

Select one:

NEXLIZET[®]
(bempedoic acid/ezetimibe)
180mg/10mg tablets

NEXLETOL[®]
(bempedoic acid)
180mg tablets

Prescriber: _____

Patient: _____

Patient D.O.B.: _____

For appropriate primary prevention and secondary prevention patients consider including the following information on prior authorizations (PA)

Please include all 3 criteria steps on prior authorization

1. Most commonly used indicated diagnosis codes:

Primary Prevention Patients:

- E78.2: Mixed hyperlipidemia
- E78.5: Hyperlipidemia
- E78.01 Familial hypercholesterolemia
- E78.49: Other hyperlipidemia

If treating hyperlipidemia, payers may require one of the following:

- Diabetes
OR
- ASCVD Risk Score > 20%
OR
- CAC > 300 or 400

OR

Secondary Prevention Patients (ASCVD):

- I24.9: ACS
- I21.____: MI
- I20.____: Angina
- G45.9: TIA
- I73.9: PAD
- I70.8: Atherosclerosis/
Revascularization
- I63.____: Stroke
- I25.10: CAD

2. Treatment History:

Statin History is required

Current Statin & Dose: _____

Past Statin & Dose: _____

Statin Intolerance: YES NO

May be required: Ezetimibe: YES NO

3. LDL-C Levels:

Baseline: _____ Date: _____

Current: _____ Date: _____

INDICATION

NEXLIZET and NEXLETOL are indicated:

- bempedoic acid, a component of NEXLIZET and NEXLETOL, is indicated to reduce the risk of major adverse cardiovascular events (cardiovascular death, myocardial infarction, stroke, or coronary revascularization) in adults at increased risk for these events who are unable to take recommended statin therapy (including those not taking a statin).

IMPORTANT SAFETY INFORMATION

- NEXLIZET and NEXLETOL are contraindicated in patients with a prior hypersensitivity to bempedoic acid or ezetimibe or any of the excipients. Serious hypersensitivity reactions including anaphylaxis, angioedema, rash, and urticaria have been reported.

Please see additional important safety information on reverse side

INDICATION

- as an adjunct to diet and exercise:
 - NEXLIZET (bempedoic acid/ezetimibe) tablets is indicated to reduce LDL-C in adults with hypercholesterolemia, including HeFH.
 - NEXLETOL (bempedoic acid) tablets is indicated, in combination with other LDL-C lowering therapies or alone when concomitant LDL-C lowering therapy is not possible, to reduce LDL-C in adults with hypercholesterolemia, including HeFH.

IMPORTANT SAFETY INFORMATION (cont.)

- *Hyperuricemia*: Bempedoic acid, a component of NEXLIZET and NEXLETOL, may increase blood uric acid levels, which may lead to gout. Monitor as clinically indicated and initiate treatment with urate-lowering drugs as appropriate.
- *Tendon Rupture*: Bempedoic acid is associated with an increased risk of tendon rupture or injury. Tendon rupture occurred in 0.5% of patients treated with bempedoic acid in primary hypercholesterolemia trials, versus 0% on placebo. In the cardiovascular outcomes trial, the rates were 1.2% for bempedoic acid and 0.9% for placebo. Discontinue NEXLIZET or NEXLETOL at the first sign of tendon rupture. Consider alternative therapy in patients who have a history of tendon disorders or tendon rupture.
- The most common adverse reactions in the primary hypercholesterolemia trials of bempedoic acid in $\geq 2\%$ of patients and greater than placebo were upper respiratory tract infection, muscle spasms, hyperuricemia, back pain, abdominal pain or discomfort, bronchitis, pain in extremity, anemia, and elevated liver enzymes.
- Adverse reactions reported in $\geq 2\%$ of patients treated with ezetimibe (a component of NEXLIZET) and at an incidence greater than placebo in clinical trials were upper respiratory tract infection, diarrhea, arthralgia, sinusitis, pain in extremity, fatigue, and influenza.
- The most common adverse reactions (incidence $\geq 3\%$ and greater than placebo) observed with NEXLIZET but not observed in clinical trials of bempedoic acid or ezetimibe, were urinary tract infection, nasopharyngitis, and constipation.
- The most common adverse reactions in the cardiovascular outcomes trial for bempedoic acid, at an incidence of $\geq 2\%$ and 0.5% greater than placebo, were hyperuricemia, renal impairment, anemia, elevated liver enzymes, muscle spasms, gout, and cholelithiasis.
- Concomitant use of NEXLIZET or NEXLETOL with greater than 20 mg of simvastatin or 40 mg of pravastatin should be avoided due to the potential for increased risk of simvastatin- or pravastatin-related myopathy. Concomitant use with fibrates may increase triglycerides and decrease high-density lipoprotein cholesterol. Monitor and adjust therapies as recommended.
- Discontinue NEXLIZET or NEXLETOL when pregnancy is recognized unless the benefits of therapy outweigh the potential risks to the fetus. The benefits of breastfeeding should be considered along with the mother's clinical need for NEXLIZET or NEXLETOL and any potential adverse effects on the breastfed infant from NEXLIZET or NEXLETOL or from the underlying maternal condition.

Report pregnancies to Esperion Therapeutics, Inc. Adverse Event reporting line at 1-833-377-7633.

Please see full prescribing information here: [NEXLETOL](#) and for [NEXLIZET](#)

To learn more, visit [NEXLIZETHCP.com](https://www.esperion.com)