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CIP2093
Argentum Pharmaceuticals LLC v. Cipla Ltd.
IPR2017-00807

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Marketing Plan 2015

Product	Dymista
Generic Name	(azelastine hydrochloride and fluticasone propionate) Nasal Spray 137 mcg/50 mcg per spray
Launch	September 24, 2012
Country	United States
Business Unit	Marketing
Product Manager	Jeff Germani
Medical Manager	Nancy Ruiz, MD
Product Team	Stuart Loesch, Meghan Hausner and Katie Weibeth

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Content

- Product Profile
- Disease State
- Market Dynamics
- Competitive Environment
- Product Dynamics
- SWOT Analysis
- Key Issues/Strategic Planning
- Sales Force
- Tactical Planning
- Financials

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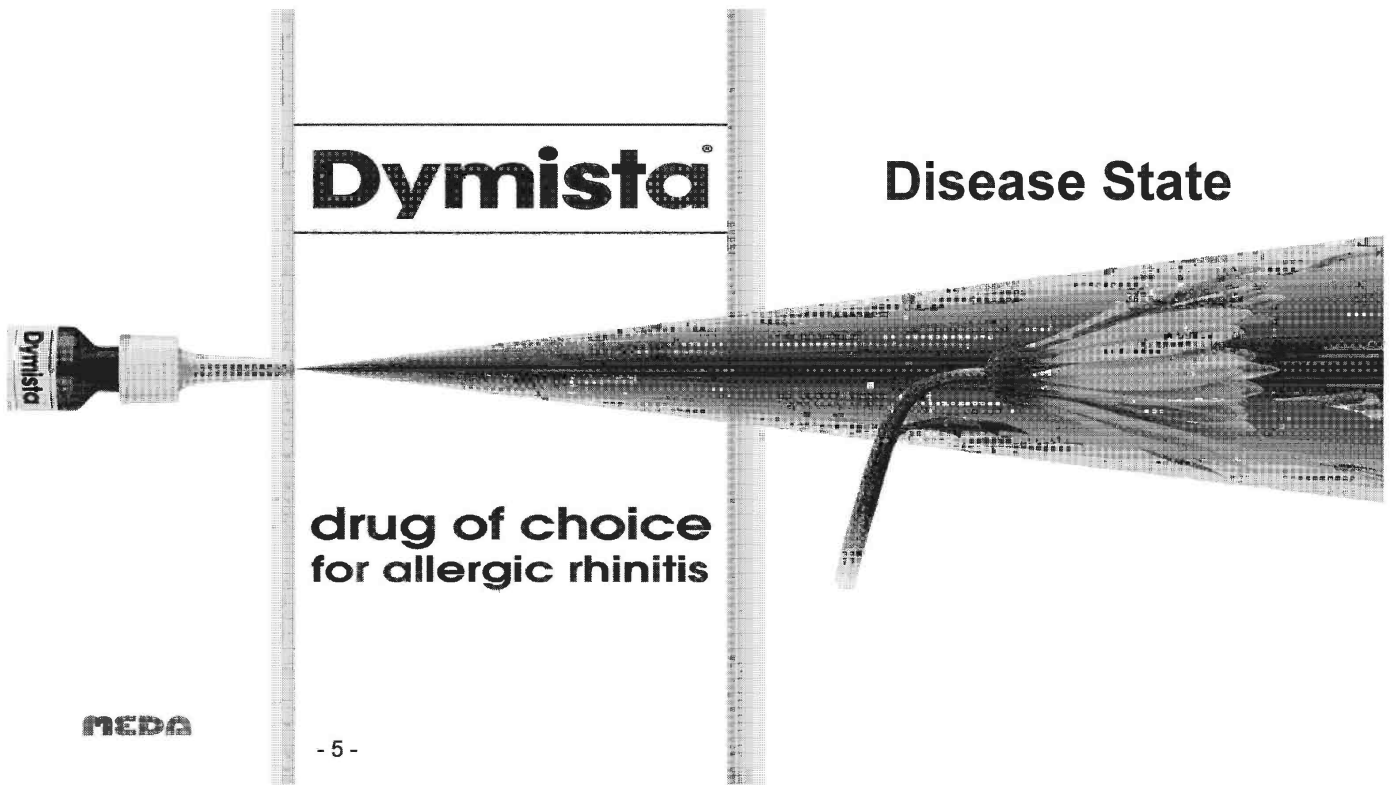
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Dymista

Product Profile

- **Trade Name:** Dymista (azelastine hydrochloride and fluticasone propionate) Nasal Spray 137mcg/50mcg per Spray
- **Launch Date:** September 24, 2012
- **Patent Protection:** 2026
- **Substance Class:** Nasal Spray
- **Active Ingredients:** azelastine hydrochloride/fluticasone propionate
- **Indication:** Seasonal Allergic Rhinitis (SAR) for patients 12 years and older who require treatment with both azelastine hydrochloride and fluticasone propionate for symptomatic relief
- **Dosage:** 1 spray/nostril 2x daily
- **Pack size:** 23 grams net fill (120 metered sprays)
- **Prices:** \$145.95 (wholesale acquisition cost); \$82.20 (net price); most patients pay as little as \$14 with the copay card or receive \$100 off their cash price
- **Reimbursement status: Percent of Lives Covered by Status**

	<u>2015</u>	
Preferred	32% ¹	PA= Prior Authorization SE= Step Edit ¹ First half of 2015 prior to Nasonex generic ² Not listed refers to a database limitation; assume Tier 3
Covered (Unrestricted Tier 3)	26%	
Restricted (PA/SE)	12%	
Not Covered	30%	
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Disease State

- Seasonal Allergic Rhinitis (SAR) is a condition in which outdoor allergens such as weeds, molds or flower pollen causes the mucous membranes of the nose become inflamed which manifests nasal symptoms such as running nose, nasal congestion, sneezing and nasal itching.
- According to DataMonitor, it is estimated that between 40-60 million people in the United States suffer from allergic rhinitis
- Patients often self-diagnose based on their symptoms and treat through over-the-counter (OTC) options, however, it is noted that patients often use multiple medications to control their symptoms and costs are substantial
- According to a Marple and Colleagues Study, many patients are confused by the treatment options and the type of relief they offer

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Diagnosis and Treatment

- Primary Care Physicians, Otolaryngologists (ENTs), and Allergists most commonly treat SAR
- Physicians often diagnose SAR when treating other ailments such as asthma
- Patients that seek physician intervention tend to have more severe symptoms for which combination therapy is often prescribed

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Conclusions

- It has been documented that the use of multiple medications is costly for the patient therefore this presents an opportunity for Dymista as it provides multiple benefits in one product
- The SAR market continues to grow and there are opportunities for the Dymista messaging with patients to combat over-the-counter switch
- Continue appropriate coverage of the physician targets via sales force efforts

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Market Dynamics

**drug of choice
for allergic rhinitis**

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Market Dynamics – Market Classification & Relevant Market

- Market Classification: Allergic Rhinitis (Seasonal and Perennial)
- Allergic Rhinitis Nasal Spray Market is a \$3.43 billion¹ (gross sales); 56 million¹ TRxs
 - Generic Nasal Sprays Represents
 - \$1.46B dollars¹
 - 80% of TRx Business
 - Fluticasone Propionate largest generic (41 million TRx)²
 - Branded Nasal Sprays Represents
 - \$1.98B dollars¹
 - 20% of TRx Business
 - Inhaled nasal steroid (INS): Nasonex largest INS brand representing \$1.35B (~\$600 MUSD net sales)²
- Managed Care coverage drives performance:
 - INS: generic Flonase Tier 1; Nasonex preferred Tier 2 (75% of covered lives)
 - Status likely to change based on flonase going over the counter
 - Generics will cover 70-90% of patient lives

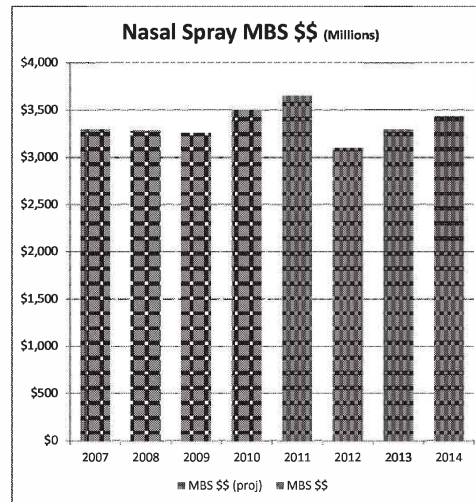
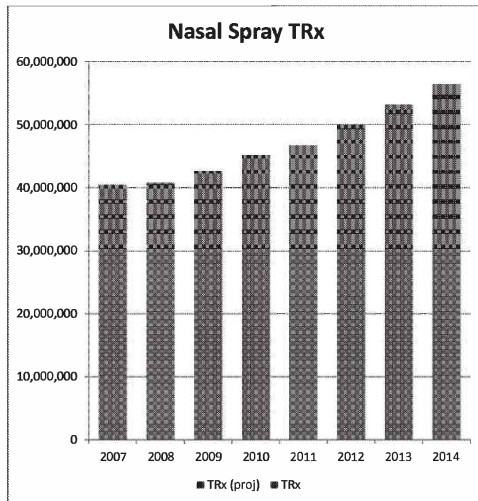
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Source: SymphonyHealth, TR- Aug. '14

Quantitative Development

Nasal Spray Market –
TRx up ~6% over 2013; \$3.4B in Value

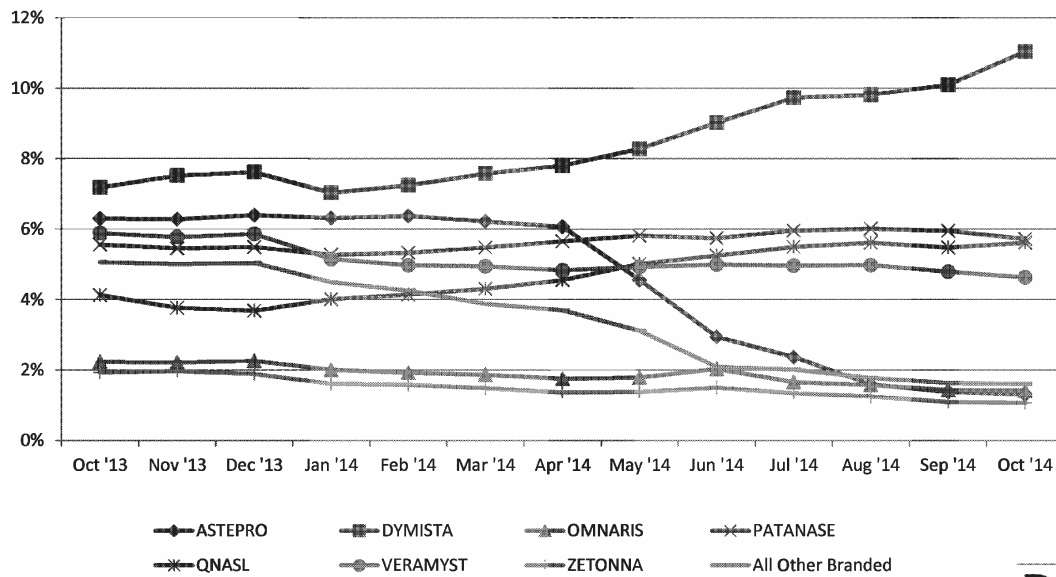


MEDA CAGR=compound annual growth rate
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Branded Nasal Spray NRx Market Share



