## **Terms and Conditions of Sale**

**PAYMENT** 

Contract terms prevail.

**TERMS:** 

In the absence of a contract, terms are as follows:

(a) 2% 34, net 35 for customers that submit payment via EFT (Electronic Funds Transfer)

(b) 2% 30 days, net 31 for customers that do not submit payment via EFT

For all other customers, terms are net 30 days.

**REMITTANCE ADDRESS:** 

P.O. Box 21451, New York, NY 10087-1451

**ORDERS:** 

Orders may be placed through Customer Service via:

Email: NovoNordiskCustomerService@NovoNordisk.com

**MINIMUM** 

The following order requirements must apply for all orders submitted:

**ORDER:** 

(a) Order quantities to reflect case quantity multiples.

(b) Unit of measure to reflect 'ea'\_eaches.

**SHIPPING:** 

All orders will be shipped with prepaid transportation charges.

**SHIPMENT DISCREPANCIES:**  All shipment discrepancies, including, without limitation, products lost or damaged in transit, must be reported to Customer Service within 2 business days of shipment receipt. Discrepancies not reported directly to Customer Service within 2 business days of shipment receipt will not be considered for reimbursement, if applicable.

**RESTRICTIONS** ON SALE:

Novo Nordisk Inc. reserves the right to ship a lesser quantity than ordered on purchases when deemed necessary by the company. For example, during any specific month, when a customer's purchases exceed 1.5 times an average month's purchases as determined by established purchase patterns, this policy may be applied at the discretion of Novo Nordisk.

Products purchased from Novo Nordisk Inc. are for use in the United States only and may not be exported.

**INQUIRIES:** 

Inquiries can be made to Novo Nordisk Inc., by contacting Customer Service via:

Phone: 800-643-NOVO (6686)

Email: NovoNordiskCustomerService@NovoNordisk.com

Web: www.novonordisk-us.com/trading-partners (paste link into your Chrome browser)

**COMPLIANCE** WITH LAWS: In placing an order for Novo Nordisk products, purchaser represents and warrants that it is aware of its obligations under applicable federal and state laws and regulations and shall comply with all such laws and regulations, including the federal Drug Supply Chain Security Act ("DSCSA"). Purchaser represents and warrants that it is "authorized" under the DSCSA and has obtained and maintains the necessary registrations, licenses and permits related to the manufacture, distribution or dispensing of pharmaceutical products. Purchaser shall immediately notify Novo Nordisk in the event of any adverse action related to its compliance with federal or state requirements under the DSCSA or otherwise.

It is your organization's obligation to report or otherwise provide information on the prices offerred hereunder to reimbursing entities (including, without limitation, Medicare and Medicaid) in accordance with applicable laws and regulations, including without limitation 42 CFR Sec. 1001.952(h). You must accurately report the value of any discounts reflected herein, as well as discounts that have been contractually agreed upon but are not reflected herein (e.g., conditional post-sale rebates). If the value of such discounts are not able to be calculated at the time of sale, we will provide you with documentation identifying such discounts when a calculation can be made.

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