

Free trial offer: eligible patients may receive 30 tablets of SUNOSI for free

Take this voucher, along with a valid, 30-tablet prescription for SUNOSI, to your pharmacy to receive your free trial

BIN: 600426 PCN: 54 Group: EV15503033 ID: 09867572379 Expiration Date: 12/31/2025

Voucher instructions:

For patients:

- To redeem, present this voucher along with a valid, signed prescription at any participating retail pharmacy.
- No purchase required.
- Restrictions apply. Please see Terms and Conditions, or contact SUNOSI On My Side at 1-800-805-8621 with any questions.

For prescribers:

- Patients may receive a lifetime maximum of 30 tablets of SUNOSI (75 mg and 150 mg only) through this voucher program.
- A one-time titration between strengths (75 mg and 150 mg only) is permitted during the utilization of this voucher.
- Give this voucher and a valid, signed prescription to the patient, along with dosing instructions and the <u>Medication Guide</u> for SUNOSI. Prescriber ID# is required on the prescription.
- If you would like your patient to continue taking SUNOSI after the free trial period, please write a separate prescription.
- Restrictions apply. Please see Terms and Conditions.

For pharmacists:

- Your customer is permitted to receive a lifetime maximum of 30 tablets of SUNOSI (75 mg and 150 mg only) at no charge through this voucher program.
- Redeem only when accompanied by a valid, signed prescription for SUNOSI.
- There is no requirement for customers to purchase any product or service.
- Refills or transfers of this voucher are not allowed.
- Submit this claim to Change Healthcare. A valid Other Coverage Code (e.g., 0 or 1) is required. Reimbursement will be received from Change Healthcare.
- For any questions regarding Change Healthcare online processing, please call the Help Desk at 1-800-433-4893.
- By processing this voucher, you agree to the Terms and Conditions.

Terms and Conditions:

- Free trial offer valid for a lifetime maximum of 30 tablets of SUNOSI (75 mg and 150 mg only) per patient through this voucher program.
- A one-time titration between strengths (75 mg and 150 mg only) is permitted during the utilization of this voucher.
- You must be 18 years of age or older to redeem this voucher.
- No purchase required.
- No substitutions or refills are permitted.
- Not valid if reproduced or transferred.
- May not be combined with any free trial, coupon, rebate, discount, prescription savings card, or other offer.
- It is illegal to sell, purchase, or trade; to offer to sell, purchase, or trade; or to counterfeit this voucher. Void where prohibited by law, taxed, or restricted.
- This voucher is not health insurance.
- No claim for payment or reimbursement for product dispensed pursuant to this voucher may be submitted to any third-party payer, whether a private or government payer.
- Axsome Therapeutics reserves the right to rescind, revoke, or amend this offer at any time without notice.
- Data related to this voucher may be collected, analyzed, and shared with Axsome Therapeutics for purposes that include, but are not limited to, coverage benefits and determinations. To learn more about Axsome's privacy practices and your privacy choices, visit

axsome.com/privacy-notice.

• Expiration Date: 12/31/2025.

Eligible patients may save on future prescriptions with the SUNOSI Savings Card. Visit <u>SunosiSavings.com</u> to learn more.