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Source: SymphonyHealth, TR

Of note, Nasonex remains mostly flat at 68%-70% market share

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Method of Payment

BRAND	Commercial		Cash		Medicaid		Medicare	
	Curr YTD	Prev YTD	Curr YTD	Prev YTD	Curr YTD	Prev YTD	Curr YTD	Prev YTD
ASTEPRO 0.15%	69%	73%	4%	2%	6%	4%	21%	20%
DYMISTA	80%	85%	7%	5%	2%	1%	12%	9%
NASACORT AQ	50%	42%	11%	4%	27%	46%	13%	8%
NASONEX	65%	69%	4%	3%	15%	13%	16%	16%
OMNARIS	82%	87%	6%	4%	2%	2%	10%	8%
PATANASE	71%	75%	4%	3%	12%	10%	13%	12%
QNASL	84%	86%	5%	4%	4%	3%	7%	6%
RHINOCORT AQUA	79%	83%	7%	4%	4%	4%	10%	9%
VERAMYST	77%	81%	6%	4%	7%	6%	9%	9%
ZETONNA	83%	87%	6%	5%	2%	2%	9%	7%

- Majority of branded competitors get business from managed care/3rd party
 - If Nasonex goes OTC, 89% of TRxs come from managed care, and has a major impact on branded & Dymista business

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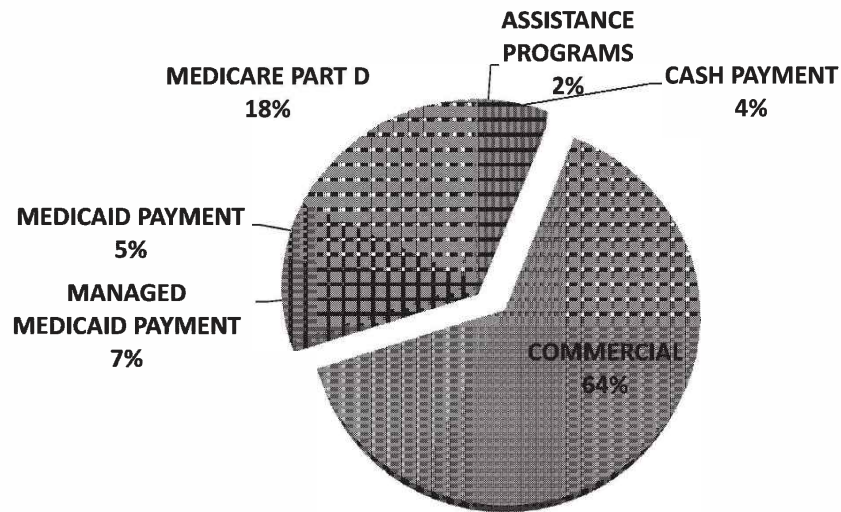
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Source: Symphony Health - PHAST National Database- July '14
Total Third: Third Party/Commercial insurance

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Nasal Spray Payment Type Mix (2014 YTD)



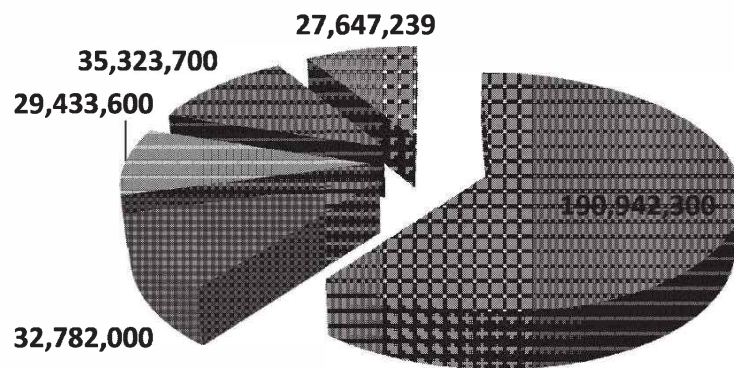
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Commercial and Medicare Part D represent 82% of Nasal Spray TRx

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US Population by Payer Segment

316,128,639 Lives



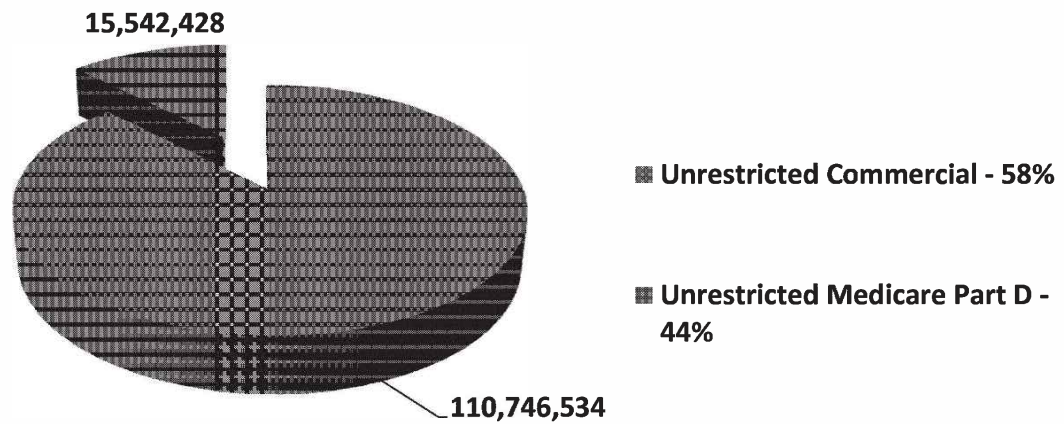
90% discount required to be listed in Medicaid and Managed Medicaid -> not a target for Dymista

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Dymista Commercial and Medicare Part D

Dymista Total Unrestricted Lives = 126,288,962



Source: Managed Markets Insights and Technologies October 2014

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Taking Advantage of Nasonex Shift

When Nasonex goes generic or OTC, there will be additional opportunity for Dymista

- Contract proposal in place with Caremark for Tier 2 Preferred position when they re-bid the category
- Contract discussions have taken place to be the Preferred brand when Nasonex goes Generic or OTC (e.g.: Prime Therapeutics)
- Continued discussions to determine what plans will re-bid the category and when

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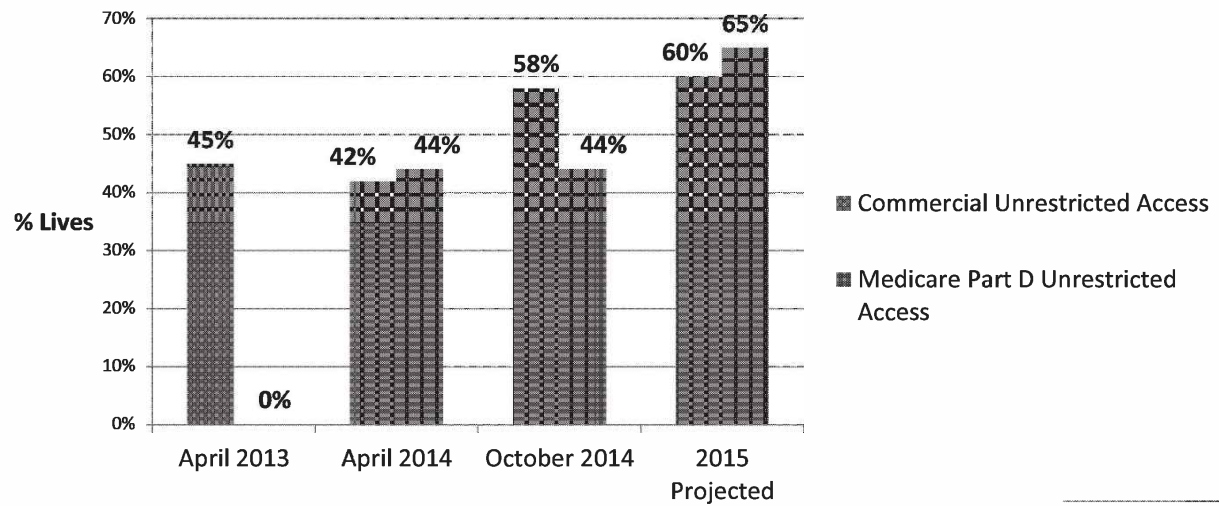
Dymista Top Plan Formulary Positions

Commercial	Lives	Position
Caremark	40,000,000	NDC Blocked in 60%
Express Scripts / Medco	39,000,000	Tier 3 unrestricted
ESI Basic and National Preferred	23,000,000	Tier 2 Preferred
Prime Therapeutics	17,000,000	Tier 3 unrestricted
Anthem WellPoint	14,000,000	Tier 2 Preferred
United Healthcare	14,000,000	NDC Blocked
Aetna	8,400,000	Tier 3 unrestricted
Cigna	6,500,000	Tier 3 unrestricted
Humana	2,700,000	Tier 2 Preferred
Harvard Pilgrim	1,100,000	Tier 2 Preferred
Medicare Part D	Lives	Position
Express Scripts	8,100,000	Preferred
AARP (OptumRx)	6,700,000	Preferred
Humana	5,100,000	Preferred
CIGNA Part D	860,000	Preferred

