Safety Information throughout and accompanying full Prescribing Information.

INDICATION

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- It is important to drink sufficient clear liquids before, during, and after the use of PLENVU®. Be sure to consume additional clear liquids after the first dose and second dose of PLENVU®. Stop drinking liquids 2 hours prior to colonoscopy.
- Before you take PLENVU®, talk to your doctor if you:
 - Have problems with serious loss of body fluid (dehydration) and changes in blood salts (electrolytes).
 - Have heart problems or take medication that affects your heart. Your doctor may consider obtaining an electrocardiogram (ECG) test if you are at an increased risk for heart rhythm abnormalities.
 - Have a history of seizures or take antiseizure medication.
 - Have kidney problems or take medication that affects kidney function. Your doctor may want to perform blood testing before and after your colonoscopy.
 - Have a history of stomach or bowel problems, such as ulcerative colitis, a bowel blockage, or a suspected opening in the wall of your stomach or intestine.
 - Have problems swallowing, heartburn (gastric reflux), or if you inhale food or fluid into your lungs when eating or drinking (aspirate).
 - Have a condition that destroys red blood cells, called glucose-6-phosphate dehydrogenase (G6PD) deficiency.
 - Are withdrawing from drinking alcohol.
 - Have phenylketonuria (PKU). PLENVU® contains aspartame equivalent to 491 mg of phenylalanine per treatment.
 - Are pregnant or plan to become pregnant.
 - Are breastfeeding or plan to breastfeed.
- PLENVU® may affect how other medications work. Tell your doctor about all other medications (including prescription and nonprescription medicines, vitamins, and herbal supplements) you take before you take PLENVU®. Do not take oral medications within 1 hour before or after starting each dose of PLENVU®.
- Symptoms of serious allergic reactions may include skin rash, itching, raised red patches on your skin (hives), swelling of the face, lips, tongue, and throat, and kidney problems.
- In clinical studies with PLENVU®, the most common side effects in patients taking PLENVU® were nausea, vomiting, dehydration, and abdominal pain/discomfort.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call **1-800-FDA-1088**.

For product information, adverse event reports, and product complaint reports, please contact:

Salix Product Information Call Center

Phone: 1-800-321-4576

Fax: 1-510-595-8183

Email: salixmc@dlss.com

Please see additional Important Safety Information throughout and accompanying full Prescribing Information.



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May 2020



Help commercially insured and Medicare Part D patients save on PLENVU

PLENVU®
Powder for Oral Solution
PEG 3350, Sodium Ascorbate, Sodium Sulfate, Ascorbic Acid, Sodium Chloride, and Potassium Chloride
140g | 48.11g | 9g | 7.54g | 5.2g | 2.2g

For patients who are commercially insured, insured but not covered, or whose plans require prior authorization:

1. Provide each patient with a PLENVU Co-pay Assistance Card.

You can request these from your PLENVU representative, print them at PLENVUhcp.com, or have patients download them from the PLENVU Savings Program page at myPLENVU.com.

2. Remind patients to activate their cards before picking up their prescriptions by calling 1-855-202-3208 or by visiting the PLENVU Savings Program page at myPLENVU.com.

If your office is sending prescriptions electronically, enter the following universal co-pay card information within the Electronic Health Record (EHR) platform for each patient's prescription:

BIN: 019158 **PCN:** CNRX
GROUP: AC68037003 **ID:** 39275793763



Note: for illustrative purposes only

If the pharmacy contacts your office, provide them with the universal co-pay card information or inform them that the patient will bring the card to the pharmacy.

For patients with Medicare Part D:

1. Suggest that they visit the PLENVU Savings Program page at myPLENVU.com to enroll in the PLENVU Medicare Part D Coupon Program and to download and print the information packet, which contains a coupon card and health plan letter.
2. If you provide your patients with a hard-copy card, they should activate it by calling 1-866-686-0138.
3. Patients should also mail their health plan letters to their Medicare providers.
4. Upon activation, they can then take their coupon cards and PLENVU prescriptions to any participating pharmacy for redemption.



Note: for illustrative purposes only

Steps for processing PLENVU Savings Program offers



For patients who are commercially insured, insured but not covered, or whose plans require prior authorization:

1. You must first submit the claim to the patient's primary commercial insurance.
2. If the patient has coverage, submit the balance due to DST Pharmacy Solutions as a secondary payer using **BIN 019158** and a valid **Other Coverage Code (OCC)** of **08**.

If coverage is rejected due to a prior authorization, step edit, or NDC block, patients are still considered eligible. Should this occur, submit the secondary claim using **BIN 019158** with an **OCC** of **03**.*

For any questions regarding DST Pharmacy Solutions online processing, please call the Help Desk at **1-844-373-0987**.

For patients with Medicare Part D:

1. If a patient's plan does not cover PLENVU, or if their out-of-pocket costs exceed \$60,[†] suggest that they visit the PLENVU Savings Program page at myPLENVU.com to enroll in the PLENVU Medicare Part D Coupon Program and to download and print their coupon card.
2. Process the patient's coupon card when they return for their prescription. This card must be processed as primary coverage. The card will not adjudicate as secondary coverage.

Here are some additional ways PLENVU supports your patients:

"It's Go Time" Reminder Texting Program[‡]

Sends patients reminder messages and tips throughout the bowel prep process

Text **PLENVU** to **84883** to join

Text **SAVE** to **84883** to join



PLENVU Hotline (1-855-MY-PLENVU)

Provides patients 24-hour, multilingual assistance from Sunday, 4 PM to Friday, 8 PM, EST



*OCC of 03 indicates that the patient is insured, but the drug is not covered. Do not use an OCC code of 00 or 01 for a patient that has primary insurance coverage. Cash claims will be blocked

[†] Terms, conditions and limitations apply. Most eligible patients may pay as little as \$60. Visit plenvupartd.copaysavingsprogram.com for the program's full Eligibility Criteria, Terms and Conditions

[‡] At no cost with an unlimited texting plan; otherwise, message and data rates may apply. Message frequency determined by user. Text HELP to 84883 for help. Text STOP to 84883 to cancel. For terms, visit cs1.me/plenvu