



The ParaGard[®] Patient Payment Plan

Enrollment Is Simple

After you and your healthcare professional have decided ParaGard[®] IUC is right for you, follow the steps below to enroll in the Payment Plan.

1. To order ParaGard[®] IUC, call 1•877•ParaGard (727•2427).
2. Payment will be charged to your credit card over 12 monthly installments.*
3. Your ParaGard[®] IUC will be shipped to your healthcare professional's office.

A Convenient Payment Method That's Flexible for Your Life

- Available to women who do not have, or will not use, insurance coverage for the purchase of ParaGard[®] IUC (intrauterine contraceptive)
- Pay about \$40 per month for 1 year
- Make 12 monthly installments or a one-time payment in full
- Get a full refund for ParaGard[®] IUC within the first 150 days after placement if you are not satisfied*

For complete details, call 1•877•ParaGard
(727•2427) or visit www.paragard.com.

*Costs associated with insertion or removal of ParaGard[®] IUC are the responsibility of the patient.

ParaGard[®] T 380A ♀
intrauterine copper contraceptive

Call 1•877•ParaGard (727•2427)
for more information.

ParaGard^{T 380A} 
intrauterine copper contraceptive

www.paragard.com

Program Details

This program is being offered by ParaGardDirect and may be changed or cancelled at any time without notice. Valid prescriptions are required with all orders. You may elect to pay in full, either by check or credit card, or you may choose to have the same amount charged to your credit card in installments over 12 consecutive months. Amount includes shipping and handling costs but does not include sales tax or the cost associated with insertion or removal of ParaGard[®] IUC. ParaGard[®] IUC will be shipped to your healthcare professional.

Qualifying for a Refund

To qualify for a refund, the ParaGard[®] IUC must have been purchased through the ParaGard[®] Patient Payment Plan offered by ParaGardDirect. You must contact ParaGardDirect within 30 calendar days after removal of ParaGard[®] IUC and must provide documentation demonstrating that it was removed within 150 calendar days after placement. Furthermore, you must not have been reimbursed, either partially or fully, by a third-party payer such as an insurance company or HMO or any federal or state healthcare program, including Medicaid. Please call 1•877•ParaGard (727•2427) for more information.

ParaGard[®] is a registered trademark of Duramed Pharmaceuticals, Inc.



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