




YOU MAY PAY AS LITTLE AS \$0 FOR YOUR PRESCRIPTION OF YUPELRI*




Pay as little as \$0 for 30 days of therapy

Eligible patients can save up to \$550 per 30-day prescription up to 12 times per calendar year, with a max yearly savings of \$6,600.

RxBIN: <610524>
RxPCN: <Loyalty>
RxGRP: <50777791>
ISSUER: <(80840)>
ID: <0000000000>

Not valid for patients enrolled in federal or state healthcare programs, such as Medicare, Medicaid, and TRICARE, and not valid for uninsured patients (except for commercially insured patients without coverage for YUPELRI® (revefenacin) inhalation solution). For full terms and conditions, visit <http://www.YUPELRI.com/copay>.



To activate this card, please visit www.YUPELRI.com/savings or call 866-255-9018

How much will I have to pay?

- If you have commercial insurance, you may be eligible to pay as little as \$0 per prescription for up to 12 months.
- The YUPELRI Savings Card can provide up to \$550 savings per 30-day prescription, with a maximum savings of \$6,600 per calendar year for eligible patients.

How do I know if I'm eligible?

- You must be 18 years of age or older
- You must be a resident of the United States and its territories
- You must have commercial insurance

*Eligibility restrictions apply. See full Terms and Conditions for YUPELRI Savings Card on the next page or at www.YUPELRI.com/copay. This offer is not valid for patients enrolled in federal or state healthcare programs, such as Medicare (Part D or otherwise), Medicaid, Medigap, VA, DoD or TriCare, and not valid for uninsured patients (except for commercially insured patients without coverage for YUPELRI). This offer is void where prohibited or restricted by law. Mylan Specialty L.P. reserves the right to amend or end this program at any time without notice.

What if I have other questions?

- For additional questions about program eligibility or for activation, call the LoyaltyScript® for YUPELRI® Savings Card program at 800-657-7613 (8:00 AM-8:00 PM EST, Monday-Friday)

Activate your card today!
www.YUPELRI.com/savings
or call 866-255-9018

Need more help?

For additional information, please email or call:



customer.service@mylan.com



1-800-395-3376



YUPELRI® (REVEFENACIN) INHALATION SOLUTION SAVINGS CARD TERMS AND CONDITIONS

This Savings Card can be used to reduce the amount of your out-of-pocket expenses for YUPELRI up to a maximum of \$550 per 30-day prescription while this program remains in effect. No other purchase is necessary. This offer can be used up to a total of 12 times per calendar year with a savings cap of \$6,600 per calendar year while this program remains in effect. Valid prescription with Prescriber ID# is required. Mylan Specialty L.P. reserves the right to amend or end this program at any time without notice.

Eligibility Requirements: This Savings Card can be redeemed only by patients or patient guardians who are 18 years of age or older and who are residents of the United States and its territories. Patients must have commercial insurance. This program is not valid for uninsured patients (but may be used by commercially insured patients without coverage for YUPELRI) and patients who are covered by any state or federally funded healthcare program, including but not limited to any state pharmaceutical assistance program, Medicare (Part D or otherwise), Medicaid, Medigap, VA or DOD, or TriCare (regardless of whether YUPELRI is covered by such government program); not valid if the patient is Medicare-eligible and enrolled in an employer-sponsored health plan or prescription benefit program for retirees; and not valid if the patient's insurance plan is paying the entire cost of this prescription. This program is void outside the US and its territories or where prohibited by law, taxed, or restricted. Absent a change in Massachusetts law, this program will no longer be valid for Massachusetts residents after January 1, 2020.

This Savings Card is not health insurance. This Savings Card is not transferable, and the amount of the savings cannot exceed the patient's out-of-pocket expenses. This program cannot be combined with any other rebate/coupon, free trial, or similar offer for the specified prescription. This Savings Card is not redeemable for cash.

NOTICE: Data related to your use of this Savings Card may be collected, analyzed and shared with Mylan Specialty L.P. for market research and other purposes related to assessing coupon programs. Data shared with Mylan Specialty L.P. will be aggregated and de-identified, meaning it will be combined with data related to other savings card redemptions and will not identify you.

Patient Instructions: By using this Savings Card, you acknowledge that you currently meet the eligibility criteria and that you understand and will comply with the following additional terms and conditions:

- You have not submitted and will not submit a claim for reimbursement under any federal, state or other governmental programs for this prescription.
- Your use of the Savings Card must be consistent with the terms of any drug benefit provided by your commercial health insurer, health plan, or private third-party payer. You agree to report the use of this Savings Card to your commercial insurer if required.
- Where required, a Savings Card and prescription drug insurance card, along with a valid prescription for YUPELRI, must be presented to your pharmacist.

Pharmacist Instructions: When you accept this Savings Card, you are certifying that you have received this Savings Card from an eligible patient; you have received a valid prescription for YUPELRI for an eligible patient; you have dispensed the product as indicated; you have not submitted and will not submit a claim for reimbursement under any federal, state or other governmental programs for this prescription; and you will otherwise comply with these terms and all applicable terms and conditions. You further certify that your participation in this program is consistent with all applicable state laws and any obligations, contractual or otherwise, that you have as a pharmacy provider, and that you will report the use of this Savings Card to the patient's insurer if required.

- Submit transaction to McKesson Corporation using BIN #610524.
- For commercially insured patients, input this Savings Card information as secondary coverage and transmit using the COB segment of the NCPDP transaction. Applicable patient savings will be displayed in the transaction response.
- Acceptance of this Savings Card and your submission of claims for the YUPELRI Savings Card program are subject to the Savings Card Terms and Conditions posted at www.activatethecard.com/yupelri/#tnc.
- Acceptance of this Savings Card and your submission of claims for the YUPELRI Savings Card program are subject to the LoyaltyScript® program Terms and Conditions posted at www.mckesson.com/mprstnc.
- For questions regarding setup, claim transmission, patient eligibility or other issues, call the LoyaltyScript® for YUPELRI Savings Card program at 800-657-7613 (8:00 AM-8:00 PM EST, Monday-Friday).



The YUPELRI name and the YUPELRI logo are registered trademarks of Mylan Specialty L.P. MYLAN and the Mylan logo are registered trademarks of Mylan Inc. THERAVANCE® and the Cross/Star logo are registered trademarks of the Theravance Biopharma group of companies. LOYALTYSRIPT is a trademark of McKesson Corporation. © 2019 Mylan Specialty L.P. All rights reserved. 12/19