

Are you currently facing challenges when acquiring SPRAVATO®?

Learn more about your pharmacy options



Important Safety Information

WARNING: SEDATION, DISSOCIATION; RESPIRATORY DEPRESSION; ABUSE AND MISUSE; and SUICIDAL THOUGHTS AND BEHAVIORS

See full prescribing information for complete boxed warning

- Risk for sedation, dissociation, and respiratory depression after administration. Monitor patients for at least two hours after administration (5.1, 5.2, 5.3).
- Potential for abuse and misuse. Consider the risks and benefits of using SPRAVATO® prior to use in patients at higher risk of abuse. Monitor for signs and symptoms of abuse and misuse (5.4).
- SPRAVATO® is only available through a restricted program called the SPRAVATO® REMS (5.5).
- •Increased risk of suicidal thoughts and behaviors in pediatric and young adult patients taking antidepressants. Closely monitor all antidepressant-treated patients for clinical worsening and emergence of suicidal thoughts and behaviors. SPRAVATO® is not approved for use in pediatric patients (5.6).

Indications:

SPRAVATO® (esketamine) CIII Nasal Spray is indicated, in conjunction with an oral antidepressant, for the treatment of:

- Treatment-resistant depression (TRD) in adults.
- Depressive symptoms in adults with major depressive disorder (MDD) with acute suicidal ideation or behavior.

Limitations of Use:

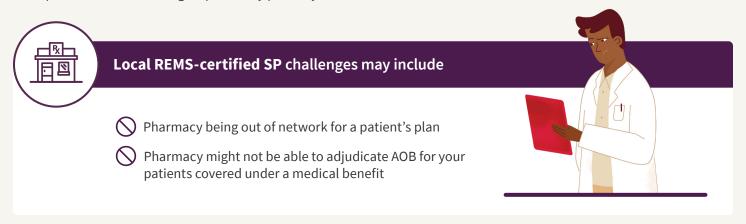
- The effectiveness of SPRAVATO® in preventing suicide or in reducing suicidal ideation or behavior has not been demonstrated. Use of SPRAVATO® does not preclude the need for hospitalization if clinically warranted, even if patients experience improvement after an initial dose of SPRAVATO®.
- SPRAVATO® is not approved as an anesthetic agent.
 The safety and effectiveness of SPRAVATO® as an anesthetic agent have not been established.

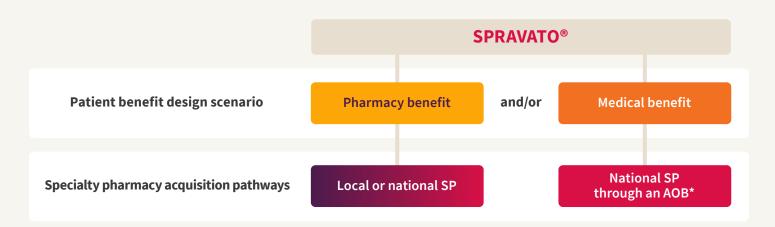
Please see additional <u>Important Safety Information</u> on pages 7 through 10 and full <u>Prescribing Information</u>, including Boxed WARNINGS, and <u>Medication Guide</u> for SPRAVATO[®].

Understanding your patient's benefit design could help you improve appropriate access to SPRAVATO®

The majority of patients have SPRAVATO® coverage. However, a patient's benefit design can impact your ability to acquire SPRAVATO®. Because of this, you may have run into issues when trying to acquire SPRAVATO® through a local REMS-certified specialty pharmacy (SP).

What you might not know is that your local SP may only be able to support certain patients based on their benefit design or plan. If your patient is covered under a pharmacy benefit, you may be able to acquire SPRAVATO® through a local or national SP, but patients covered under a medical benefit will require a medical assignment-of-benefit (AOB)* if you want to acquire SPRAVATO® through a pharmacy pathway.







