Effective Date: 01May2026

Rare Blood Disorders Returned Goods Policy and Trade Terms

Rare Blood Disorders Customer Support phone: 855-489-3228
Customer Support email: Blood-DisordersCS@sanofi.com
Credits, Returns & Claims email: customercare.US@sanofi.com
Sanofi U.S. Trade Customer Support website: https://www.sanofi.us/en/contact-us

Rare Blood Disorders Trade Terms are applicable to customer purchases of the products listed on Exhibit A either directly from Genzyme Corporation or Bioverativ U.S. LLC (referred to collectively as "Manufacturer") ("Direct Customers") and/or customers that purchase through a wholesaler ("Indirect Customers") as set forth below. For the products listed on Exhibit A, these trade terms take precedence over any other Genzyme Corporation, Bioverativ U.S. LLC, or other Sanofi U.S. general Trade Terms. These Trade Terms apply to products distributed within the United States and its territories.

Part A: Returned Goods Policy

NON-RETURNABLE POLICY (DIRECT AND INDIRECT CUSTOMERS)

- Except for the Direct Customer claims set forth below, product returned to Manufacturer is not eligible for credit for any reason including, but not limited to, the following:
  - Expired products or products nearing expiration.
  - Product involved in a bankruptcy sale or natural disaster.
  - Product deteriorated or damaged due to conditions beyond the control of Manufacturer such as improper storage, heat, cold, water, smoke, etc.
  - Product otherwise adulterated, misbranded, or counterfeit, as determined by Manufacturer, at its sole discretion.
- Product should be returned for destruction as directed by Manufacturer Corporation even though credit will not be provided.

CUSTOMER CLAIMS PROCESS (DIRECT CUSTOMERS)

- Manufacturer will accept Rare Blood Disorder Products return for credit due to (1) Damage during shipping, and (2) Shipping Errors, if the claims process is followed.
- If damage, shortage or overage is visible at the time of unloading and receipt of product, Customer must: (1) accept and physically receive all product, (2) sign and notate Bill of Lading with description of visible damage, (3) take photos of visible damage, (4) email the invoice number or order number in question and any applicable photos to customercare.US@sanofi.com. Photos of the damage must be submitted with the claim for credit.
- Visible damage must be reported within 10 business days of receipt and acceptance of product.
- Concealed damage, overage and shortage claims must be reported within 30 business days of receipt and acceptance of product.
- Sanofi reserves the right to deny the credit if the claim is not reported directly to Customer Care team at customercare.US@sanofi.com.
- Where loss, shortage, breakage, leakage, or other damage has occurred in transit, Customer agrees to cooperate fully with Manufacturer to establish a claim against the transportation company.
- Request for credit submitted without appropriate documentation may be denied.
- As the product is the property of Customer, Customer is responsible for paying Manufacturer in accordance with the invoice regardless of when credit is issued.
- Credits for damage and shortage claims will be issued at the original invoice price. Prompt pay discount and/or other discounts, if applicable, will be deducted from the credit amount.

Rare Blood Disorders Returned Goods Policy and Trade Terms

Rare Blood Disorders Customer Support phone: 855-489-3228
Customer Support email: Blood-DisordersCS@sanofi.com
Credits, Returns & Claims email: customercare.US@sanofi.com
Sanofi U.S. Trade Customer Support website: https://www.sanofi.us/en/contact-us

These Terms govern the sale of products listed on Exhibit A directly from Genzyme Corporation or Bioverativ U.S. LLC (referred to collectively as "Manufacturer"). These Terms take precedence over Customer's additional or different terms, to which Manufacturer hereby gives notice of objection. Manufacturer's acceptance of Customer's order, commencement of performance, or delivery of products will not constitute acceptance of Customer's additional or different terms.

Part B: Terms and Sales Conditions

PRICES AND ORDERS (DIRECT CUSTOMERS)

- All orders are subject to acceptance by Manufacturer.
- Orders will be invoiced at the price in effect on the date and time the order is accepted.
- Customer agrees orders with prices other than those in effect on the date and time of Manufacturer's acceptance will be changed by Manufacturer, without notice.
- All prices are subject to change without notice.
- It is Customer's sole responsibility to update all pricing schedules and Customer contracts administered by Customer, consistent with any price change made by Manufacturer. Pricing must be included on order.
- All orders must meet the established minimum/multiple order quantities.
- Manufacturer, at its sole discretion, reserves the right to reject orders, to limit or allocate order quantities, to defer orders or line items, to backorder orders or line items, or to cancel orders or line items.

TERMS OF SALES (DIRECT CUSTOMERS)

- Payment terms are clearly stated on Manufacturer invoices.
- Late payment may result in a change of credit terms at Manufacturer's sole discretion.
- The amount due must be paid pursuant to the terms herein and on the invoice, regardless of if, or when, Customer receives insurance reimbursement.
- Customer must not deduct unauthorized amounts from payment due.

