

**MAVYRET SAVINGS CARD**

PAY AS LITTLE AS  
**\$5** PER MONTH\*

**MAVYRET**  
 glecaprevir/pibrentasvir  
 100 mg/40 mg tablets

Questions, call 1-877-MAVYRET (1-877-628-9738)

Please see Important Safety Information below and accompanying full Prescribing Information, including Patient Information.

BIN# 004682  
 PCN# CN  
 GRP# EC97015028  
 ID# 09145485040

Visit [www.MAVYRET.com](http://www.MAVYRET.com) for more information about MAVYRET (glecaprevir/pibrentasvir)

\***Eligibility.** Available to patients with commercial insurance coverage for MAVYRET who meet eligibility criteria. This co-pay assistance program is not available to patients receiving prescription reimbursement under any federal, state, or government-funded insurance programs (for example, Medicare [including Part D], Medicare Advantage, Medigap, Medicaid, TRICARE, Department of Defense, or Veterans Affairs programs) or where prohibited by law. Offer subject to change or termination without notice. Restrictions, including monthly maximums, may apply. This is not health insurance. For full Terms and Conditions, visit [www.MAVYRET.com](http://www.MAVYRET.com) or call 1-877-MAVYRET (1-877-628-9738) for additional information. To learn about AbbVie's privacy practices and your privacy choices, visit <https://privacy.abbvie>

**INSTRUCTIONS TO PHARMACISTS**

Please submit the co-pay card authorized for all commercially insured patients by the patient's primary insurance as a secondary transaction to **CHANGE HEALTHCARE**. When you use this card, you are confirming that you have not submitted and will not submit a claim for this prescription for reimbursement under any federal, state or government-funded healthcare program, such as Medicare (including Part D), Medicare Advantage, Medicaid, Medigap, Veterans Affairs, the Department of Defense or TRICARE. Pharmacists with questions please call 1-800-422-5604.

Please see Important Safety Information below and accompanying full Prescribing Information, including Patient Information.

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**USE**

MAVYRET is a prescription medicine used to treat adults and children 3 years of age and older with chronic (lasting a long time) hepatitis C virus (hep C):

- Genotypes (GT) 1, 2, 3, 4, 5 or 6 infection without cirrhosis or with compensated cirrhosis
- Or GT 1 infection and have been previously treated with a regimen that contained a hep C NS5A inhibitor or an NS3/4A protease inhibitor, but not both.

**IMPORTANT SAFETY INFORMATION**

**What is the most important information I should know about MAVYRET?**

**Hepatitis B virus (hep B) reactivation:** Before starting treatment with MAVYRET, your doctor will do blood tests to check for hep B infection. If you have ever had hep B infection, hep B could become active again during or after treatment for hep C with MAVYRET. Hep B that becomes active again (called reactivation) may cause serious liver problems, including liver failure and death. Your doctor will monitor you if you are at risk for hep B reactivation during treatment and after you stop taking MAVYRET.

**Do not take MAVYRET if you:**

- Have certain liver problems
- Are taking the medicines atazanavir or rifampin

**What should I tell my doctor before taking MAVYRET?**

- If you have had hep B infection, have liver problems other than hep C infection, have HIV-1 infection, have had a liver or a kidney transplant, and all other medical conditions.
- If you are pregnant or plan to become pregnant, or if you are breastfeeding or plan to breastfeed. It is not known if MAVYRET will harm your unborn baby or pass into your breast milk. Talk to your doctor about the best way to feed your baby if you take MAVYRET.
- **About all the medicines you take**, including prescription and over-the-counter medicines, vitamins, and herbal supplements. MAVYRET and other medicines may affect each other. This can cause you to have too much or not enough MAVYRET or other medicines in your body. This may affect the way MAVYRET or your other medicines work or may cause side effects.
- **Do not start taking a new medicine without telling your doctor.** Your doctor can tell you if it is safe to take MAVYRET with other medicines.

**What are the possible side effects of MAVYRET?**

- **In people who had or have advanced liver problems before starting treatment with MAVYRET, there is a rare risk of worsening liver problems, liver failure, and death.** Your doctor will check you for signs and symptoms of worsening liver problems during treatment with MAVYRET. Tell your doctor right away if you have any of the following: nausea; tiredness; yellowing of your skin or white part of your eyes; bleeding or bruising more easily than normal; confusion; dark, black, or bloody stool; loss of appetite; diarrhea; dark or brown (tea-colored) urine; swelling or pain on the upper right side of your stomach area (abdomen); sleepiness; vomiting of blood; or lightheadedness.
- The most common side effects of MAVYRET are headache and tiredness.

These are not all the possible side effects of MAVYRET. Call your doctor for medical advice about side effects.

**This is the most important information to know about MAVYRET. For more information, talk to your doctor or healthcare provider.**

MAVYRET oral pellets are dispensed in unit-dose packets. Each packet contains 50 mg glecaprevir/20 mg pibrentasvir.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.

**Please see full Prescribing Information, including the Patient Information.**

**If you are having difficulty paying for your medicine, AbbVie may be able to help. Visit [AbbVie.com/myAbbVieAssist](http://AbbVie.com/myAbbVieAssist) to learn more.**

**Mavyret Co-pay Full Terms and Conditions**

Terms and Conditions apply. This benefit covers MAVYRET® (glecaprevir/pibrentasvir). Eligibility: Available to patients with commercial insurance coverage for MAVYRET who meet eligibility criteria. Copay assistance program is not available to patients receiving reimbursement under any federal, state, or government-funded insurance programs (for example, Medicare [including Part D], Medicare Advantage, Medigap, Medicaid, TRICARE, Department of Defense, or Veterans Affairs programs) or where prohibited by law or by the patient's health insurance provider. If at any time a patient begins receiving drug coverage under any such federal, state, or government-funded healthcare program, patient will no longer be able to use the MAVYRET co-pay card and patient must call MAVYRET Patient Support at 1-877-628-9738 to stop participation. Patients residing in or receiving treatment in certain states may not be eligible. Patients may not seek reimbursement for value received from MAVYRET Patient Support from any third-party payers. Offer subject to change or discontinuation without notice. Restrictions, including monthly maximums, may apply. Subject to all other terms and conditions, the maximum lifetime benefit that may be available solely for the patient's benefit under the co-pay assistance program is \$12,000.00. The actual application and use of the benefit available under the copay assistance program may vary on a monthly, quarterly, and/or annual basis, depending on each individual patient's plan of insurance and other prescription drug costs. This assistance offer is not health insurance. By redeeming this card, you acknowledge that you are an eligible patient and that you understand and agree to comply with the terms and conditions of this offer. To learn about AbbVie's privacy practices and your privacy choices, visit <https://privacy.abbvie>