There are other options available to better support all your covered patients requiring SPRAVATO® treatment

^{*}The AOB is specific to a patient's health plan and the pharmacy's capability. The use of a mandated or preferred SP may vary by health plan. Data are from Janssen Market Research (January 2020) based on a review of publicly available data for 102 payers selected from the largest nationwide payers (according to lives covered) who provide coverage for SPRAVATO®. Of these 102 payers, 93 were determined to mandate or prefer the use of a SP.



How can a national specialty pharmacy (SP) support my practice in providing SPRAVATO® to all my appropriate patients?

You may be able to unlock SPRAVATO® coverage through national REMS-certified SPs because they are likely able to adjudicate a medical AOB for your patients covered under a medical benefit.

Pharmacy benefit coverage1*

6 in 10 patients with major depressive disorder with acute suicidal ideation or behavior (MDSI) are covered

6 in 10 patients with treatment-resistant depression (TRD) are covered

Medical benefit coverage1*

9 in 10 patients with MDSI or TRD are covered

Most patients requiring SPRAVATO® treatment are covered under a medical benefit. SPRAVATO® can be covered by medical or pharmacy benefit (or both), and coverage depends on your local area and patient benefit design. If SPRAVATO® is covered under both, check with the insurance plan to see if medical or pharmacy is preferred.

Approximately 90% of payers mandate or prefer the use of a specific pharmacy.1*

Acquiring through a national SP may help you support more of your patients with SPRAVATO® treatment

Using a local SP may support a subset of patients

Pharmacy benefit patients only (without AOB capabilities)



Using a national SP will allow you to support more patients

Pharmacy benefit patients



Medical benefit patients (through AOB)



Spravato with Me

SPRAVATO withMe can help navigate access and affordability processes efficiently so you can focus on your patients.

SPRAVATO withMe Case Managers provide you with educational support to help your patients start and stay on track. See page 5 for more information.



^{*}Most current coverage is defined as the presence of a policy for SPRAVATO®.

What can I expect when working with a national SP?

While each patient's situation is unique and based on their specific plan, consider the following when acquiring SPRAVATO® through a national SP.



Confirm your patient's coverage

- Determine whether SPRAVATO® is covered under medical or pharmacy benefit
 If SPRAVATO® is covered under the medical benefit, confirm that AOB is allowed
- Confirm prior administration (PA) requirements, if any



Identify the pharmacy for your patient

- Determine whether the plan mandates or prefers a specific pharmacy
- · Ensure the designated pharmacy is REMS certified



Send SPRAVATO® prescription to pharmacy

- Establish prescription process with designated pharmacy
- Submit required medical documentation and PA forms
- Shipping times can vary with national SPs, so plan accordingly



As you work with a national SP, it is important to

Advise your patients

- Alert the patient to expect a confirmation call from the pharmacy, which may be a number they might not recognize
- Be sure to answer patient questions around co-pay or pharmacy registration (patients may be required to register on the pharmacy's portal)
- Confirm the patient's understanding of out-of-pocket costs

Work proactively with the SP

- Confirm the patient's pharmacy options by calling the payer directly or by working with your SPRAVATO withMe Case Manager
- Provide the patient's plan and SP with information required and respond to pharmacy information requests
- Follow up with the patient, their plan, and SP to ensure authorization is provided
- Contact the pharmacy to confirm benefits verification and shipping status



Communicating with your patient, their plan, and the pharmacy is critical to coordinate a timely acquisition process



Spravato with Ne can help navigate access and affordability processes efficiently so you can focus on your patients

Learn how to minimize delays in the access process with the help of Case Managers. They will provide you with educational support to help your patients navigate the process and get them started on treatment quickly.



Benefits investigations for medical and pharmacy coverage



Real-time notifications via a custom portal view with updates on your individual patients and accounts



Prior authorization and appeals support



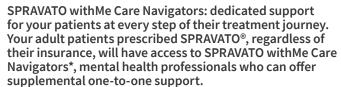
A progress tracker that provides visibility to your patients' access status



Coding and reimbursement support



Patient affordability support





Confirmation on which pharmacies accept your patients' insurance

*Care Navigators do not provide medical advice.