SHIPMENTS (DIRECT CUSTOMERS)

- All orders will be shipped prepaid, with title and risk of loss for the products passing to Customer upon delivery of the products by Manufacturer carrier to the Customer's facility.
- Manufacturer will pay standard transportation charges and insurance on all orders. However, if Customer requests expedited transportation, special transportation, carrier sorting, or routing, Manufacturer may require Customer to bear the costs of such special handling.

BACKORDERS

- In the event Manufacturer experiences a backorder on any of its products which is expected to persist for longer than 30 calendar days, Manufacturer will reject all orders upon receipt and will require Customer to reorder product when it becomes available. In the event a backorder has been in effect for 30 calendar days, Manufacturer will cancel all orders it has outstanding and require the Customer to reorder the product when supply becomes available.

Rare Blood Disorders Returned Goods Policy and Trade Terms

Rare Blood Disorders Customer Support phone: 855-489-3228
Customer Support email: Blood-DisordersCS@sanofi.com
Credits, Returns & Claims email: customercare.US@sanofi.com
Sanofi U.S. Trade Customer Support website: https://www.sanofi.us/en/contact-us

CUSTOMER DISPUTES (DIRECT AND INDIRECT CUSTOMERS)

- Any disputes involving pricing, discounts, credits, returns, or accounts receivable issues must be reported to Manufacturer in writing within 10 business days from the date of issuance by Manufacturer of the disputed invoice or credit. If the reported dispute is not resolved after one year, no credits adjustments will be issued.

STORAGE AND HANDLING OF MANUFACTURER PRODUCTS (DIRECT AND INDIRECT CUSTOMERS)

- Customers taking possession of Manufacturer products are fully responsible for complying with all applicable federal, state, and local laws and regulations related to storage, handling, and distribution of such products. Customers are also fully responsible for complying with Manufacturer product labeling and instructions as well as all storage, handling, and distribution requirements of product. Customers shall provide products only to healthcare providers duly licensed and authorized to distribute, prescribe, dispense, or administer product.

WARRANTY (DIRECT CUSTOMERS)

- Manufacturer warranty is limited to the identity and the quality of ingredients used in the products at the time they are manufactured, and in the care and skill exercised in their manufacture. **MANUFACTURER DOES NOT MAKE ANY WARRANTIES, EXPRESS OR IMPLIED, OF ANY KIND, INCLUDING WARRANTIES AS TO THE MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT TO THE PRODUCTS, OR CONCERNING INDICATIONS AND CONTRAINDICATIONS, DOSAGES USED, METHOD OF ADMINISTRATION OR CONDITIONS OF USE.** A qualified healthcare provider should decide the indications or contraindications of any of products, as well as the suggested dose, frequency, or method of administration, after proper diagnosis.

CUSTOMER SUPPORT

- Customer support inquiries may be directed by phone or email.

  Phone: 855-489-3228

  Customer Support email: Blood-DisordersCS@sanofi.com
  *For general inquiries and orders

  Credits, Returns & Claims email: customercare.US@sanofi.com

  SanofiShoppe web portal: https://www.sanofishoppe.com
  *For Alprolix, Altuviiio, and Eloctate

  Sanofi U.S. Trade Customer Support website: https://www.sanofi.us/en/contact-us

Rare Blood Disorders Returned Goods Policy and Trade Terms

Rare Blood Disorders Customer Support phone: 855-489-3228
Sanofi HemAssist Patient Support phone: 1-833-723-5463
Customer Support email: Blood-DisordersCS@sanofi.com
Credits, Returns & Claims email: customercare.US@sanofi.com
Sanofi U.S. Trade Customer Support website: https://www.sanofi.us/en/contact-us

Sanofi U.S. Factor Replacement Program Policy and Terms are applicable to all hemophilia treatment centers who purchase factor products directly, from Sanofi-Aventis U.S. LLC and Bioverativ US LLC (together "Sanofi U.S.").

Part C: Sanofi US Factor Retro PAP (Patient Assistance Program) Replacement Program Policy for HTC (Hemophilia Treatment Centers)

RETURN ELIGIBILITY PROGRAM

- Sanofi U.S. will replace factor products after hemophilia centers dispense product to PAP eligible patients.
- PAP replacement is available for new or existing patients who qualify for PAP (e.g. uninsured or underinsured), where the HTC would provide commercial inventory from their shelf. A completed replacement purchase order form, enrollment form, and the drug dispense log are required to be submitted to the HemAssist Sanofi Support program within 2 business days.
- Requests to replace product without a completed replacement purchase order form, enrollment form, and drug dispense log will not be approved.
- PAP replacement product will be shipped to the original entity that ordered directly from Sanofi. Changes or modifications to shipping entity will not be granted.

PROCESS TO REQUEST REPLACEMENT PRODUCT

- HTC will email completed replacement purchase order form,enrollment form, and drug dispense log to HemAssist Sanofi Support.
- HemAssist case manager will screen patient for PAP eligibility.
- Case manager will email replacement purchase order form request to Sanofi Customer Support email Blood-DisordersCS@Sanofi.com, and include Patient ID/PO number, HTC Account number, Product Qty, Product Name & Strength, HTC facility name, HTC facility contact name, and HTC facility phone number.