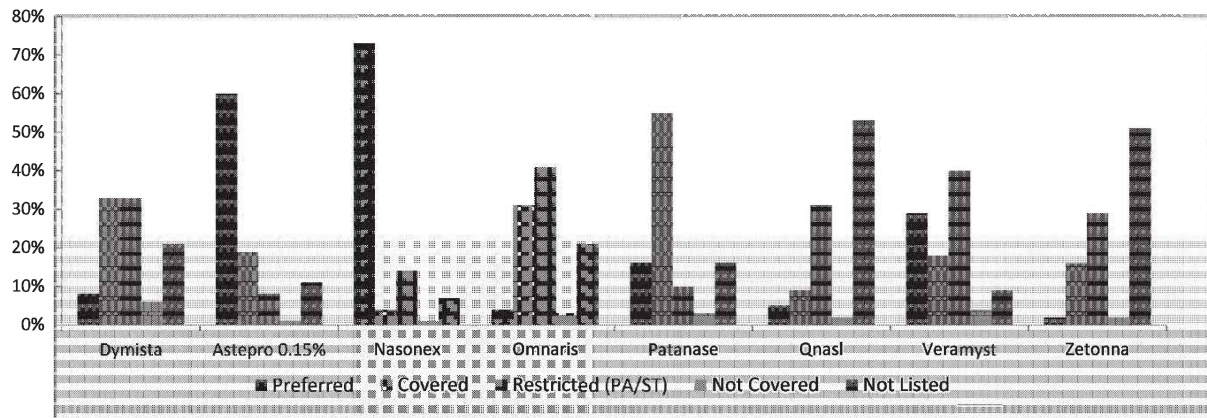
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Dymista Access Trends

Commercial and Medicare Part D Trends

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Dymista Manage Care Coverage Comparable to New Competitors



Formulary Definitions

Preferred: Brand is preferred on formulary; often results in a lowest brand copay to patients

Covered: Often the second lowest brand copay to patients

Restricted: Drug is not suggested for first-line therapy, often requires PA (prior approval) or a SE (step-edit)

Not Covered: Drug is not covered on formulary

Not Listed: Data base limitation; assume restricted tier

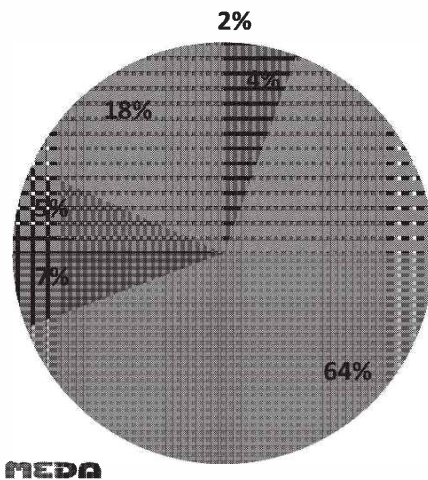
Source: MMIT

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TRxs Covered by Payer Type – Nasal Spray Market

Nasal Spray Market

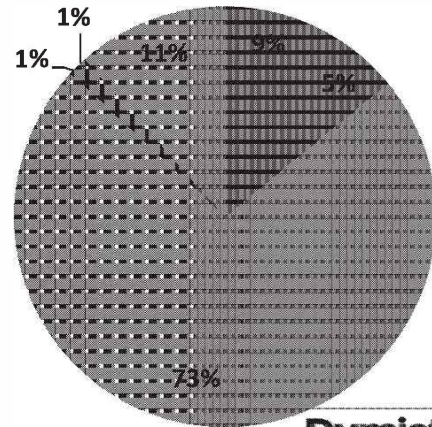


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Source: Symphony Health - PHAST National Database

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Commercial Claims

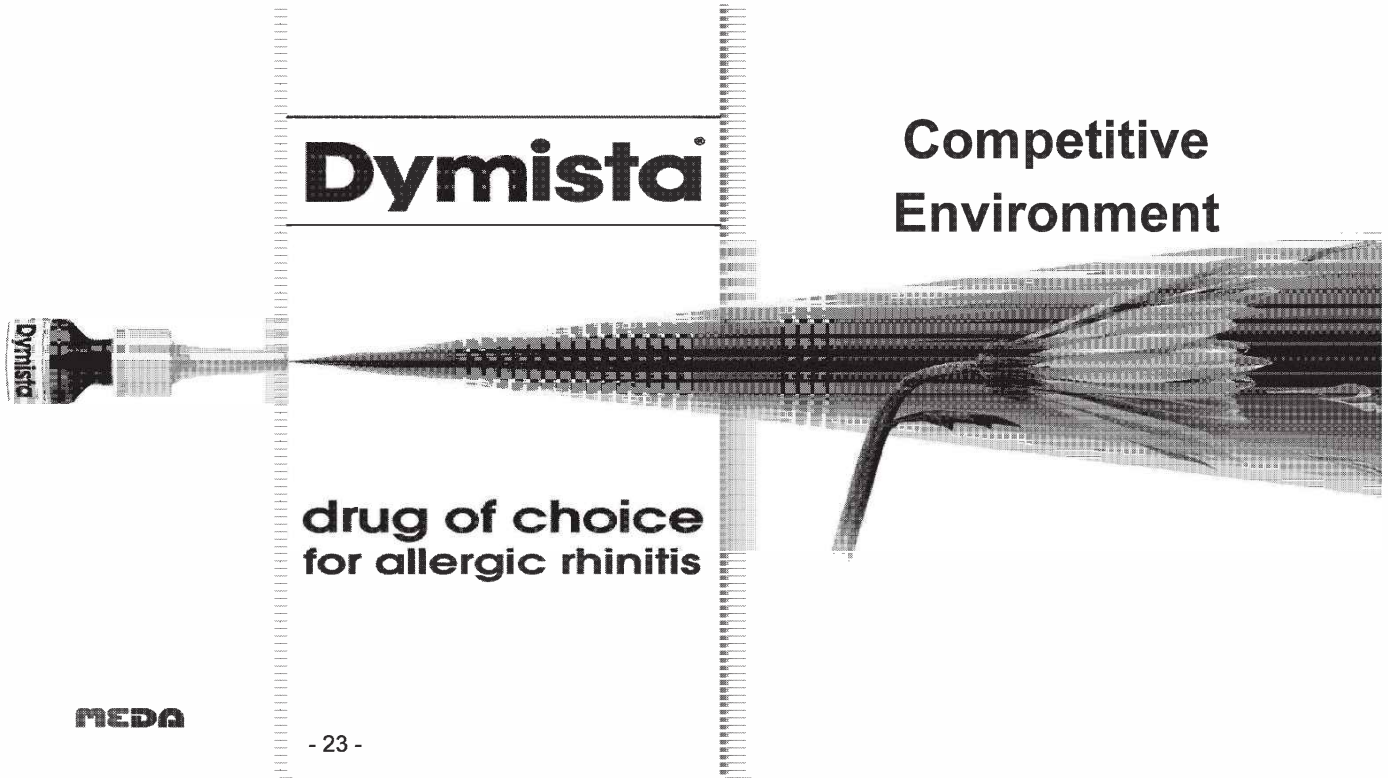
<i>Branded Product</i>	Filled Claims	Reversed Claims	Rejected Claims
ASTEPRO 0.15%	77%	16%	7%
DYMISTA	67%	14%	19%
NASONEX	74%	19%	8%
OMNARIS	74%	14%	12%
PATANASE	74%	20%	6%
QNASL	73%	15%	11%
RHINOCORT/AQUA	72%	14%	14%
VERAMYST	73%	13%	14%
ZETONNA	72%	14%	14%
<i>Generic Product</i>			
AZELASTINE	85%	11%	4%
FLUTICASONE	88%	8%	3%
TRIAMCINOLONE ACET.	82%	12%	6%
<i>All Products</i>			
NASAL SPRAY MKT	85%	10%	5%

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Fill Rate= Prescription is filled
 Rejection Rate= Script was not approved
 Reversal Rate= Script was approved but for various reasons never filled
 Source: Symphony Health - PHAST National Database

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**Competitive
Environment**

**drug of choice
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Competitive Environment

- Branded nasal spray market contains 19 brands, main competitors are:
 - Nasonex
 - OTC's
 - Qnasl

2014 TRx Market Share Snapshot (10/2014):

Calendar Year	Month	10/2014
Dymista		11.4%
Astepro		0.8%
Astelin		0.1%
Flonase		0.4%
Omnaris		1.2%
Patanase		6.0%
Qnasl		5.2%
Veramyst		4.1%
Zetorina		0.8%
All Other Branded		0.8%

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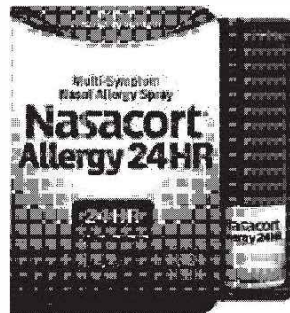
Source: Symphony Health - PHAST National Database

Update to Nasacort24 Over-the-Counter

- 9.9 MM units projected for 2014
- \$124 MM sales projected for 2014
- Over \$400 MM in advertising
- Bringing awareness to the consumer regarding nasal steroid sprays
- \$15 to \$17 for a 30 day supply
- Key message: 24 hour allergy relief

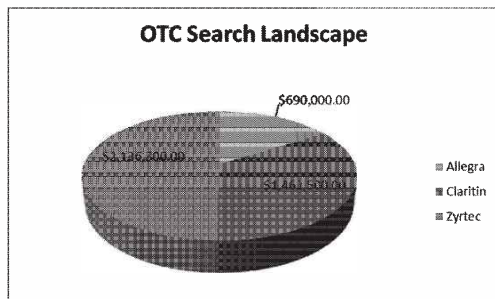
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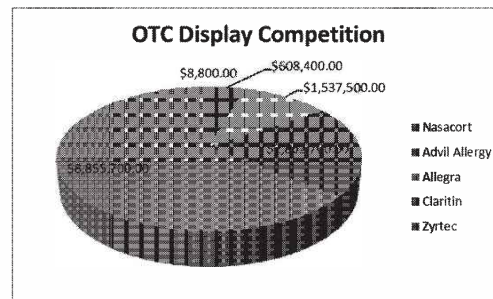
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OTC Digital Presence is Climbing

- OTC category spend continues to climb and be more aggressive
- Zyrtec had the strongest OTC digital presence in 2013
- Zyrtec spent almost \$11mm in digital spend in 2013
- Claritin maintains the second largest OTC presence with over \$4mm in spend



Source: Kantar 2013



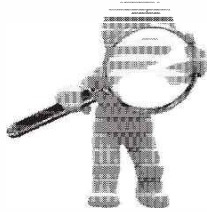
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Allergy Search Landscape




- One Playing Field For All OTC, DTC Across Same Keywords



Google allergy nasal spray

Web Shopping Images News Videos More ▾ Search tools

About 2,590,000 results (0.30 seconds)

Nasacort® OTC Nasal Spray  www.nasacort.com/ ▾ Get 24 HR Relief For Your Nasal Allergy . Sign Up Now To Save!	Nasacort [OTC]
Sinus Allergy Congestion  www.claritin.com/ ▾ Claritin-D® Provides Non-Drowsy Prescription Strength Relief . Allergies vs. Cold - Allergy Types & Tips - Claritin-D® Guarantee - HCPs: Get Info	Claritin [OTC]
Nasal Allergy Spray  www.morecompleteallergyrelief.com/ ▾ See if You Qualify for A Co-Pay Card Discount on an Allergy Spray Enroll For A Co-Pay Card - About Dymista Nasal Spray - HCP Official Site	Dymista [Rx]