SPRAVATO withMe is limited to education for patients about SPRAVATO®, its administration, and/or their disease, and is not intended to provide medical advice, replace a treatment plan from the patient's doctor or nurse, or provide case management services.

Information about your patients' insurance coverage, cost support options, and treatment support is given by service providers for SPRAVATO withMe. The information you get does not require you or your patient to use any Janssen product. Because the information we give you comes from outside sources, SPRAVATO withMe cannot promise the information will be complete. SPRAVATO withMe cost support is not for patients in the Johnson & Johnson Patient Assistance Foundation.



SPRAVATO withMe Savings Program

Eligible patients with commercial insurance pay as little as \$10 per treatment for their SPRAVATO® medication. There are quantity limits and savings limits each year. Program does not cover the cost of treatment observation. Patients may participate without sharing their income information. See program requirements.

Learn more about SPRAVATO withMe



Learn more about how SPRAVATO withMe can help your patients at www.spravatohcp.com/spravato-with-me To find out more about SPRAVATO withMe or to enroll your patients, give us a call at 1-844-45-WITHME (1-844-479-4846), Monday through Friday, from 8:00 AM to 8:00 PM ET.



REMS-certified national specialty pharmacies

The following SPs are REMS certified and were included because of their geographic coverage, health plan coverage, and fulfillment capabilities.

SP Contact Details*

Pharmacy Name (Parent Company)	Phone/Fax Number	Website
AllianceRX (Walgreens/Prime)	P: 1-855-244-2555 F: 1-877-231-8302	www.alliancerxwp.com
CVS Specialty Customer Care (CVS Caremark)	P: 1-866-993-4779 F: 1-844-850-7915	www.cvsspecialty.com
Humana Specialty Pharmacy (Humana)	P: 1-855-211-8371 F: 1-800-345-8534	www.humanaspecialty.com
AcariaHealth (Centene)	P: 1-800-511-5144 F: 1-877-617-0830	www.acariahealth.com

^{*}This represents a partial list of REMS-certified pharmacies supplying SPRAVATO®. It is not intended to serve as a comprehensive list. Janssen Neuroscience, Inc., Division of Janssen Products, LP, does not endorse the use of any of the listed pharmacies in particular. These pharmacies were selected for inclusion on this list because of their geographic coverage, health plan coverage, and ability to fulfill and dispense Schedule III Controlled Substances. The information provided represents no statement, promise, or guarantee of Janssen Neuroscience, Inc., concerning levels of reimbursement policies, and determination processes. For a list of additional REMS-certified pharmacies, please contact the SPRAVATO® REMS Program at 1-855-382-6022.

Information listed is valid as of August 2022.



CONTRAINDICATIONS

SPRAVATO® is contraindicated in patients with:

- Aneurysmal vascular disease (including thoracic and abdominal aorta, intracranial and peripheral arterial vessels) or arteriovenous malformation.
- · History of intracerebral hemorrhage.
- Hypersensitivity to esketamine, ketamine, or any of the excipients.

WARNINGS AND PRECAUTIONS

Sedation: SPRAVATO® may cause sedation or loss of consciousness. In some cases, patients may display diminished or less apparent breathing. In clinical trials, 48% to 61% of SPRAVATO®-treated patients developed sedation and 0.3% to 0.4% of SPRAVATO®-treated patients experienced loss of consciousness.

Because of the possibility of delayed or prolonged sedation, patients must be monitored by a healthcare provider for at least 2 hours at each treatment session, followed by an assessment to determine when the patient is considered clinically stable and ready to leave the healthcare setting.

Closely monitor for sedation with concomitant use of SPRAVATO® with CNS depressants (e.g., benzodiazepines, opioids, alcohol).