On semi-annual basis, Sanofi will reconcile cases where actual dispensed potency is not available for replacement.

SUBMIT SHIPPING CLAIMS

- Shipping claims such as damage, overage, and shortage must be reported to Sanofi within 10 business days of Product receipt. Please email CustomerCare.US@sanofi.com with specific information including pictures of the Product impacted. Sanofi U.S. will evaluate the claim and determine next steps for claims processing.

Rare Blood Disorders Returned Goods Policy and Trade Terms

Rare Blood Disorders Customer Support phone: 855-489-3228
Sanofi HemAssist Patient Support phone: 1-833-723-5463
Customer Support email: Blood-DisordersCS@sanofi.com
Credits, Returns & Claims email: customercare.US@sanofi.com
Sanofi U.S. Trade Customer Support website: https://www.sanofi.us/en/contact-us

Sanofi U.S. Factor Replacement Program Policy and Terms are applicable to all hemophilia treatment centers who purchase factor products directly, from Sanofi-Aventis U.S. LLC and Bioverativ US LLC (together "Sanofi U.S.").

Part D: Sanofi US Altuviiio Accelerated Free Trial Program Policy for HTC (Hemophilia Treatment Centers)

RETURN ELIGIBILITY PROGRAM

- Sanofi U.S. will replace Altuviiio in compliance with the Accelerated Free Trial Program for Altuviiio.
- The Accelerated Free Trial Program for Altuviiio provides eligible patients with an initial dose of Altuviiio for Prophylaxis or On-demand patients at no cost, initiated by their healthcare provider (HCP). The product is dispensed from HTC's commercial inventory and replaced by Sanofi upon verification. This program is for HTCs that have onsite dispensing capabilities.
- Remaining three (3) additional doses will be provided for Prophylaxis patients or one (1) additional dose for On-demand patients by Free Goods Pharmacy upon HCP request.
- A completed replacement purchase order form, enrollment form, and the drug dispense log are required to be submitted to the HemAssist Sanofi Support program within 2 business days.
- Requests to replace product without a completed replacement purchase order form, enrollment form, and drug dispense log will not be approved.
- Replacement product will be shipped to the original entity that ordered directly from Sanofi. Changes or modifications to shipping entity will not be granted.

PROCESS TO REQUEST REPLACEMENT PRODUCT

- HTC will email completed replacement purchase order form, enrollment form, and drug dispense log to HemAssist Sanofi Support.
- HemAssist case manager will screen patient for free trial eligibility.
- Case manager will email replacement purchase order form request to Sanofi Customer Support email Blood-DisordersCS@Sanofi.com, and include Patient ID/PO number, HTC Account number, Product Qty, Product Name & Strength, HTC facility name, HTC facility contact name, and HTC facility phone number.
- On semi-annual basis, Sanofi will reconcile cases where actual dispensed potency is not available for replacement.

SUBMIT SHIPPING CLAIMS

- Shipping claims such as damage, overage, and shortage must be reported to Sanofi within 10 business days of Product receipt. Please email CustomerCare.US@sanofi.com with specific information including pictures of the Product impacted. Sanofi U.S. will evaluate the claim and determine next steps for claims processing.

Exhibit A: Products Included

Product	National Drug Code (NDC)
ALPROLIX 250 IU	71104-0966-01
ALPROLIX 500 IU	71104-0911-01
ALPROLIX 1000 IU	71104-0922-01
ALPROLIX 2000 IU	71104-0933-01
ALPROLIX 3000 IU	71104-0944-01
ALPROLIX 4000 IU	71104-0977-01
ALTUVIIIO 250 IU	71104-978-01
ALTUVIIIO 500 IU	71104-979-01
ALTUVIIIO 1000 IU	71104-981-01
ALTUVIIIO 2000 IU	71104-982-01
ALTUVIIIO 3000 IU	71104-983-01
ALTUVIIIO 4000 IU	71104-984-01
ELOCTATE 250 IU	71104-0801-01
ELOCTATE 500 IU	71104-0802-01
ELOCTATE 750 IU	71104-0803-01
ELOCTATE 1000 IU	71104-0804-01
ELOCTATE 1500 IU	71104-0805-01
ELOCTATE 2000 IU	71104-0806-01
ELOCTATE 3000 IU	71104-0807-01
ELOCTATE 4000 IU	71104-0808-01
ELOCTATE 5000 IU	71104-0809-01
ELOCTATE 6000 IU	71104-0810-01
QFITLIA 20MG/0.2ML INJPO VL1 US	58468-0347-1
QFITLIA 50MG/0.5ML INJ AI1 US	58468-0348-1
WAYRILZ 400MG Tablet - 56 Tablets (each dose pack)	58468-0251-05
WAYRILZ 400MG Tablet - 60 Tablets/Bottle	58468-0251-06