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Respiratory Market Key Events 2015

Timing	Key Events	MEDA Opportunity
1Q	Flonase OTC	<ul style="list-style-type: none"> Generic fluticasone (currently 78% of the total prescription market) may be removed on many, if not all, formularies
1Q	Qnasl Pediatric Indication	<ul style="list-style-type: none"> Pediatricians awareness of the nasal spray market and the benefits they provide will increase as Teva increases promotion, providing an opportunity for Dymista to leverage awareness for its own pediatric indication launch in 2015
1Q-3Q	Dymista Pediatric Indication	<ul style="list-style-type: none"> Improved formulary opportunity Indication is competitive with other nasal sprays
2Q-3Q	Nasonex OTC or generic	<ul style="list-style-type: none"> Increased share of voice for Dymista in the branded market Improved formulary opportunity, replacing Nasonex as preferred brand for managed health care organizations Dymista will be the leading Rx drug in the category

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Qualitative Dynamics - Most Relevant Competitors

Competitor	Relative Strengths	Relative Weaknesses
Nasonex	<ul style="list-style-type: none"> Nasal steroid spray marketed by large company, Merck Dominates the branded nasal spray market with 69% branded market share Has multiple indications: SAR and PAR indication in patients aged 2 and up, nasal congestion in patients 2 and up and nasal polyps in patients 18 and up Predominately Tier 2 preferred, unrestricted formulary status Incorporated blocking strategy into many managed health care (MHC) contracts Heavy consumer campaign 	<ul style="list-style-type: none"> Relief can take from 12 hours up to 2 weeks Patent exclusivity reached
OTC's	<ul style="list-style-type: none"> Easily accessible to consumers Low cost No doctor visit or script required—suggests ease to consumers Brand awareness High advertising spend 	<ul style="list-style-type: none"> No physician guidance – patients can take the wrong type of med Expectations are not level set– can lead to dissatisfaction, discontinuation
Qnasl	<ul style="list-style-type: none"> Marketed by Teva – 400+ reps Current branded market share of 5.4% Indicated for SAR and PAR in patients aged 12 and up Broader indication than Dymista with PAR/Pending Ped 	<ul style="list-style-type: none"> Predominantly Tier 3, restricted status Can no longer classify itself as dry and instead claim it is an aerosol spray Relief can take from 12 hours up to 2 weeks



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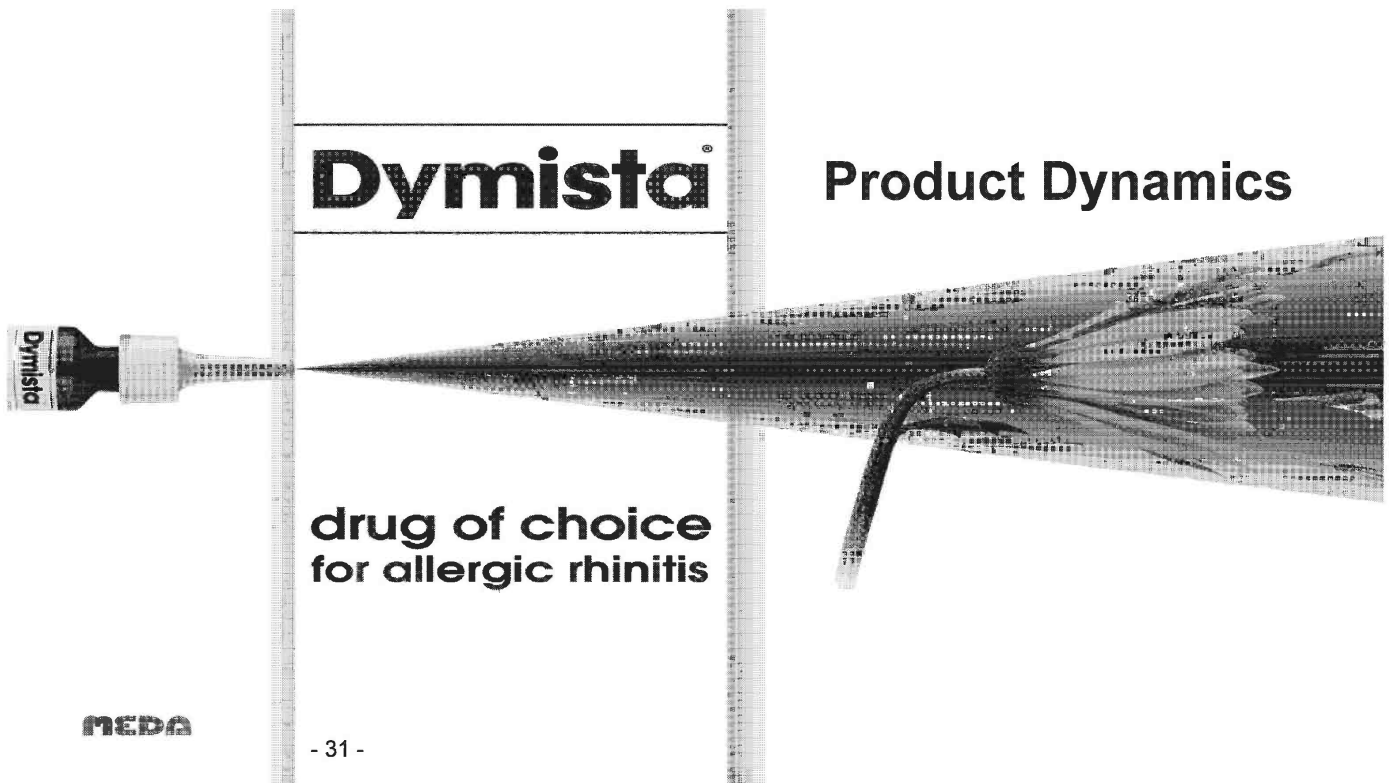


Market Dynamics – Conclusions

- Overall Nasal Spray Market is growing due to generics at 6%; branded market has declined 13.1%
- Managed Care Formulary Coverage has major impact on Brand Prescription being filled
- 2015 there will be approximately 56 million Rxs of Allergic Rhinitis
 - ~20% will be branded (if no market changes); 11.2M TRxs
 - ~80% would be generic (if no market changes); 44.8M TRxs
- Major Market changes are planned which will impact the branded Rx market:
 - Flonase OTC launch in January 2015
 - Nasonex goes Generic or OTC

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Patient Insights

- Patients need to feel absolutely miserable before they will go to a HCP for intervention
 - Patients do not view allergy as a serious enough illness to seek physician intervention
- Patients often cycle through home remedies and OTCs– these actions are often based on the recommendations of friends or prompted by a TV ad
- The Patient Buying Process for allergies now consists of 8 steps and can take several seasons or years for patients to cycle through

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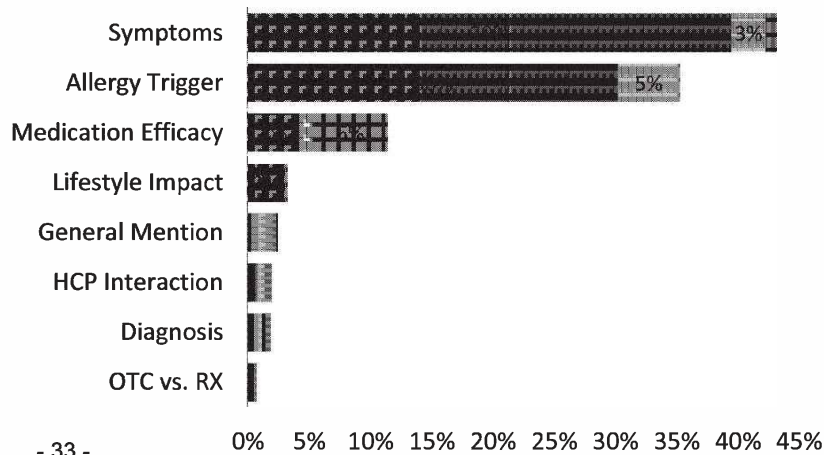
Patient Insights

- Patients are negative regarding their allergies and symptom relief

Top Topics in Messages about Allergies by Sentiment

January 1, 2013 – May 31, 2014

■ Negative ■ Neutral ■ Positive



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Physician Insights

- Allergists tend to position Dymista at the end of the treatment algorithm
 - Step-up training
- ENTs tend to move more quickly toward Dymista
- Cost/hassle factor seems to take precedence in positioning over patient satisfaction or other outcomes measures
- Primary Care Physicians have low awareness for Dymista
- HCPs focus on Dymista components instead of benefits
- Physicians realize that they need to demonstrate value to their allergy patient
- Physicians realize that they are losing their business to OTCs

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Market Sizing Study 3/13 & Converseon Social Listening Study 6/14

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Product Dynamics

- As of July 2014, ENTs contributed 29% of Dymista NRx volume (n=11,827), allergists contributed 27% (n=11,101) and primary care contributed 29% (n=11,827)
- Major Marketing Achievements (4.2)
 - Since its launch, Dymista has increased TRx market share in the branded nasal spray (BNS) market and is now at 10.1%
 - Dymista is the #2 product in TRx volume in the branded nasal spray market
 - Dymista market share within primary care has grown 31% YTD

