

Methodological note (12 June 2026 – v1)

As a pharmaceutical company, SERVIER works in collaboration with various stakeholders, including healthcare professionals, healthcare organisations and patient organisations, to improve health and quality of life. Healthcare professionals and organisations provide the pharmaceutical industry with valuable, independent and specialised expertise derived from their clinical and scientific experience. They should receive fair remuneration for the legitimate expertise and services they provide to the industry.

In full alignment with the objectives of the EFPIA Code of Practice, SERVIER views transparency reports as an opportunity to demonstrate its commitment to applying, complying with and enforcing the highest ethical standards.

The purpose of this document is to provide all the methodological information relevant to the interpretation of the information disclosed by SERVIER in SPAIN.

1. Definitions

1.1. Recipients of transfers of value

1.1.1. Healthcare professionals

The following definition of healthcare professionals is set out in the EFPIA Code of Good Practice:

"Any natural person belonging to the medical, dental, pharmaceutical or nursing professions, or any other person who, in the course of their professional activity, may prescribe, purchase, supply, recommend or administer a medicinal product, and whose principal practice, principal professional address or place of incorporation is in Europe.

For the avoidance of doubt, the definition of HCP includes: (i) any official or employee of a government, agency or other organisation (whether in the public or private sector) who may prescribe, purchase, supply or administer medicinal products and (ii) any employee of a Member Company whose principal occupation is that of a practising HCP, but excludes (x) all other employees of a Member Company and (y) a wholesaler or distributor of medicines."

This definition allows us to identify the following professionals with whom our company interacts:

- Doctors,
- Pharmacists,
- Nurses.

Note: the term "doctor" refers in this context to a professional qualified to practise medicine.

Unless they are no longer registered with their professional body, transfers of value from retired healthcare professionals will be disclosed.

1.1.2. Healthcare organisations

The following definition of healthcare organisations is set out in the EFPIA Code of Practice:

"Any legal entity (i) that is a healthcare, medical or scientific association or organisation (regardless of its legal or organisational form), such as a hospital, a clinic, a foundation, a

university or other educational institution, or a scientific society (excluding patient organisations falling within the scope of the EFPIA Code) whose registered office, place of incorporation or principal place of business is in Europe, or (ii) through which one or more healthcare professionals provide services."

This definition allows us to identify the following organisations with which our Company interacts:

- Hospitals,
- Healthcare institutions or clinics,
- Medical practices,
- Clinical research organisations or equivalent service providers,
- Preclinical research service providers
- Universities,
- Medical foundations and charities,
- Medical or scientific societies
- Medical training companies
- Associations of healthcare professionals

1.1.3. Patient organisations (POs)

The EFPIA Code of Practice provides the following definition of patient organisations:

"non-profit organisations (including the umbrella organisations to which they belong), composed primarily of patients and/or carers, which represent and/or support the needs of patients and/or carers"

1.1.4. Professional Congress Organisers (PCOs)

The EFPIA Code of Practice provides the following definition of a PCO:

"a company/individual specialising in the organisation and management of congresses, conferences, seminars and similar events (all of which are considered events). Commercial companies engaged in the organisation of travel (travel agencies) or accommodation (hotels, hotel banquets, etc.) are not considered PCOs".

1.2. Types of transfers of value to be reported

1.2.1. Transfers of value to healthcare professionals (HCPs)

The transfers of value reported by our company consist of:

- Registration fees,
- Travel and accommodation expenses,
- Fees for services rendered,
- Related expenses agreed in service or consultancy contracts.

⇒ When provided, paid or reimbursed to Healthcare Professionals or for their benefit, whether directly or indirectly.

1.2.2. Transfers of value to healthcare organisations

Transfers of value reported by our company consist of:

- Donations and grants,
- Registration fees,
- Sponsorship agreements,
- Travel and accommodation expenses,

- Fees for services rendered,
 - Expenses agreed in service or consultancy contracts.
- ⇒ Where provided, paid or reimbursed to, or for the benefit of, Healthcare Organisations, whether directly or indirectly.

1.2.3. Transfers of value related to research and development activities

According to the EFPIA Code of Practice, Research and Development activities are those related to the planning or conduct of:

- Non-clinical (laboratory) studies,
- Clinical trials
- Non-interventional studies of a prospective nature involving the collection of patient data by or on behalf of individual healthcare professionals or groups of them specifically for the study.

All non-interventional studies that do not fall within the scope of 'prospective studies' must be disclosed by name. As such, retrospective studies will be disclosed under the 'consultancy/fees for services' category of the disclosure template. Where it is not possible to distinguish between prospective and retrospective non-interventional studies, all NISs must be disclosed individually.

1.2.4. Transfers of value relating to patient organisations

The Transfers of Value disclosed by our Company consist of:

- Financial support
- Significant non-financial support
- Contracted services

Where these are provided, paid or reimbursed to, or for the benefit of, Patient Organisations, whether directly or indirectly. Transfers of value provided to Patient Organisations are disclosed by name, even where they relate to Research and Development activities.