Dissociation: The most common psychological effects of SPRAVATO® were dissociative or perceptual changes (including distortion of time, space and illusions), derealization and depersonalization (61% to 84% of SPRAVATO®-treated patients developed dissociative or perceptual changes). Given its potential to induce dissociative effects, carefully assess patients with psychosis before administering SPRAVATO®; treatment should be initiated only if the benefit outweighs the risk.

Because of the risks of dissociation, patients must be monitored by a healthcare provider for at least 2 hours at each treatment session, followed by an assessment to determine when the patient is considered clinically stable and ready to leave the healthcare setting.

Respiratory Depression: In postmarketing experience, respiratory depression was observed with the use of SPRAVATO®. In addition, there were rare reports of respiratory arrest.

Because of the risks of respiratory depression, patients must be monitored for changes in respiratory status by a healthcare provider for at least 2 hours (including pulse oximetry) at each treatment session, followed by an assessment to determine when the patient is considered clinically stable and ready to leave the healthcare setting.

Abuse and Misuse: SPRAVATO® contains esketamine, a Schedule III controlled substance (CIII), and may be subject to abuse and diversion. Assess each patient's risk for abuse or misuse prior to prescribing and monitor all patients for the development of these behaviors or conditions, including drug-seeking behavior, while on therapy. Individuals with a history of drug abuse or dependence are at greater risk; therefore, use careful consideration prior to treatment of individuals with a history of substance use disorder and monitor for signs of abuse or dependence.

SPRAVATO® Risk Evaluation and Mitigation Strategy (REMS): SPRAVATO® is available only through a restricted program called the SPRAVATO® REMS because of the risks of serious adverse outcomes from sedation, dissociation, respiratory depression, and abuse and misuse.

Important requirements of the SPRAVATO® REMS include the following:

- Healthcare settings must be certified in the program and ensure that SPRAVATO® is:
- Only dispensed and administered in healthcare settings.
- Patients treated in outpatient settings (e.g., medical offices and clinics) must be enrolled in the program.
- Administered by patients under the direct observation of a healthcare provider and that patients are monitored by a healthcare provider for at least 2 hours after administration of SPRAVATO®.

Please see additional Important Safety Information continued on next page.





WARNINGS AND PRECAUTIONS (cont'd)

 Pharmacies must be certified in the REMS and must only dispense SPRAVATO® to healthcare settings that are certified in the program.

Further information, including a list of certified pharmacies, is available at www.SPRAVATOrems.com or 1-855-382-6022.

Suicidal Thoughts and Behaviors in Adolescents and Young Adults: In pooled analyses of placebocontrolled trials of antidepressant drugs (SSRIs and other antidepressant classes) that included adult and pediatric patients, the incidence of suicidal thoughts and behaviors in patients age 24 years and younger was greater than in placebo-treated patients. SPRAVATO® is not approved in pediatric (<18 years of age) patients.

There was considerable variation in risk of suicidal thoughts and behaviors among drugs, but there was an increased risk identified in young patients for most drugs studied.

Monitor all antidepressant-treated patients for clinical worsening and emergence of suicidal thoughts and behaviors, especially during the initial few months of drug therapy and at times of dosage changes. Counsel family members or caregivers of patients to monitor for changes in behavior and to alert the healthcare provider. Consider changing the therapeutic regimen, including possibly discontinuing SPRAVATO® and/or the concomitant oral antidepressant, in patients whose depression is persistently worse, or who are experiencing emergent suicidal thoughts or behaviors.

Increase in Blood Pressure: SPRAVATO® causes increases in systolic and/or diastolic blood pressure (BP) at all recommended doses. Increases in BP peak approximately 40 minutes after SPRAVATO® administration and last approximately 4 hours.