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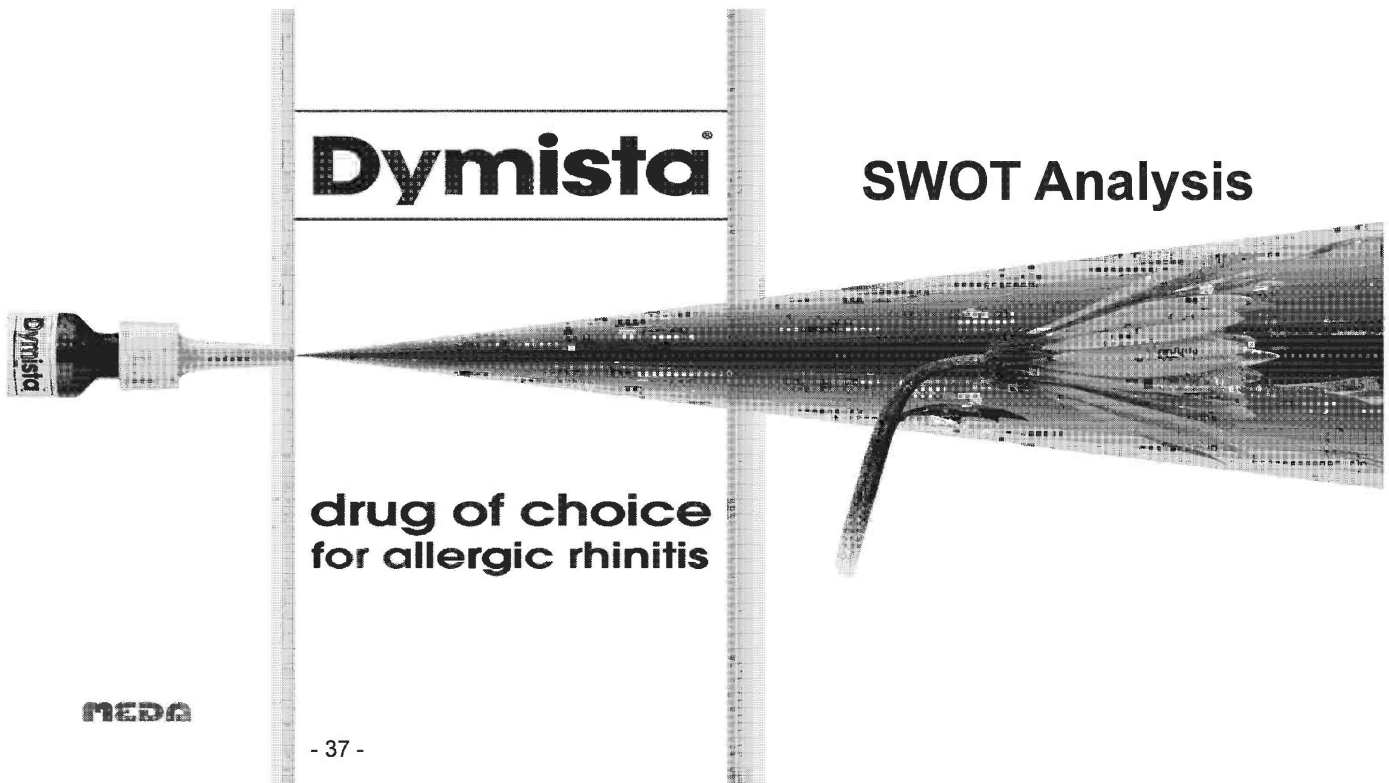
Conclusions

- Exploit the misery of the allergy patients and give them a unified voice
- Continue to build upon the success of the sales team
- Leverage KOL advocacy to continue to build brand loyalty and recognition
- Increase managed care access and reduce pharmacy switching

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Dymista SWOT Analysis

Strengths	Weaknesses
<ul style="list-style-type: none"> • Superior efficacy • Rapid onset of action with inflammation control with unique delivery system and fine mist spray • Uniqueness of product – the only one in the market • Safety profile 	<ul style="list-style-type: none"> • Nasal spray delivery is viewed as cumbersome to patients • Sales force reach/frequency • Narrow indication (lack of PAR, ocular, & ped) • Lack of resources for pull through
Opportunities	Threats
<ul style="list-style-type: none"> • Patients and Physicians still feel unmet need in seasonal allergy products – Dymista opportunity • Heighten awareness of misery and drive patients to the physician • Flonase & Nasonex going over-the-counter (OTC) giving greater share of voice in the branded Rx market to Dymista • Patient/Consumer audience 	<ul style="list-style-type: none"> • Majority of nasal spray market is generic (low-cost) • With more OTC options, patients may go to the doctor less or delay seeking intervention • Nasonex may go generic resulting in patients switching due to low cost and high brand awareness; MHC may no longer cover brands • Access declines to less than 58% of lives • Low consumer awareness

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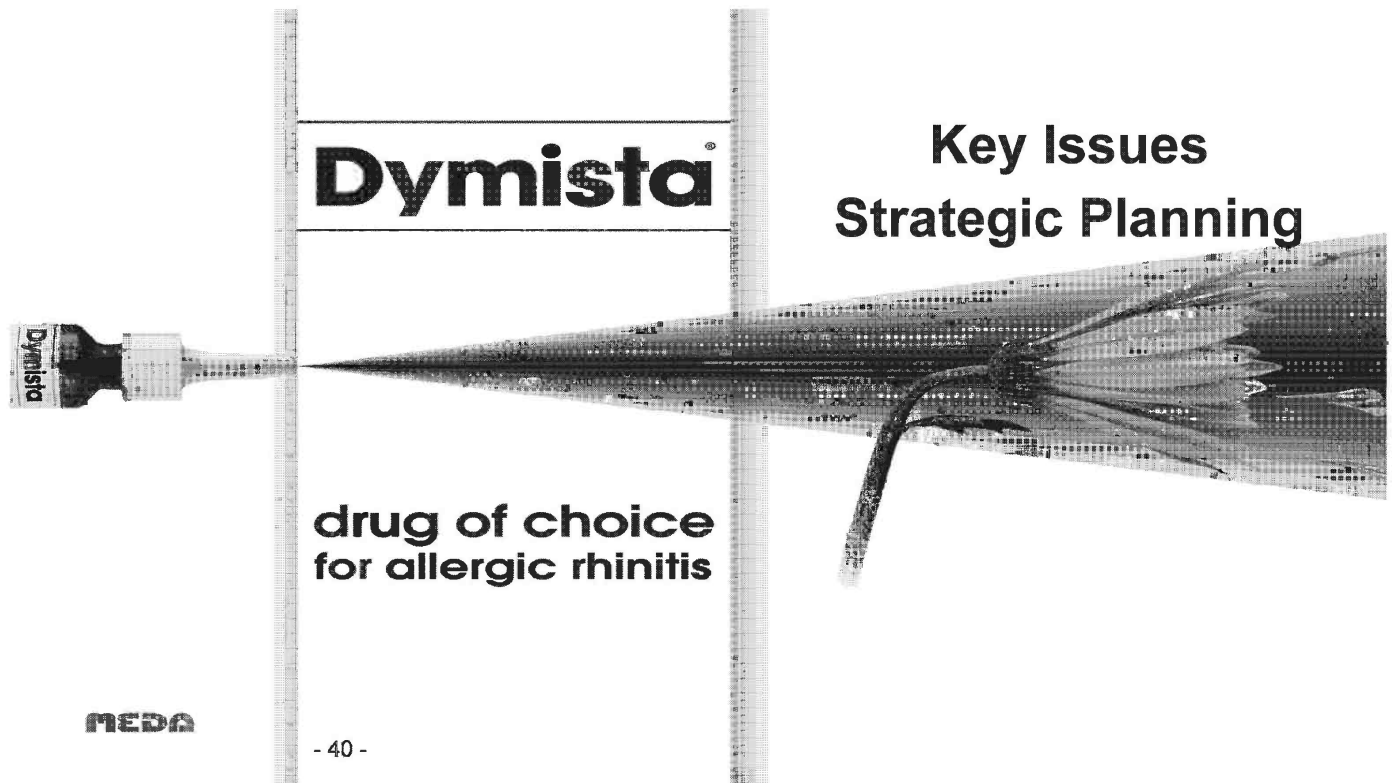
Conclusions from SWOT

- Dymista is unique – the only “One” in the market
- Dymista has a clinical difference with efficacy and speed of onset
- To achieve 2015 sales goals, managed care coverage without restrictions will be critical
- Plan to focus on patients through digital in 2015; still unmet need in Seasonal Allergy products
- Major market changes continue to impact branded Rx market
- OTC impact - patients may leave Rx market, but many may come back due to dissatisfaction
- Generic Nasonex – physicians and patients may opt for lower priced product that is Tier 1 for formulary coverage
- Managed care organizations may abandon second tier category for allergic rhinitis

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Key Issues

- 1) Dymista is grouped into a branded market that is declining, though Dymista is not
- 2) SAR sufferers minimize their suffering and don't see the doctor until their misery is intolerable
- 3) Brand awareness is low among non-targets and consumers
- 4) Sales force reach is limited due to size and priority focus
- 5) Managed Care is reluctant to change formulary- out of our control

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Dymista Strategic Map

Brand strategic intent	Establish Dymista as the leading Rx branded product (TRx, Net Sales, Patient Preference) to treat seasonal allergic rhinitis			
Brand positioning statement	DYMISTA is for people who hate allergies, but want to enjoy the season because it is the first and only product that offers rapid relief and control with every dose			
Issue 1 Dymista is grouped into a branded market that is declining, though Dymista is not	Issue 2 SAR sufferers minimize their suffering and don't see the doctor until their misery is intolerable	Issue 3 Brand awareness is low among non-targets and consumers	Issue 4 Sales force reach is limited due to size and priority focus	Issue 5 Managed Care is reluctant to change formulary- out of our control
Objective 1 Establish Dymista as the only unique branded option in the Rx space	Objective 2 Drive patients to seek physician/pharmacist intervention sooner	Objective 3 Increase brand awareness, brand name requests & physician willingness to prescribe	Objective 4 Extend reach of sales force via NPP tactics	Objective 5 Drive increase in Rx fulfillments
Strategy 1 Leverage new clinical data to distinguish Dymista from the OTC/generic market (MP 4001)	Strategy 2 Engage SAR Sufferers via Multi-Channel Promotion (DTP/DTC)	Strategy 3 DTP/DTC via digital and engage PCPs through conventions and digital means	Strategy 4 Increase HCP messaging to non-called on targets and frequency of message to called on	Strategy 5 Pull-through current plan coverage and leverage new copay program via a surround sound approach

2015 Major Initiatives Aligned to Strategies

Issue 1	Issue 2	Issue 3	Issue 4	Issue 5
Dymista is grouped into a branded market that is declining, though Dymista is not	SAR sufferers minimize their suffering and don't see the doctor until their misery is intolerable	Brand awareness is low among non-targets and consumers	Sales force reach is limited due to size and priority focus	Managed Care is reluctant to change formulary- out of our control
Tactics	Tactics	Tactics	Tactics	Tactics
<ul style="list-style-type: none"> • Speaker Programs (virtual and live) • Promote MP4001 • Promote HEOR data • Promotional Materials • Lunch & Learn Funds to engage physicians • E-details • Communication Portal • Targeted e-mail campaign • Advisory boards • Competitive copay program 	<ul style="list-style-type: none"> • SneezeCast microsite • Social media driving patients to SneezeCast • Paid Search • Banner Ads • Access Card as "Action" on digital promotion • More focused education on Dymista.com (ask an expert) • Ask an Allergist on the SneezeCast microsite • Physician offices: Patient materials, samples and access copay card 	<ul style="list-style-type: none"> • Banner ads • Paid Search • Enhanced product sites • CRM campaign • Convention presence • Product Theaters • Communication Portal • Geo-targeted heavy-ups • Virtual speaker programs • E-mails to consumers from pharmacy database • Make Dymista the Expert campaign 	<ul style="list-style-type: none"> • Targeted e-mail campaign • Communication Portal • E-details • MP4001 promotion • HEOR data promotion • Banner ads • Paid search • Enhanced websites • Virtual speaker programs • Convention presence • Product theaters 	<ul style="list-style-type: none"> • Competitive copay card • MHC Advisory Board • Promotional materials on major wins & formulary state grids • Pharmacy Flashcard • Compass Research • PDQ emails/coops • Fax forms • Formulary Spotlights • Communication Portal