1.2.5. Transfers of value relating to Professional Conference Organisers (PCOs)

Transfers of value reported by our company consist of contributions towards costs associated with events organised through the PCO, such as:

- Registration fees
- Travel and accommodation
- Speaker fees
- Sponsorship agreements with healthcare organisations (HCOs) or with third parties appointed by an HCO to manage an event.

2. Scope of disclosure

2.1. Products covered

All Transfers of Value relating to activities connected with our Company's pharmaceutical product portfolio, regardless of their status (over-the-counter or prescription medicines), are included in the disclosure.

2.2. Company concerned

The information disclosed by our company in this country is provided on behalf of the Servier Group.

Servier is a group of companies with subsidiaries in other countries that may engage in interactions with Healthcare Professionals, Healthcare Organisations, Professional Conference Organisers or Patient Organisations.

A Group-wide process is in place to ensure that the local disclosure includes all transfers of value provided by Servier Group companies, whether established locally or in foreign countries, during the previous calendar year (from 1 January to 31 December).

2.3. Excluded transfers of value

Transfers of value falling into the following categories or made in connection with the following activities are not included in the disclosed information:

- Medical devices,
- Food and drink,
- Travel expenses within the threshold applicable to food and drink,
- Medical samples,
- Commercial activities that form part of the ordinary course of buying and selling medicines,
- Or any Transfer of Value that falls outside the scope of reporting, as defined in the EFPIA Code of Practice.

2.4. Date of Transfers of Value

As a general rule, the date to be used for the declaration is the date on which the financial benefit accrued to or for the benefit of the recipient.

Exception: where a transfer of value is provided in connection with attendance at an event, the date used for disclosure purposes shall be the date of the event.

2.5. Direct Transfers of Value

Disclosure includes both direct and indirect transfers of value provided to recipients or for their benefit. In this context, direct transfers of value are provided directly to the recipient by our company.

2.6. Indirect Transfers of Value

Indirect Transfers of Value are provided to the recipient via a third party. In this situation, our partners are contractually obliged to share all information relating to Transfers of Value with our company in order to enable the disclosure to be prepared appropriately.

Contributions made to Events via PCOs (organised on their own initiative or at the request of an SO, which would therefore be the direct recipient of the Transfer of Value) must be considered an Indirect Transfer of Value and declared individually. Transfers of Value via the PCO are declared in the name of the beneficiary SO or SP via the PCO. The total value of the Transfer of Value provided via the PCO shall not be considered a benefit (in cash or in kind) for the SO, as the PCO may retain a portion of this amount as a 'service fee'.

2.7. Non-monetary transfers of value

- Donations to POs or POs may be either monetary or in kind.
- In the case of significant non-financial support to patient organisations (POs) to which no significant monetary value can be assigned, the description must detail the non-monetary benefit received by the patient organisation

2.8. Transfers of value in the event of partial attendance or cancellation and reimbursement

In the event of cancellation of participation or non-attendance by the HCP/SO, the actual costs incurred by the cancellation or non-attendance shall be disclosed on behalf of the intended recipient.

Where cancellation is due to force majeure or by the pharmaceutical company and incurs an associated cost, there shall be no disclosure of a transfer of value.

2.9. Cross-border activities

The Servier Group makes every effort to identify and report all transfers of value to HCPs, HCOs and HPO, provided by Group companies, whether based locally or in other countries.

Transfers of value initiated by foreign Group companies are recorded for disclosure in the country where the recipient has their physical address or head office, where applicable.

2.10. Research and Development

All types of Transfers of Value – as identified in 1.2.1. and 1.2.2. – provided to Healthcare Professionals or Healthcare Organisations in connection with Research and Development activities are disclosed on an aggregated basis. For Transfers of Value provided to Patient Organisations in connection with Research and Development activities, see section 1.2.4.

2.11. Voluntary Disclosure

Not applicable.

3. Specific considerations

3.1. Unique Country Identifier (UCI)

The assignment of a unique country identifier is intended to facilitate the identification of recipients at national level and to avoid confusion where several recipients have the same name.

This code is optional in accordance with the EFPIA Code of Practice.

In our country, the UCI corresponds to: the National Identity Document (DNI).

3.2. Self-employed healthcare professionals

For disclosure purposes, self-employed healthcare professionals are considered healthcare professionals and are reported as such (individual disclosure).

3.3. Multi-year agreements

Multi-year agreements refer to contracts with Healthcare Professionals or Healthcare Organisations that generate Transfers of Value over a period exceeding twelve months.

This type of agreement has no impact on disclosure: only the date of each Transfer of Value, as a stand-alone transaction, is taken into account when preparing the disclosure.

