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

OMIDRIAssure® provides support for commercially insured patients

We Pay the Difference Patient Reimbursement Program

Assistance for patients with insufficient commercial insurance

- The benefits apply even if the annual commercial deductible obligation has not yet been met
- No income eligibility required

1. Use OMIDRIA for the surgery and bill your patient's commercial insurance carrier
2. After the claim is processed, your facility submits an explanation of benefits (EOB) showing the date of service and the covered amount for surgery
3. Rayner sends a check to your facility

LIVE ASSISTANCE REIMBURSEMENT HOTLINE

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

Please see Indication and Important Safety Information on page 2.

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. Rayner does not guarantee coverage or reimbursement.

OMIDRIAssure®
SUPPORT AT EVERY STEP

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, 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 to 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.omidriahcp.com/prescribinginformation.

You are encouraged to report Suspected Adverse Reactions to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Rayner

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(phenylephrine and ketorolac intraocular solution)
1% / 0.3%