



SAVE* ON ACIPHEX

*Restrictions apply.

PRINT YOUR MONTHLY SAVINGS CARD NOW!

Most commercially insured ACIPHEX patients pay just \$20 a prescription. That's up to \$55 in savings.

With the Monthly Savings Card, patients with prescription coverage and a co-pay of more than \$20 may be eligible to receive up to \$55 off their ACIPHEX prescription, after a \$20 out-of-pocket expense.

Cut out your card. Keep it in your wallet or purse.

MONTHLY SAVINGS



Most commercially insured ACIPHEX patients
pay just \$20 a prescription.

Administered by
OpusHealth

Submit this claim/information to OPUS Health: Expires 3/31/2019

BIN#: 601341

RxPCN: OHCP

Group#: OH1801011

ID#: A27100395250

The use of this card is subject to the Restrictions and Conditions of Use set forth on reverse. Benefit limited to one use per person for any 30-day period.

Restrictions: This Monthly Savings Card is **not available for individuals enrolled in Medicare, Medicaid, TRICARE, or any other state or federal healthcare program.** Monthly Savings Card is void in Massachusetts, in California for patients with prescription coverage, and where prohibited by law. Eisai Inc. reserves the right to rescind, revoke, or amend this offer without notice at any time. Additional restrictions apply.

Pharmacy Instructions:

For Patients with commercial prescription coverage: Submit the claim to the Primary Third-Party Payer first, then submit the balance due to OPUS Health as a Secondary Payer as a co-pay only billing, using Other Coverage Code Indication. The pay amount will be reduced by UP TO \$55 after a \$20 co-pay, and you will receive this in your next reimbursement from OPUS Health, plus a handling fee.

For Patients without prescription coverage: Please submit this claim to OPUS Health. A valid Other Coverage Code is required. The patient pay amount will be reduced by UP TO \$55, and you will receive this in your reimbursement, plus a handling fee.

By accepting this card, the pharmacist certifies that (i) ACIPHEX has been dispensed to an eligible patient, (ii) use of the card complies with all applicable laws and contractual or other obligations as a pharmacy provider, and (iii) you have not submitted and will not submit a claim for reimbursement under any state or federal healthcare program for this prescription.

Pharmacists' Questions: please call 1-800-364-4767

Card Holders' Questions: please call 1-800-773-0098

NO PHOTOCOPIES ACCEPTED.

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Thanks for joining the ACIPHEX Health & Savings Program.
For more information, check out aciphex.com.

Patient Instructions:

How to use your ACIPHEX Monthly Savings Card:

1. Patients with prescription coverage and a co-pay of more than \$20 are eligible to receive up to \$55 off their ACIPHEX prescription, after a \$20 out-of-pocket expense.
2. Patients without prescription coverage may receive up to \$55 off their ACIPHEX prescription.
3. Give your prescription for ACIPHEX, and ACIPHEX Monthly Savings Card, to your pharmacist. When you use this card, you are certifying that you understand and will comply with the Restrictions and Conditions of Use and are not enrolled in a state or federal healthcare program.

For more information, visit aciphex.com

*Restrictions and Conditions of Use:

- Good toward the purchase of ACIPHEX prescriptions. No substitutions permitted.
- **Not available to individuals insured by Medicare, Medicaid, TRICARE, or any similar state or federal healthcare programs.**
- Monthly Savings Card is void in Massachusetts, **in California for patients with prescription coverage, and where prohibited by law.**
- Benefit limited to one use per person for any 30-day period.
- Not valid through mail-order pharmacies.

- May not be accepted at all pharmacies.
- Not valid for ACIPHEX prescription reimbursed in full by any third-party payer.
- May not be combined with any other coupon, discount, prescription savings card, free trial, or other offer.
- Federal law prohibits the selling, purchasing, trading, or counterfeiting of this Monthly Savings Card.
- Good only in the United States. Eisai Inc. reserves the right to rescind, revoke, or amend this offer without notice at any time.
- Patients and pharmacies are responsible for disclosing to insurance carriers the redemption and value of the Card and complying with any other conditions imposed by insurance carriers or any third-party payers.
- The value of this Card is not contingent on any prior or future purchases. The Card is solely intended to provide up to \$55 off any purchase of ACIPHEX. Use of the Card for any one purchase does not obligate the patient to make future purchases of ACIPHEX or any other product.

This card is not an insurance program.

No membership fees.

Offer expires 3/31/2019

Manufactured
and
Marketed by



Woodcliff Lake, NJ 07677

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