



## Copay Claim Submission Guide



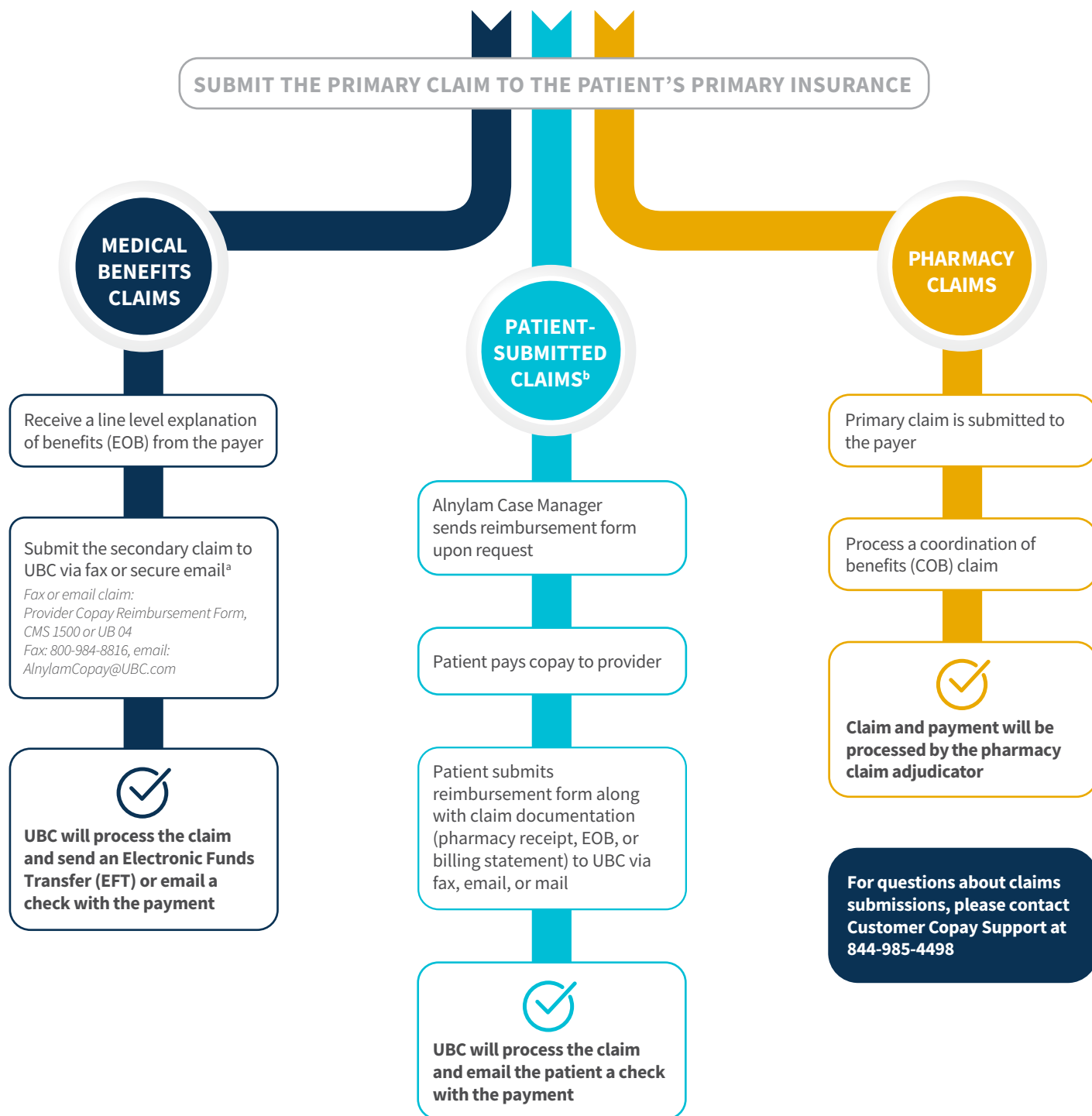
**The following outline will show you how to submit a medical benefits claim, pharmacy claim, or a patient-submitted claim** for ONPATTRO® (patisiran).

Before submitting a claim, please ensure the following:

- The patient is enrolled in Alnylam Assist® (via the Start Form found at [AlnylamAssist.com](https://AlnylamAssist.com))
- The patient's benefits have been verified
- The patient has provided their medical benefit or pharmacy member number

Upon a patient's enrollment into the copay program, an Alnylam Case Manager will provide your practice with the patient's Payer ID, Group Number, and Member Number required to submit a copay claim.

# Submitting Copay Claims for ONPATTRO® (patisiran)



<sup>a</sup>At Alnylam, we are committed to protecting privacy and encourage the utilization of secure email for submissions to safeguard sensitive patient information. Senders are asked to use secure email options for comprehensive data protection.

<sup>b</sup>Medical Benefits or Pharmacy Claims.



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