3.4. Country-specific particularities

Not applicable.

3.5. Quality controls

Prior to reporting, our processes aim to ensure that transfers of value made to healthcare professionals, healthcare organisations and public bodies are collected and reconciled as far as possible. Additional checks on data and processes may be carried out for quality assurance purposes prior to reporting.

4. Legal basis for data protection

4.1. Obtaining consent

In the case of healthcare professionals, with regard to the processing of personal data and the free movement of such data in Spain, there is a legitimate interest on the part of companies subject to the Farmaindustria Code, recognised by the Spanish Data Protection Agency (AEPD) in its report dated 22 April 2016 (Annex I of the Farmaindustria Code), such that consent is not required for the individual publication of transfers of value to healthcare professionals. In any event, pharmaceutical companies shall inform healthcare professionals, pursuant to Law 3/2018 of 5 December on the Protection of Personal Data and the Guarantee of Digital Rights, that their data will be published in accordance with the provisions of the Farmaindustria Code.

The legal basis is legitimate interest, so consent is not required for the publication of transfers of value to healthcare professionals.

Handling the withdrawal of consent

In Spain, consent is not required for the broadcast of television programmes, so this does not apply.

Handling of requests from recipients

Recipients may make requests regarding information published by our company.

All requests will be processed in accordance with our internal procedure:

-Request from the data subject

- The PS must submit a formal written request to the following address: dataprivacy-spain@servier.com
- This request will be received and centralised by the contact person(s) (CP) assigned by Servier: i) Head of the Legal-Compliance Department, ii) Compliance Officer of the Legal-Compliance Department.
- The CP must assess the validity of the enquiry and may request further details from the PS making the request, if deemed necessary, to verify and confirm their identity.
- Subsequently, if appropriate, the necessary adjustments will be made, both to the IT system and to the disclosure on the Servier website, identifying the new disclosure with a new version number and the date of the new publication.
- A letter will be sent to the PS confirming acceptance of the enquiry/request or, in the event of rejection, the reasons for the decision.

-Request from the OS and OP

- The request must be submitted in writing and signed by the organisation's legal representative to the following address: dataprivacy-spain@servier.com
- This request will be received and centralised by the PC.
- The PC must assess the validity of the enquiry and may request further details from the OS or OP submitting the request, if it deems it necessary, to verify and confirm their identity.

- Subsequently, if appropriate, the necessary adjustments will be made, both to the IT system and to the disclosure on the Servier website, identifying the new disclosure with a new version number and the date of the new issue.

-Timeframes for responding to any request

In the case of the PS: Where data subjects exercise their rights under the law (right of access, rectification, erasure, restriction, data portability and objection) in accordance with Article 12 of the General Data Protection Regulation (GDPR), the request must be dealt with within one month of receipt. This period may be extended by a further two months if necessary, taking into account the complexity and number of requests. The Data Protection Officer (DPO) shall inform the data subject of such an extension within one month of receiving the request, stating the reasons for the delay. Where the data subject submits the request by electronic means, the information shall be provided by electronic means wherever possible, unless the data subject requests otherwise.

In the case of the OS and OP: The modification or adaptation must be carried out within one month.

Partial consents

In Spain, consent is not required for the publication of TV, so this does not apply.

4.2. Legitimate Interests

Consent from healthcare organisations is not required for disclosure, and transfers of value to them are disclosed in accordance with legitimate interests. We firmly believe that there is a legitimate public interest in better understanding the financial relationships that data subjects may have with the pharmaceutical industry, in the interests of transparency and trust in the pharmaceutical industry. The data subject has the right to object to processing based on legitimate interests. In the event of a request to object, Servier will ensure a balance is struck between the data subject's rights and freedoms and our legitimate interests.

2. Method of disclosure

2.1. Publication date

The publication date is: 26 June 2026

This date has been set in accordance with Farmaindustria's recommendation.

2.2. Reference year

The publication refers to the previous calendar year (from 1 January to 31 December).

This information will remain available online for a period of 3 years from the publication date.

2.3. Dissemination platform

The publication is made available via:

- Servier's publication page on the local website: <https://servier.es/nuestros-compromisos/transparencia/>

2.4. Language of publication

The publication is available in Spanish and English.

3. Disclosure of financial data

3.1. Publication currency

The currency used for this publication is the EURO (€)

3.2. VAT

The financial amounts indicated in the publication are expressed as follows:

- In the case of TdV transactions with OS and OP, as well as fees payable to PSs, the amounts are published as the amount paid, taking into account only the taxable amount and excluding taxes (VAT).
- For TdVs relating to registration, accommodation and travel for PSs, the full amount (including VAT) will be published.

3.3. Calculation rule

In the case of Transfers of Value involving the use of foreign currencies, the amounts are converted from the original currency to the publication currency in accordance with the Group's applicable Monthly Average Exchange Rate on the date of the Transfers of Value.