



**Save
up to \$50***
on your co-pay

GELSYN-3
3 injection hyaluronic acid treatment



1. Complete all fields on the back of this coupon. Each eligible syringe of GELSYN-3 injected requires its own coupon.
2. Include a copy of your Explanation of Benefits (EOB) representing the date of service when you received GELSYN-3 to allow processing. The EOB statement will include claim data, such as your name, date of injection, amount billed, your co-pay, and balance remaining. Your insurance company can provide you with your EOB.
3. Mail your EOB and this completed form (one per eligible injection) to:
 GELSYN-3 Mail-In Rebate Program
 1981 Marcus Avenue, Suite C130
 New Hyde Park, NY 11042
4. Please allow 10-14 business days for the delivery of your rebate.
5. Offer valid for GELSYN-3 purchased in the United States and injected before December 31, 2020. Completed requests must be postmarked by March 31, 2021.

**If you have
any questions,
please contact
BV360 Reimbursement
Solution at
1-833-MyBV360
(1-833-692-8360)**

*Please see reverse side for patient eligibility criteria and program terms and conditions.

**Please complete all the fields below
and include your EOB to receive your rebate.**

Patient Name: _____

Patient Address: _____

City: _____

State: _____ ZIP: _____

Patient Phone Number: _____

Physician Name: _____

Physician Address: _____

City: _____

State: _____ ZIP: _____

Please check the boxes below to receive your rebate.

I am not eligible to receive reimbursement from any federal, state, or other governmental programs.

I am not a resident of Massachusetts.

By signing above, I confirm I meet the eligibility criteria associated with this offer.

Eligibility Criteria, Terms and Conditions:

- This offer is valid for a one-time rebate of up to \$50 off your co-pay or out-of-pocket expense for one (1) syringe of GELSYN-3 injected per office visit and is not valid with any other product. Eligible patients are limited to one (1) rebate per syringe of GELSYN-3.
- This offer is only valid for patients with commercial insurance. Patients without commercial insurance are not eligible. This offer is not valid for any person eligible for reimbursement of prescriptions, in whole or in part, by any federal, state, or other governmental programs, including, but not limited to, Medicare (including a Medicare Part D or Medicare Advantage plan), Medicaid, TRICARE, Veterans Administration or Department of Defense health coverage, CHAMPUS, the Puerto Rico Government Health Insurance Plan, or any other federal or state health care programs or pharmaceutical assistance program.
- Patient must be a U.S. resident. [Residents of Massachusetts are not eligible].
- Patient is responsible for reporting receipt of co-pay assistance to any insurer, health plan, or other third party who pays for or reimburses any part of the GELSYN-3 prescription, as may be required by insurer or plan.
- Only original rebate offers will be accepted. This rebate is not valid if reproduced, reprinted or photocopied.
- This offer is nontransferable and may not be combined with any other offer.
- This program is not health insurance.
- Bioventus LLC reserves the right to rescind, revoke or amend this offer without notice.
- This offer is only good for GELSYN-3 purchased in the USA before December 31, 2020. Void where prohibited by law. Offer valid only for requests postmarked before March 31, 2021.

Summary of Indications for Use: GELSYN-3 is indicated for the treatment of pain in osteoarthritis (OA) of the knee in patients who have failed to respond adequately to conservative non-pharmacologic therapy and simple analgesics (e.g., acetaminophen). Do not administer to patients with known hypersensitivity (allergy) to sodium hyaluronate preparations. Do not inject GELSYN-3 into the knees of patients having knee joint infections or skin diseases or infections in the area of the injection site. GELSYN-3 is not approved for pregnant or nursing women, or children. Risks can include general knee pain, warmth and redness or pain at the injection site. Full prescribing information can be found in product labeling, at www.GELSYN3.com or by calling Customer Service at 1-800-836-4080.

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