

The **Essure FlexPay Plan** Frequently Asked Questions

How much will my payments be? You can estimate your monthly payments by dividing the total amount of your loan(s) by 12.

Can I use the maximum loan amount of \$2,000 for the Essure procedure only? Yes, however, Conceptus would not be able to loan you additional funds for your Essure Confirmation Test.

How will I pay off my loan? You can make payments through automatic credit card deductions on a monthly basis or Conceptus will invoice you. If you choose to pay off your loan early, there is no prepayment penalty.

Can I use the loan to help meet my deductible? Yes, the total amount will be applied to your deductible.

Does Conceptus work directly with my insurance company or my doctor's office? You arrange to obtain your loan directly with Conceptus. Your doctor or insurance company will provide you with the receipts for your out-of-pocket costs and Conceptus will issue a check to you for the exact amount.

Can I take out a loan amount greater than my out-of-pocket costs? No, Conceptus can only issue loans in the exact amount of your out-of-pocket costs from \$300-\$2,000 with the total amount for both your Essure procedure and Essure Confirmation Test not to exceed \$2,000.

After I get my loan for the Essure procedure, how do I arrange to get my loan for my Essure Confirmation Test? The fast and simple process is the same. Call toll-free (855) 353-9729 between 8:00am and 5:00pm Pacific Standard Time.

The **New** Essure® **FlexPay™ Plan**

Payment assistance for
BOTH Essure **and** the
Essure Confirmation Test.

Conceptus®, the makers of Essure, wants to help you cover your **out-of-pocket** costs for the Essure procedure and the Essure Confirmation Test. With the new **Essure FlexPay Plan**, you can schedule your procedure and confirmation test without delay, regardless of your insurance coverage and amount of deductible—with no interest, no banks and no finance charges!

Qualifying can be as easy as one simple, hassle-free phone call.

**CALL TOLL FREE
(855) 353-9729 TODAY!**

essure® Conceptus® Inc.

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TEL: (855) 353-9729 | FAX: (855) 964-1926
www.essureflexpay.com | www.essure.com

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essure®

Call toll free (855) 353-9729
www.essureflexpay.com

The **Essure FlexPay Plan** offers payment assistance for your Essure procedure and confirmation test. It's quick and easy to apply for credit, and after your procedures, you receive your loan directly from Conceptus.

- **Call toll free**
(855) 353-9729
to qualify in minutes*
- **Interest free loans** for both procedures from \$300 up to a total of \$2,000
- **Loans payable over 12 months** with no prepayment penalty
- **No finance charges** or hidden fees
- **Fast, simple application** process by phone or fax

*100% of our applications receive a decision in ten minutes or less

Get approved today with our “no hassle” process

- 1 Apply by phone from your doctor's office or from home by calling toll-free (855) 353-9729. If you have any concerns about your credit, a co-applicant may help you qualify.
- 2 Ask your doctor or insurance company for an estimate of your out-of-pocket costs.
- 3 Ask your doctor whether payment will be required on the day of your procedures or if you will be billed.
- 4 Schedule your procedures knowing you now have assistance for your out-of-pocket costs.

The day of your Essure procedure and day of your confirmation test

- 1 If your doctor requires that you pay your out-of-pocket costs up front, make arrangements to pay by credit card or other means.
- 2 Obtain a receipt for your out-of-pocket costs. **OR** wait to receive your bill.

After your Essure procedure and after your confirmation test

- 1 As soon as possible, submit your proof of payment to Conceptus for the exact amount of your out-of-pocket costs.
- 2 Conceptus will send you a loan document to sign and return within 10 business days or less.
- 3 Conceptus will send you a check for your loan amounts (one for the Essure procedure, and one after your Essure Confirmation Test).
- 4 You'll have up to 12 months to repay each loan. Convenient monthly payments can be automatically deducted from your credit card or made by check.

Apply for the **Essure FlexPay Plan** today by calling toll-free (855) 353-9729 between 8:00am and 5:00pm Pacific Standard Time.