Approximately 8% to 19% of SPRAVATO®-treated patients experienced an increase of more than 40 mmHg in systolic BP and/or 25 mmHg in diastolic BP in the first 1.5 hours after administration at least once during the first 4 weeks

of treatment. A substantial increase in blood pressure could occur after any dose administered even if smaller blood pressure effects were observed with previous administrations. SPRAVATO® is contraindicated in patients for whom an increase in BP or intracranial pressure poses a serious risk (e.g., aneurysmal vascular disease, arteriovenous malformation, history of intracerebral hemorrhage). Before prescribing SPRAVATO®, patients with other cardiovascular and cerebrovascular conditions should be carefully assessed to determine whether the potential benefits of SPRAVATO® outweigh its risk.

Assess BP prior to administration of SPRAVATO®. In patients whose BP is elevated prior to SPRAVATO® administration (as a general guide: >140/90 mmHg), a decision to delay SPRAVATO® therapy should take into account the balance of benefit and risk in individual patients.

BP should be monitored for at least 2 hours after SPRAVATO® administration. Measure blood pressure around 40 minutes post-dose and subsequently as clinically warranted until values decline. If BP remains high, promptly seek assistance from practitioners experienced in BP management. Refer patients experiencing symptoms of a hypertensive crisis (e.g., chest pain, shortness of breath) or hypertensive encephalopathy (e.g., sudden severe headache, visual disturbances, seizures, diminished consciousness, or focal neurological deficits) immediately for emergency care.

Closely monitor blood pressure with concomitant use of SPRAVATO® with psychostimulants (e.g., amphetamines, methylphenidate, modafinil, armodafinil) or monoamine oxidase inhibitors (MAOIs).

In patients with a history of hypertensive encephalopathy, more intensive monitoring, including more frequent blood pressure and symptom assessment, is warranted because these patients are at increased risk for developing encephalopathy with even small increases in blood pressure.

Please see additional Important Safety Information continued on next page.



WARNINGS AND PRECAUTIONS (cont'd) Cognitive Impairment

Short-Term Cognitive Impairment: In a study in healthy volunteers, a single dose of SPRAVATO® caused cognitive performance decline 40 minutes post-dose. Compared to placebo-treated subjects, SPRAVATO®-treated subjects required a greater effort to complete the cognitive tests at 40 minutes post-dose. Cognitive performance and mental effort were comparable between SPRAVATO® and placebo at 2 hours post-dose. Sleepiness was comparable after 4 hours post-dose.

Long-Term Cognitive Impairment: Long-term cognitive and memory impairment have been reported with repeated ketamine misuse or abuse. No adverse effects of SPRAVATO® nasal spray on cognitive functioning were observed in a one-year open-label safety study; however, the long-term cognitive effects of SPRAVATO® have not been evaluated beyond one year.

Impaired Ability to Drive and Operate Machinery: Before SPRAVATO® administration, instruct patients not to engage in potentially hazardous activities requiring complete mental alertness and motor coordination, such as driving a motor vehicle or operating machinery, until the next day following a restful sleep. Patients will need to arrange transportation home following treatment with SPRAVATO®.

Ulcerative or Interstitial Cystitis: Cases of ulcerative or interstitial cystitis have been reported in individuals with long-term off-label use or misuse/abuse of ketamine. In clinical studies with SPRAVATO® nasal spray, there was a higher rate of lower urinary tract symptoms (pollakiuria, dysuria, micturition urgency, nocturia, and cystitis) in SPRAVATO®-treated patients than in placebo-treated patients. No cases of esketamine-related interstitial cystitis were observed in any of the studies, which involved treatment for up to a year.

Monitor for urinary tract and bladder symptoms during the course of treatment with SPRAVATO® and refer to an appropriate healthcare provider as clinically warranted.