Over-the-Top Initiatives

Initiative	Audience	Objective/Description
Misery Meter Flash Mob	Consumer	<ul style="list-style-type: none"> Create awareness for Dymista by a spring flashmob in Central Park or some other well known location Flash mob armed with misery meters showing consumers how miserable allergies are making their day
AAFA Spring Capitals Sponsorship	Consumer	<ul style="list-style-type: none"> Use our social media platform to promote Spring Allergy Capitals Targeted tweets and posts to different geographic users
Nasal Survey Sponsorship for AAFA	HCPs/Consumers	<ul style="list-style-type: none"> Work with AAFA to sponsor their national survey Information could be used as unmet need source for HCP materials Reinforces Meda's commitment to Allergy
Gannett In-Office Awareness	Consumers	<ul style="list-style-type: none"> In-office TV (news program) on allergies and promoting Dymista

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Qualitative Objectives

Objective	Measurements
<ul style="list-style-type: none"> Establish Dymista as the only unique branded option in Rx market 	<ul style="list-style-type: none"> Managed care coverage increases due to uniqueness of Dymista Dymista is accepted as a unique product that can be used in majority of patients in practice parameters Brand awareness study
<ul style="list-style-type: none"> Drive patients to seek physician/pharmacist Intervention sooner 	<ul style="list-style-type: none"> Increased TRxs & sales month-over-month Increase in script volume with more new patients Digital downloads of Access Copay Card Increase in redemption of copay card Dymista.com increased traffic
<ul style="list-style-type: none"> Increase brand awareness , brand name requests, and physician willingness to Rx 	<ul style="list-style-type: none"> Dymista is accepted as a unique product that can be used in majority of patients in practice parameters Ongoing market research (ATU) showing use of Dymista increasing in range of patient types Feedback from national KOLs and advisory board members Placement by Practice Parameters earlier in treatment paradigm Brand awareness study
<ul style="list-style-type: none"> Extend reach of sales force via NPP tactics 	<ul style="list-style-type: none"> Increase in script volume with more new patients Increase in Rx from non-targets Digital downloads of Access Copay Card Increase in redemption of copay card Dymista.com increased traffic
<ul style="list-style-type: none"> Drive increase in Rx fulfillments 	<ul style="list-style-type: none"> Increased TRxs & sales month-over-month Increase in script volume with more new patients Digital downloads of access copay card Increase in redemption of copay card Dymista.com increased traffic

Quantitative Objectives

	2012*	2013	2014 WYE Q3	2015 Budget
Sales	\$9.4 MUSD	\$63.1 MUSD	\$78.9 MUSD	\$105.2 MUSD
Total Market Share	0.7%	1.6%	1.9%	2.4%
Branded Market Share	2.7%	7.2%	TBD	TBD

*Reflects launch in September 2012

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Pricing Strategy

- Current WAC is \$145.95
- Current net sales price is \$82.20
- Plan to increase price in January 2015 by 10%

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Life Cycle Management

- LCM team has identified the following three key imperatives:
 - VMR Indication
 - Pediatric Indication
 - QD Dosing
- The team will focus on building the business case for each (with the exception of peds) and present to the ET

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Dymista

Dymista®

**Sales Force 2015 Goals,
Imperatives, and
Key Drivers of Effectiveness**

**drug of choice
for allergic rhinitis**

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2015 US Sales Force Goals

- Dymista Sales – 2015 exit market share of 2.4%
 - Q1 Milestone: Mitigate lost volume resulting from Humana and Aetna formulary removal

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Key Drivers of US Field Force Effectiveness

Sales Force Alignment and Multi-functional Promotional /Educational (MSL) Support

Territory Business Plans with Specified Target Segmentation

Call Plan Execution

Message Quality

Selling Skills Assessment and Development

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Key Drivers of US Field Force Effectiveness

Sales Force Alignment and Multi-functional Promotional /Educational (MSL) Support

- Aligned sales territories with geographical areas having favorable patient access via managed care formulary inclusion
- Increased frequency of calls to specialists by expanding the AM-R footprint and proportion of time allocated to promotional efforts
- Increased utilization of Medical Science Liaisons to improve prescriber understanding of clinical data

Territory Business Plans with Specified Target Segmentation

- Targeting of highest potential customers, product loyalists with emphasis on specialists by AM-Rs and FP/Peds by Core
- Well-defined time and resource allocation , including call sample allocations, micro-marketing funds, and access funds
- Reviewed and updated monthly with the District Manager

Call Plan Execution

- Minimum requirements for all call activity metrics met by all field representatives (daily call average, % target coverage, etc.)

Message Quality

- Aligned with non-personal and consumer campaigns as directed by the Brand Plan
- Core message supported visually for improved retention
- Retention of Core Message reflected in ongoing Message Recall Survey data

Selling Skills Assessment and Development

- Practice of Professional Selling Skills (PSS) combined with updated tools and messaging during POA Meetings
- Assessment of skill application during field observation time by the District Manager via Coaching Trip Assessments

MEDA Updated Personal Development Plans which include targeted areas of skill development for 2015

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Sales Force Key Imperatives

Imperative 1: PLAN AHEAD

Imperative 2: EXPAND OUR PRESENCE

Imperative 3: SURROUND THE CUSTOMER

Imperative 4: RAISE THE BAR

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Sales Force Key Imperatives

Imperative 1: PLAN AHEAD

We must stay ahead of evolving market dynamics in 2015 by understanding potential changes and developing contingency plans on a macro (national) and micro (sales territory) level to address changes in the market (ie. formulary changes, competitive product messaging, etc.). Territory, District, and Regional Business Plans will become the common thread for this planning and adaptation.

Imperative 2: EXPAND OUR PRESENCE

We must improve brand awareness and product positioning message retention among our called on customers. This will be achieved when every representative understands the brand plan for each product, consciously avoids distractions that confuse the message (ie. copay program s), and delivers a consistent message with predetermined frequency.

Imperative 3: SURROUND THE CUSTOMER

We must orchestrate and fully utilize the diverse promotional and educational functions that are designed to meet the various needs of the customer. In 2015, we will deploy Respiratory representatives and Account Managers with tactics dedicated to promotional messaging, National and Regional Account Managers with tactics dedicated to Managed Care formulary access and pull-through strategies, and Trade Account Managers with tactics dedicated to product availability and fulfillment strategies. Additionally, we will expand the Medical Science Liaison team to provide clinical support.

Imperative 4: RAISE THE BAR

From execution of the call plan to advancements in selling skills, we must demonstrate continuous improvement throughout 2015. Sales goals attainment, call plan measures, and personal development plan milestones will be reviewed on a monthly basis. All field sales colleagues should have one defined area of development/improvement in which progress can be demonstrated during each review period.

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Dymista

Target Group Definition, Visit Coverage & Reporting

- Targets are based on the TRx potential for the Branded Nasal Spray (BNS) market
- Visit Coverage (8.3.1.2):

Target Group	Total HCPs	Targets	Coverage	Visit Potential	Total Visits (per year)
BNS Decile 8 to 10	5,477	4,617	84%	Twice / Month	110,808
BNS Decile 6 & 7	13,555	6,957	51%	Once / Month	83,484
BNS Decile 5	12,970	3,667	28%	Once / Month	44,004
BNS Decile 0-4*	326,275	12,499	4%	Once or Twice / Month	224,982

Field Reporting:

All Representative-physician visits are recorded in the Meda MI system where it tracks visits and samples dropped (if applicable for that visit)

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Dymista®

Tactical Planning

**drug of choice
for allergic rhinitis**

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The advertisement features a central graphic of a stylized umbrella with a ruler as its shaft and handle. The umbrella's canopy is composed of a grid of small squares, creating a pixelated or digital effect. The ruler is marked with measurements in both inches and centimeters. The Dymista logo is prominently displayed at the top left, and the text 'Tactical Planning' is to its right. Below the umbrella, the phrase 'drug of choice for allergic rhinitis' is written in a bold, sans-serif font. The MEDA logo is located in the bottom left corner of the graphic area, and the page number '- 56 -' is centered at the bottom.

Dymista Refreshed Messaging – “Help Allergy Haters Enjoy the Season”

Front Cover of Sales Aid



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“Help Allergy Haters Enjoy the Season”	
PHYSICIAN RXs	DYMISTA is for people who hate allergies, but want to enjoy the season
PATIENT	Moderate-Severe
KEY MESSAGES	<ul style="list-style-type: none">• Help allergy haters enjoy the season again• Relief in as little as 30 minutes• Placebo-subtracted, up to, 67% greater improvement in rTNSS vs comparators• Placebo-subtracted 90% greater efficacy vs. generic Flonase• Low spray volume vs comparators• Commercially insured/covered patients pay as little as \$14

Key Marketing Initiatives – Sales Force

Initiative	Audience	Objective/Description
Sales Force Training (developed and done by Sales Training Department)	Sales Force	<ul style="list-style-type: none"> All new Representatives go through multiple levels of training: Level 1 – Home Study of disease state, customer groups, products Level 2 – Home Office Training: 2 week training course at home office (Somerset, NJ)
Support Sales POA w Physician Office Materials	HCPs, Pharmacists, Nurses/PAs, Patient	<ul style="list-style-type: none"> Develop sales force promotional materials to drive growth and reinforce Dymista messaging Detail Aids, Flashcards, Patient Brochure
Vacant Territory	HCPs, Pharmacists, Nurses/PAs,	<ul style="list-style-type: none"> Provide non-personal promotion and sample support to key high decile physicians to maintain business while territories are vacant
Nexus Portal	HCPs/ non-targets	<ul style="list-style-type: none"> Increase reach of field to white space or non-called on HCPs by communicating the Dymista value proposition Increase frequency to Targets by adding another mode of communication to HCPs

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Key Marketing Initiatives – Sales Force (Cont.)

