

Rezdiffra™
resmetirom tablets

Madrigal
patient
SUPPORT

Save on Rezdiffra

If you have commercial insurance,
you may be eligible to receive
Rezdiffra for as little as **\$0 a month***
with the Copay Savings Card.

Full eligibility criteria, program limits and information
can be found at copay.rezdiffra.com.

Rezdiffra™
resmetirom tablets

COPAY SAVINGS PROGRAM

ID: XXXXXXXXXX
BIN: 610852
PCN: 2001
GROUP: 77770205

ELIGIBLE COMMERCIALY INSURED
PATIENTS MAY PAY AS LITTLE AS

\$0^A
MONTH*

*Eligibility rules apply. For program terms, conditions,
and eligibility criteria, visit copay-terms.rezdiffra.com.

†Eligibility rules apply. Offer not valid for patients enrolled in Medicare, Medicaid,
or other federal or state healthcare programs. For program terms, conditions, and
eligibility criteria, visit copay.rezdiffra.com.

Explore Copay Savings

Check your eligibility and get your card



CALL 1-877-219-7770



ONLINE copay.rezdiffra.com



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copay.rezdiffra.com

We're here to help. **Call 1-877-219-7770** | **Visit** MadrigalPatientSupport.com



Rezdiffra™
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60mg • 80mg • 100mg

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