PREGNANCY, EMBRYO-FETAL TOXICITY, AND LACTATION

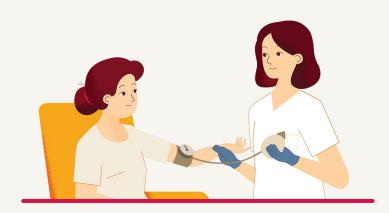
SPRAVATO® is not recommended during pregnancy. SPRAVATO® may cause fetal harm when administered to pregnant women. Advise pregnant women of the potential risk to an infant exposed to SPRAVATO® in utero. Advise women of reproductive potential to consider pregnancy planning and prevention.

There are risks to the mother associated with untreated depression in pregnancy. If a woman becomes pregnant while being treated with SPRAVATO®, treatment with SPRAVATO® should be discontinued and the patient should be counseled about the potential risk to the fetus.

Pregnancy Exposure Registry: There is a pregnancy exposure registry that monitors pregnancy outcomes in women exposed to antidepressants, including SPRAVATO®, during pregnancy. Healthcare providers are encouraged to register patients by contacting the National Pregnancy Registry for Antidepressants at 1-844-405-6185 or online at https://womensmentalhealth.org/clinical-and-research-programs/pregnancyregistry/antidepressants/.

SPRAVATO® is present in human milk. Because of the potential for neurotoxicity, advise patients that breastfeeding is not recommended during treatment with SPRAVATO®.

Please see additional Important Safety Information continued on next page.





SELECT USE IN SPECIFIC POPULATIONS

Geriatric Use: No overall differences in the safety profile were observed between patients 65 years of age and older and patients younger than 65 years of age. At the end of a 4-week, randomized, double-blind study, there was no statistically significant difference between groups on the primary efficacy endpoint.

Hepatic Impairment: SPRAVATO®-treated patients with moderate hepatic impairment may need to be monitored for adverse reactions for a longer period of time.

SPRAVATO® has not been studied in patients with severe hepatic impairment (Child-Pugh class C). Use in this population is not recommended.

ADVERSE REACTIONS

The most common adverse reactions with SPRAVATO® plus oral antidepressant (incidence ≥5% and at least twice that of placebo nasal spray plus oral antidepressant) were:

TRD: dissociation, dizziness, nausea, sedation, vertigo, hypoesthesia, anxiety, lethargy, blood pressure increased, vomiting, and feeling drunk.

Treatment of depressive symptoms in adults with MDD with acute suicidal ideation or behavior: dissociation, dizziness, sedation, blood pressure increased, hypoesthesia, vomiting, euphoric mood, and vertigo.

Please see full <u>Prescribing Information</u>, including Boxed WARNINGS, and <u>Medication Guide</u> for SPRAVATO®.

cp-170362v5





Key considerations when acquiring SPRAVATO® through a specialty pharmacy



Pharmacy vs medical benefit: Identifying a pharmacy that can adjudicate medical AOB may allow more patient access to SPRAVATO®



National SPs: Using a national SP may result in lower costs for your patients and additional support for your treatment center²⁻⁴



Productive Teamwork: When working with a national specialty pharmacy, you should be prepared to advise your patients on what to expect, verify prescriptions, collect missing patient information, complete PAs, and coordinate medical shipments to facilitate SPRAVATO® treatment for their patients in need





Confirm your patient's coverage and identify the appropriate pharmacy by calling the payer directly or by working with a SPRAVATO withMe Case Manager

References:

- 1. Data on file. Janssen Pharmaceuticals, Inc. Titusville, NJ.
- 2. Humana Specialty Pharmacy. Accessed November 22, 2023. https://www.humana.com/provider/pharmacy-resources/tools/specialty-pharmacy
- 3. Acaria Health. Accessed November 22, 2023. https://acariahealth.envolvehealth.com/services/pharma.html
- 4. CVS Health Payor Solutions. Accessed November 22, 2023. https://payorsolutions.cvshealth.com/insights/managing-specialty-drug-spend-under-the-medical-benefit

Please see <u>Important Safety Information</u> on pages 7 through 10 and full <u>Prescribing Information</u>, including Boxed WARNINGS, and Medication Guide for SPRAVATO®.