Initiative	Audience	Objective/Description
Access/Copay Card	Patients, HCPs	<ul style="list-style-type: none"> Provide copay reduction & assistance to those patients with managed care coverage. Pay as Little as \$14
Samples	Patients, HCPs	<ul style="list-style-type: none"> Continue to provide a trial of Dymista to appropriate patients
Lunch & Learn Funds	Representatives, HCPs	<ul style="list-style-type: none"> Continue to provide funds for Representatives to leverage and meet with HCP offices during lunch. Allows for additional time with key physicians.
E-Details	HCPs	<ul style="list-style-type: none"> Provide details to non-targets on clinical value of Dymista (MP 4001) and potentially HEOR data (if available in 2015)

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2015 Sample Allocation

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Costs/Month (\$)	1,977,915			1,820,977			1,820,977			1,507,937		
# Cases/Core Territory	10			9			9			7		
# Cases/AMR Territory	4			4			4			4		

Assumptions


- Assumes samples will continue to be shipped out of Goa
- Assume 225 territories with approximately 80 targets each
- AMRs (42) will have samples
- Cost includes 50 cases per RD per quarter and vacant territory program

2015 Creative Campaign

For seasonal allergic rhinitis (SAR) symptoms in patients 12 and older

DON'T LET POLLEN GET THE BETTER OF YOUR PATIENTS

DYMISTA
azelastine HCl nasal spray
1 mg/0.1 mL, 12 mg/0.1 mL
Nasal Spray



Only Dymista offers fast relief* and inflammation control—with every dose!

*Compared to placebo, Dymista was significantly superior to placebo in the mean change from baseline in instantaneous total nasal symptoms score (ITSS) at 15 minutes post-dose.

Indication

Dymista Nasal Spray is indicated for the relief of symptoms of seasonal allergic rhinitis in patients 12 years of age and older who require treatment with both azelastine HCl and fluticasone propionate for symptomatic relief.

Important Safety Information

- Patients may experience drowsiness. Caution patients against engaging in hazardous occupations requiring complete mental alertness, such as driving or operating machinery.
- Patients should avoid concurrent use of alcohol or other central nervous system (CNS) depressants because additional reductions in alertness and additional impairment of CNS performance may occur.
- Because of the inhibitory effect of corticosteroids on wound healing, avoid use in patients with recent nasal ulcers, nasal surgery, or nasal trauma until healed.


Please see additional Important Safety Information throughout this piece and Full Prescribing Information in packet.

Support the evidence in the treatment of seasonal allergic rhinitis (SAR)

SIGNIFICANT IMPROVEMENT VS PRODUCTS YOUR PATIENTS MAY HAVE TRIED

Dymista demonstrated significantly greater improvement in total nasal symptom relief vs. Astele® (azelastine HCl) or generic Flonase® (fluticasone propionate)*

MAGNITUDE OF NASAL SYMPTOM RELIEF



Change from baseline to the placebo subtracted mean ITSS for each day (mean score 2.0), averaged over the 14-day study period.

Fluticasone propionate 1 mg/0.1 mL is prescribed in 120 mg/0.1 mL (12 mg/0.1 mL) units. It is not immediately available for use without a prescription.

*The most common adverse events in the trial for Dymista were dysphonia (7.2%), epistaxis (5.0%), and headache (5.0%).

Important Safety Information continued


- Significant cardiovascular effects, such as hypotension and syncope, may occur with very high doses or if the regular dosage is suspended abruptly. If such changes occur, discontinue Dymista gradually, under medical supervision.

Please see additional Important Safety Information throughout this piece and Full Prescribing Information in packet.

BENEFITS THAT IMPROVE HEALTH-RELATED QUALITY OF LIFE

Dymista significantly improved overall health-related quality of life vs placebo (P < .001)*

RHINOLOGY-RELATED QUALITY OF LIFE QUESTIONS (RQLQ)



Patients did not receive any other treatment for SAR during the study. On day 1 of the study an interim evaluation was conducted. After completing the 14-day double-blind treatment period, an end-of-study evaluation was conducted for 14 days post-treatment.

Important Safety Information continued

- Before initiation of cyclosporine (CYC) or cyclosporine (CYC) may increase blood levels of fluticasone propionate.
- Fluticasone propionate is not recommended.
- Other potent CYP3A4 inhibitors, such as ketoconazole, use caution with combination therapy.

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Key Marketing Initiatives - Digital

Initiative	Audience	Objective/Description
Paid Search (via Web)	SAR Sufferers, HCPs	<ul style="list-style-type: none"> Drive awareness, interest and motivation to ask physicians about Dymista Offer \$14 copay card as an "action" Create brand awareness for Dymista
Customer Relationship Management System	SAR Sufferers (Meda database)	<ul style="list-style-type: none"> Partnered with IMS/Nexus to build unique database for all campaigns (both HCP/patient) Also links external databases from copay to our internal database Will automatically opt-out patients per their action Aid to keep Dymista top-of-mind for patients/consumers
Banner Ads	HCPs/consumer	<ul style="list-style-type: none"> Sponsor ads on high traffic sites for both HCP and consumers Insert banner ads into emails and online newsletters Increases brand awareness of Dymista
Evolving Website	SAR Sufferers, HCPs, Pharmacists	<ul style="list-style-type: none"> Update branded website based on needs of patients and HCPs Continue to add and enhance website to draw more traffic and returning visitors Direct link to Access Card Enhance user experience for those who visit Dymista.com for ease of access to messaging
Brand Awareness Study	HCPs/Consumers	<ul style="list-style-type: none"> Study to determine the success of the branded digital campaign and other efforts

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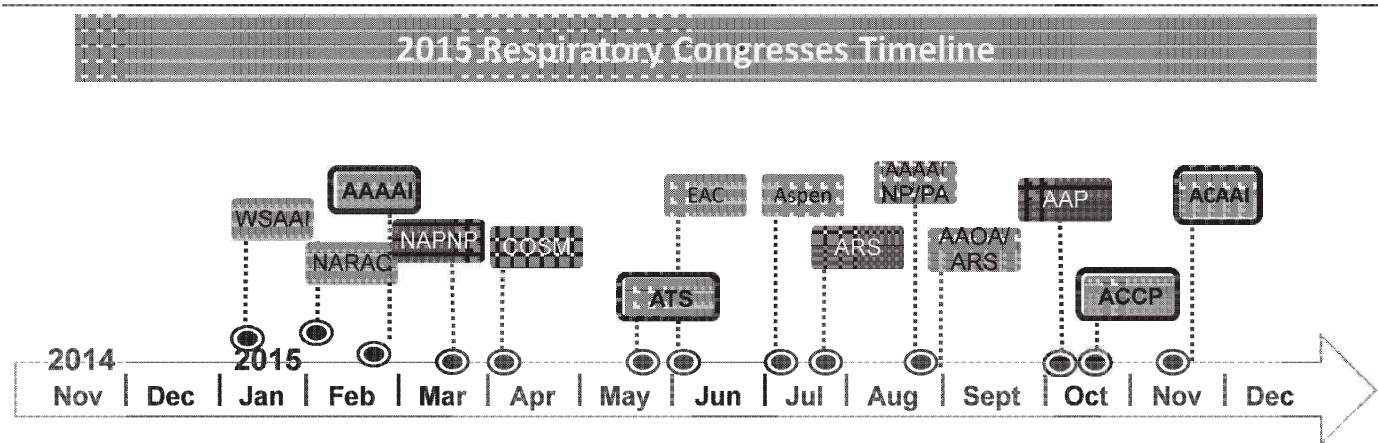
Key Marketing Initiatives – Social Media

Initiative	Audience	Objective/Description
Sneezecast Microsite	SAR Sufferers	<ul style="list-style-type: none"> Unbranded microsite speaking to the misery caused by allergies Shows pollen counts and provides education to consumers Raises allergies as an issue that should be taken seriously
Sneezecast YouTube	SAR Sufferers	<ul style="list-style-type: none"> Unbranded microsite speaking to the misery caused by allergies Raises allergies as an issue that should be taken seriously Gives allergy sufferers a unified voice
Sneezecast Facebook	SAR Sufferers	<ul style="list-style-type: none"> Unbranded microsite speaking to the misery caused by allergies Raises allergies as an issue that should be taken seriously Gives allergy sufferers a unified voice
Sneezecast Twitter	SAR Sufferers	<ul style="list-style-type: none"> Unbranded microsite speaking to the misery caused by allergies Raises allergies as an issue that should be taken seriously Gives allergy sufferers a unified voice
SAR Sufferer PSA	SAR Sufferers	<ul style="list-style-type: none"> Urges patients to go to the doctor Elevates the misery of the allergy patient
Unbranded Banner ads	SAR Sufferers	<ul style="list-style-type: none"> Placed on consumer allergy pages to drive traffic to sneezecast

Marketing Initiatives – Advocacy/Opinion Leader Management

Initiative	Audience	Objective/Description
Congress Plan	Allergists, ENTs, PUDs, P. Care (includes NPs & PAs)	<ul style="list-style-type: none"> Fully leverage resources to maximize the impact of Meda's Respiratory Franchise across key specialties
Meda Lecture Bureau	Allergists, ENTs, PUDs, P. Care (includes NPs & PAs)	<ul style="list-style-type: none"> Target high potential audiences for focused, interactive promotional messaging for the Respiratory Franchise
KOL Management & Engagement	Regional & National level Allergists, ENTs, PUDs	<ul style="list-style-type: none"> Develop and enhance KOL Advocacy for Meda and its Respiratory Franchise
Advisory/Consultancy Meetings	Regional & National level KOLs (Allergists, ENTs, PUDs)	<ul style="list-style-type: none"> Gain valuable insight and guidance for Meda and its Respiratory Franchise

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NATIONAL CONVENTION			Meeting Dates	Meeting Location	Meeting Title	Meeting Type	Meeting Status
Western Society of Allergy, Asthma/Immunology (WSAAI) Meet. H	Jan 19-Jan 23, 2015	10x40	Exhibit	Exhibit	Yes		
North American Rhinology and Allergy Conference (NARAC) Savannah, GA	Jan 23-Jan 26, 2015	10x40	Exhibit & Sponsorship	Exhibit	Yes		
American Academy of Allergy, Asthma & Immunology (AAAAI) San Diego, CA	Feb 28-Mar 04, 2015	20x60	Exhibit & Sponsorship	Exhibit	Yes		
Combined Otolaryngology Spring Meeting (COSM) Las Vegas, NV	May 14-18, 2015	None	Advocacy	Exhibit	Yes		
American Thoracic Society (ATS) San Diego, CA	May 16-20, 2015	20x60	Exhibit	Exhibit	Yes		
American Academy of Physicians Assistants (AAPA) Boston, MA	May 24-28, 2015	20x20	Exhibit	Exhibit	Yes		
Eastern Allergy Conference (EAC) Palm Beach, FL	May 29-June 1, 2015	10x40	Exhibit	Exhibit	Yes		
American Academy of Nurse Practitioners (AANP) Nashville, TN	June 18-22, 2015	20x20	Exhibit	Exhibit	Yes		
American Rhinologic Society (ARS) Summer Sinus Symposium Chicago, IL	July 18-19, 2015	10x40	Exhibit	Exhibit	Yes		
Aspen Allergy Conference (AAC) Aspen, CO	July 22-27, 2015	10x40	Exhibit	Exhibit	Yes		
American Academy of Otolaryngology Allergy, Orlando, FL	September 19-20, 2015	10x20	Exhibit & Sponsorship	Exhibit	Yes		
American Academy of Pediatrics (AAP) San Diego, CA	October 11-13, 2015	10x40	Exhibit	Exhibit	Yes		
American Academy of Family Practice (AAFP) Washington, DC	Oct 21-25, 2015	10x20	Exhibit	Exhibit	Yes		
American College of Chest Physicians (ACCP/ACEST) Austin, TX	Oct 30 - Nov 01, 2015	10x20	Exhibit & Sponsorship	Exhibit	Yes		
AAAAI (Corp. Council) Atlanta, GA	November 6-10, 2015	20x60	Exhibit & Sponsorship	Exhibit	Yes		

