#### **Information for Connecticut Prescribing Practitioners and Pharmacists**

KALYDECO® (ivacaftor)
ORKAMBI® (lumacaftor/ivacaftor)
SYMDEKO® (tezacaftor/ivacaftor and ivacaftor)
TRIKAFTA® (elexacaftor/tezacaftor/ivacaftor and ivacaftor)
ALYFTREK™ (vanzacaftor/tezacaftor/deutivacaftor)

- Connecticut law requires pharmaceutical representatives engaged in legend drug marketing to disclose in writing the list price of a legend drug when providing information concerning that drug to a prescribing practitioner or pharmacist.
- The pricing information below represents the Wholesale Acquisition Cost (WAC). The WAC price represents the manufacturer's published catalog or list price for a drug product to wholesalers as reported to third-party drug pricing publishers, not including prompt pay or other discounts, rebates, or reductions in price.
- Please refer to each product's FDA-approved label and indication for further information.
- The actual cost to a patient is based on several factors, including insurance coverage and potential financial or product assistance options available to them.
- The WAC pricing list below includes prescription drugs marketed by Vertex Pharmaceuticals Incorporated.

Product Name	Manufacturer	NDC or UPC	WAC (28-Day Supply)
KALYDECO® Oral Tablet 150 MG	Vertex Pharmaceuticals Incorporated	51167-0200-01	\$26,546.00
KALYDECO® Oral Tablet 50 MG	Vertex Pharmaceuticals Incorporated	51167-0300-01	\$26,546.00
KALYDECO® Oral Tablet 75 MG	Vertex Pharmaceuticals Incorporated	51167-0400-01	\$26,546.00
KALYDECO® Oral Packet 25 MG	Vertex Pharmaceuticals Incorporated	51167-0600-01	\$26,546.00
KALYDECO® Oral Packet 13.4 MG	Vertex Pharmaceuticals Incorporated	51167-0770-01	\$26,546.00
KALYDECO® Oral Packet 5.8 MG	Vertex Pharmaceuticals Incorporated	51167-0785-01	\$26,546.00
ORKAMBI® Oral Packet 75-94 MG	Vertex Pharmaceuticals Incorporated	51167-0122-01	\$23,238.98
ORKAMBI® Oral Packet 150-188 MG	Vertex Pharmaceuticals Incorporated	51167-0500-02	\$23,238.98
ORKAMBI® Oral Tablet 100-125 MG	Vertex Pharmaceuticals Incorporated	51167-0700-02	\$23,238.98
ORKAMBI® Oral Tablet 200-125 MG	Vertex Pharmaceuticals Incorporated	51167-0809-01	\$23,238.98
ORKAMBI® Oral Packet 100-125 MG	Vertex Pharmaceuticals Incorporated	51167-0900-01	\$23,238.98
SYMDEKO® Oral Tablet Therapy Pack 100/150 & 150 MG	Vertex Pharmaceuticals Incorporated	51167-0661-01	\$24,883.96
SYMDEKO® Oral Tablet Therapy Pack 50/75 & 75 MG	Vertex Pharmaceuticals Incorporated	51167-0113-01	\$24,883.96
TRIKAFTA® Oral Tablet Therapy Pack 50/25/37.5 & 75 MG	Vertex Pharmaceuticals Incorporated	51167-0106-02	\$26,546.00
TRIKAFTA® Oral Tablet Therapy Pack 100/50/75 & 150 MG	Vertex Pharmaceuticals Incorporated	51167-0331-01	\$26,546.00
TRIKAFTA® Oral Therapy Pack 80/40/60 & 59.5 MG	Vertex Pharmaceuticals Incorporated	51167-0445-01	\$26,546.00
TRIKAFTA® Oral Therapy Pack 100/50/75 & 75 MG	Vertex Pharmaceuticals Incorporated	51167-0446-01	\$26,546.00
ALYFTREK <sup>™</sup> Oral Tablet Therapy Pack 10/50/125 MG	Vertex Pharmaceuticals Incorporated	51167-0121-01	\$28,404.22
ALYFTREK <sup>™</sup> Oral Tablet Therapy Pack 4/20/50 MG	Vertex Pharmaceuticals Incorporated	51167-0135-01	\$28,404.22

Disclosed Prices Effective Date: December 2024

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## **Information for Connecticut Prescribing Practitioners and Pharmacists**

- Connecticut law requires pharmaceutical representatives engaged in legend drug marketing to disclose in writing the list price of a legend drug when providing information concerning that drug to a prescribing practitioner or pharmacist.
- The pricing information below represents the wholesale acquisition cost (WAC). The WAC
  price represents the manufacturer's published catalog or list price for a drug product to
  wholesalers as reported to third-party drug pricing publishers, not including prompt pay or
  other discounts, rebates, or reductions in price.
- Please refer to the product's FDA-approved label and Indication for further information.
- The actual cost to a patient is based on several factors, including insurance coverage and potential financial or product assistance options available to them.

#### CASGEVY® (exagamglogene autotemcel)

Product Name	Manufacturer	NDC or UPC	WAC
CASGEVY® (exagamglogene autotemcel)	Vertex Pharmaceuticals Incorporated	51167-0290-09	\$2,200,000.00

Disclosed Price Effective Date: July 2024

### **Information for Connecticut Prescribing Practitioners and Pharmacists**

# JOURNAVX<sup>TM</sup> (suzetrigine)

- Connecticut law requires pharmaceutical representatives engaged in legend drug marketing to disclose in writing the list price of a legend drug when providing information concerning that drug to a prescribing practitioner or pharmacist.
- The pricing information below represents the Wholesale Acquisition Cost (WAC). The WAC represents the manufacturer's published catalog or list price for a drug product to wholesalers as reported to third-party drug pricing publishers, not including prompt pay or other discounts, rebates, or reductions in price.
- Please refer to each product's FDA-approved label and indication for further information.
- The actual cost to a patient is based on several factors, including insurance coverage and potential financial or product assistance options available to them.
- The WAC pricing list below includes prescription drugs marketed by Vertex Pharmaceuticals Incorporated.

Product Name	Manufacturer	NDC or UPC	WAC (per package)
JOURNAVX <sup>TM</sup> (30-count bottle)	Vertex Pharmaceuticals Incorporated	51167-0548-30	\$465.00
JOURNAVX <sup>TM</sup> (100-count bottle)	Vertex Pharmaceuticals Incorporated	51167-0548-31	\$1,550.00
JOURNAVX <sup>TM</sup> (100-count Hospital Unit Dose Carton)	Vertex Pharmaceuticals Incorporated	51167-0548-34	\$1.550.00

Disclosed Prices Effective Date: January 2025