Essure FlexPay™ Plan Credit Application

INTEREST-FREE LOAN TO BE REPAYED OVER 12 MONTHS (650+ CREDIT SCORE REQUIRED)

ESTIMATED LOAN AMOUNT (\$300 TO \$2,000, NOT TO EXCEED THE OUT-OF-POCKET AMOUNT FOR YOUR ESSURE® PROCEDURE AND YOUR ESSURE CONFIRMATION TEST): \$ _____

APPLICANT

PLEASE COMPLETE ALL FIELDS - INCOMPLETE APPLICATION WILL DELAY PROCESS. (PLEASE PRINT)

First Name	MI	Last Name	Marital Status <input type="checkbox"/> Married (please add spouse as co-applicant - <i>optional</i>) <input type="checkbox"/> Unmarried (single, divorced and widowed)	
Date of Birth	Social Security No.		Email Address	
Home Phone () ()	Work Phone () ()	Ext.	Cell Phone () ()	
Present Address	City	State	Zip	Time at Residence Yrs Mos
Monthly Rent/Mortgage \$	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other	Driver's License #	State of Issuance	Expiration Date
Present Employer (If Retired, write RETIRED)	Occupation or Job Title Now		Verifiable Gross Salary \$	<input type="checkbox"/> Mo <input type="checkbox"/> Yr
Employer Address	City	State	Zip	Time at Job - If Retired, How Long? Yrs Mos

*Alimony, child support or separate maintenance income need not be revealed if you do not wish it considered as a basis for repayment.

CO-APPLICANT

PLEASE COMPLETE ALL FIELDS - INCOMPLETE APPLICATION WILL DELAY PROCESS. (PLEASE PRINT)

First Name	MI	Last Name	Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (single, divorced and widowed)	
Date of Birth	Social Security No.		Email Address	
Home Phone () ()	Work Phone () ()	Ext.	Cell Phone () ()	
Present Address	City	State	Zip	Time at Residence Yrs Mos
Monthly Rent/Mortgage \$	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other	Driver's License #	State of Issuance	Expiration Date
Present Employer (If Retired, write RETIRED)	Occupation or Job Title Now		Verifiable Gross Salary \$	<input type="checkbox"/> Mo <input type="checkbox"/> Yr
Employer Address	City	State	Zip	Time at Job - If Retired, How Long? Yrs Mos

*Alimony, child support or separate maintenance income need not be revealed if you do not wish it considered as a basis for repayment.

ESSURE PROCEDURE PROVIDER

PLEASE PROVIDE THE NAME OF YOUR PROVIDER WHERE YOU WILL HAVE YOUR ESSURE PROCEDURE PERFORMED. (PLEASE PRINT)

Name of Physician	Physician's Phone () ()	
Hospital of Office Location Where You Will Have Your Essure Procedure Performed	Name and Phone # for Contact Person Who Will Verify Your Insurance Coverage	
Date of Essure Procedure	Total Cost of Procedure	Your Out-of-Pocket Cost

ESSURE CONFIRMATION TEST (HSG) PROVIDER

PLEASE PROVIDE THE NAME OF YOUR PROVIDER WHERE YOU WILL HAVE YOUR ESSURE CONFIRMATION TEST PERFORMED. (PLEASE PRINT)

Name of Physician	Physician's Phone () ()	
Location	Name and Phone # for Contact Person Who Will Verify Your Insurance Coverage	
Date of Essure Confirmation Test	Total Cost of Procedure	Your Out-of-Pocket Cost

*By providing your email address, you consent to receive electronic information such as notices of credit decisions, monthly billing statements and collection notices. You also acknowledge that we will use all contact information provided to contact you regarding your application, loan offer, account status or future offers. We may utilize electronic, mobile, SMS, traditional methods or any other means available. **This credit application is valid for 180 days. If you do not have your Essure procedure and Essure Confirmation Test within 180 days, please call us to verify your credit status.** To help the government fight the funding of terrorism and money-laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. **AUTHORIZATION:** I certify that the above information stated in this application is true and correct and a complete statement of my financial condition. I understand that this application will be kept whether or not it is approved. You are authorized to check my credit card and employment history to answer questions about your credit experience with me and to disclose credit information to third-party financial institutions for the purpose of obtaining credit information. I further understand that my Essure FlexPay Plan by Conceptus, Inc. application is being submitted to Conceptus, Inc., the makers of Essure, for the sole purpose of financing the Essure procedure and confirmation test. I authorize Conceptus, Inc. to contact my doctor's office where my Essure procedure and confirmation test will be performed to verify the amount of financing needed for my Essure procedure and confirmation test.

Applicant Signature	Date	Co-Applicant Signature	Date
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Please fax your completed application to (855) 964-1926 or call Conceptus at (855) 353-9729 to apply.
Call (855) 353-9729 or visit www.essureflexpay.com for more information.