Key Marketing Initiatives – (HEOR)

Initiative	Audience	Objective/Description
Analyze ACO's and/or major medical groups secondary data	<ul style="list-style-type: none"> Major Medical Groups Accountable Care Organizations (ACO's) Physicians 	<ul style="list-style-type: none"> Work with Sharp Rees Stealy (SRS) to analyze AR patient data and study analyze switching and augmentation behavior Products will be publications, presentations, slide decks
Unintended Consequences of no RX for AR	<ul style="list-style-type: none"> Managed Care Organizations Physicians 	<ul style="list-style-type: none"> Roundtable meeting of KOLs followed by supplement issue of American Journal of Managed Care (AJMC)
Large Employer study	<ul style="list-style-type: none"> Large self insured employer groups Physicians Payers Patients 	<ul style="list-style-type: none"> Work with large employer to collect survey data on unmet need, treatment satisfaction and patient reported outcomes pre and post Dymista
Budget impact models	Managed Care organizations	<ul style="list-style-type: none"> Presentation of interactive budget impact model for Dymista
Publication and presentation of papers based upon 2014 work	Physicians Payers KOLs	<ul style="list-style-type: none"> This will include Comorbidity and Cost study (sleep apnea and AR, Humana database study (costs and outcomes of Dymista versus treatment alternatives, Dymista budget impact model; analysis of Kantar Health Data)

Key Marketing Initiatives – (Rx Fulfillment / Trade)

Initiative	Audience	Objective/Description
Retail Pharmacy Rx Abandonment Strategy	Retail Pharmacy chains both national and regional is scope	<ul style="list-style-type: none"> Partner with retail pharmacy to reduce Rx abandonment due to high copays and no copay card availability. Potential for retail chains to intercept abandoned Rx's and offer copay assistance on our behalf
Pharmacy Survey for OTC Nasal Steroid impact on Rx	Retail pharmacy and independent pharmacy	<ul style="list-style-type: none"> Determine impact of OTC shift for nasal steroids on the Rx business for retail pharmacy. How can we partner with them when patients do not get relief from OTC INS. Use of RCAT? Referral to In-store clinics?
Regional and National Pharmacy Trade Shows	Retail and Community Pharmacists	<ul style="list-style-type: none"> Presence at National and Regional Pharmacy Trade shows to promote brand awareness
Preseason communication through Wholesale and Retail communication channels	Wholesalers and Retail Pharmacy	<ul style="list-style-type: none"> Utilize wholesale and retail internal communication tools in front of spring allergy season to aid in brand awareness.



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Key Marketing Initiatives – Managed Care & Trade

Initiative	Audience	Objective/Description
Managed Care Market Research	PBMs/Managed Care Organizations	<ul style="list-style-type: none"> Identify and assess plan access strategies as the result of changes in the competitive mix <ul style="list-style-type: none"> Launch of a non-AB rated mometasone Fluticasone OTC Characterize the competitive landscape, including the current contracting environment and how it may evolve Identify and rate value drivers in allergic rhinitis Assess perceptions and messaging of Dymista Rate Meda contracting versus competitors
MHC Contracts – Preferred Brand Position	Managed Care, HCPs, Patients, Pharmacists	<ul style="list-style-type: none"> Negotiate with MHC for Dymista to replace Nasoex as preferred brand once change to generic/OTC occurs
Managed Care Promotional Materials (Rep Delivered)	HCPs, Pharmacists	<ul style="list-style-type: none"> Provide promotional tools that review the managed care coverage at a national, regional, local level Promote Managed Care Wins through quick hit cards that can be left behind
Minute Clinic Promotion/Contracting	Patients, Pharmacists	<ul style="list-style-type: none"> Contract with Minute Clinics within CVS and Walgreens (own the majority) to drive utilization of Dymista
Adherence & Persistency Program	Patients, Pharmacists	<ul style="list-style-type: none"> Contact Dymista patients when refill is ready at Pharmacy. Communication will be done through chain

Key Marketing Initiatives– AMR Team

Initiative	Audience	Objective/Description
RCAT	PCP, Pharmacy, NP/PA, nursing staff	To increase the awareness of SAR levels of control. Specifically how well specific symptoms are controlled relative to their current treatment plan (RX/OTC). This needs to be embraced by Meda and executed as a comprehensive toll. As we have discussed, this toll is being requested in an EMR format/APP format.
2015 Q1 AMR Dymista Tools	AI/PUD is our current audience.	Develop a tool for the AMR team to enhance the specialists understanding and commitment to Dymista this spring season. Having the AMR's and Respiratory team use unique tools will increase commitment and the time to gain that commitment
Pollen/Weed Walk	AL and ENT Training Programs in the 28 AMR Markets	Provide a non-branded educational event for specialists in training to increase their understanding of the local provocateurs.
Access	AI/PUD is our current audience. Also we cover the following in our markets: Major Medical Groups, Training Programs, KOL's, Retail Pharmacy/Clinics	Provide access and education to this important group of "Hard to See" providers

Key Marketing Initiatives – Sales Operations

Initiative	Audience	Objective/Description
Market Forecast	Internal	<ul style="list-style-type: none"> Objective third party to produce a forecast to predict market size and impact of upcoming significant market events (OTC/Generic)
Sales Force Focus	HCPs	<ul style="list-style-type: none"> Adjust SF targets to increase Dymista reach Pulse Dymista into primary position for 1H 2015
Organizational data platform	Internal	<ul style="list-style-type: none"> Design, build and roll out a complete online data tool for all colleagues to access key market and product data
Vacant Territory Program	HCPs	<ul style="list-style-type: none"> Assist in the maintenance of the VTP program for Dymista

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Summary: 2015 Medical and Scientific Affairs Tactics

Target Audience	Need	Activity/Initiative	Outcome/Measure
HCP Prescribers (focus on allergy and pulmonary specialty)	<p>Generate differentiating comparative data, demonstrating differences.</p> <p>Effective treatment for VMR due to all etiologies (cold, perfume); generate evidence (possible indication?) supporting Dymista's activity in VMR</p> <p>Non-clinical comparisons evaluating differences in runout, run down and deposition, help inform Phase IV trials.</p> <p>HCP awareness of key primary and secondary data for Dymista;</p> <p>CME education on how to diagnose and treat asthma;</p> <p>Limited data on MOA, sleep and other areas of interest.</p> <p>No timely awareness of new literature of interest.</p> <p>Awareness around entire clinical dataset for Dymista;</p> <p>Respond to unsolicited med inquiries regarding Dymista</p>	<p>Comparative Scintigraphy, Phase IV;</p> <p>VMR Phase IV Trial;</p> <p>Non-clinical Assessments;</p> <p>Publications;</p> <p>Med Ed;</p> <p>MSL Interactions;</p> <p>Med Info;</p> <p>Scientific Intelligence;</p> <p>MSL Interactions;</p> <p>Med Info;</p>	<p>Demonstrate deposition differences vs. individual comparators PP and AZE (use data in scientific exchange and perhaps promotion);</p> <p>Demonstrate efficacy in VMR/NAR; engage FDA (possibly) in obtaining indication;</p> <p>Perform non-clinical comparative assessments to evaluate key characteristics (humectant effects);</p> <p>Present data (10 abstracts) at key medical meetings and publish data (3 manuscripts); data then used in scientific exchange (MSL and Med Info);</p> <p>Provide CME education around AR;</p> <p>Enhance scientific understanding of Dymista (in VMR/NAR, sleep and other areas of interest);</p> <p>Generate researches and reports allowing internal MEDA employees to be up to be with all key literature of interest;</p> <p>Scientific exchange, discuss clinical profile/data with KOLs;</p> <p>Address unsolicited medical inquiries;</p>
Payers	<p>Demonstrate value proposition of Dymista</p> <p>Demonstrate clinical attributes/benefits of Dymista</p>	<p>HEOR (n = 7 initiatives; see enclosed);</p> <p>MSL Interactions</p>	<p>Demonstrate the economic value proposition of DYMISTA for by disseminating evidence gleaned from secondary database analyses, primary data collection from physicians and patients, literature review and KOL input.</p> <p>Provide medical/clinical overview to P & T committees (get DYMISTA on formulary)</p>

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Financials

**drug of choice
for allergic rhinitis**

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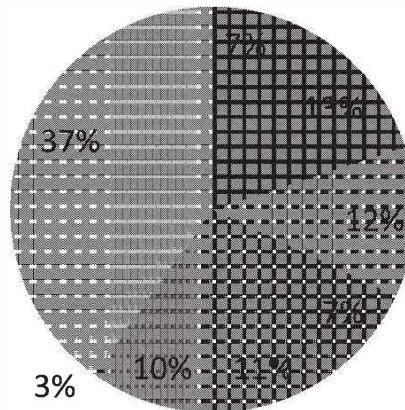
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Budget Allocation & Goals

2015 Dymista

- A&P: \$25.75 MUSD
- Net Sales Goal: \$105 MUSD
- TRx Goal: 1.21 M
- Exit Market Share Goal: 2.4%
- Exit Branded Share Goal: TBD

A&P \$25.75 MUSD



- Selling Materials
- Conventions
- Access Card
- Speaker Programs
- e-business
- Lunch and Learns
- Managed Care/Trade
- Samples

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Promotion/Sales Table

Promotion/Sales Line	2012	2013	2014 WYE Q3	2015 Budget
Sales	\$9,405,000	\$63,094,000	\$78,948,000	\$105,239,000
Product Promotion (Samples and A&P)	\$10,675,000	\$26,319,000	\$22,879,000	\$25,750,000
Rep Equivalents	38	201	149	137
Sales Force*	\$7.6 MUSD	\$40.2 MUSD	\$29.8 MUSD	\$27.4 MUSD
Total Product Promotion	\$18.3 MUSD	\$66.5 MUSD	\$52.7 MUSD	\$52.4 MUSD

* Assumes a cost of \$200,000 per rep

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