



Here is your AKYNZEO® Savings Card

You can use this card immediately for savings on your AKYNZEO prescriptions.

AKYNZEO Capsule Savings Card

BIN: 610020 GROUP: 99992440 ID: 69399702209

Please see reverse side for eligibility criteria and maximum benefit for commercially insured patients

To Patient: AKYNZEO Capsule Savings Card provides \$50 per prescription of AKYNZEO® Capsule (netupitant/palonosetron). Present this AKYNZEO Capsule Savings Card to the pharmacist along with your prescription to participate in this program. Depending on your insurance plan, you could have additional financial responsibility for any amounts over Helsinn's maximum liability. You could have additional financial responsibility for any amounts over Helsinn's maximum liability. By using this card you are attesting that you are not enrolled in a state or federal healthcare programs, including Medicare, Medicaid, Medigap, VA, DoD or TRICARE. For questions, please call 1-848HELINSINN-U (1-844-357-4668).

To Pharmacist: For Insured Patients: Process a Coordination of Benefits (COB/split bill) claim using your patient's prescription for the PRIMARY claim. Submit a SECONDARY claim to PDM under BIN: 610020. For commercially insured patients, the card will pay up to \$50 per capsule prescription. For patients with AKYNZEO coverage under medical benefit please call 1-848HELINSINN-U (1-844-357-4668) for assistance with processing the savings card benefit.

For processing questions, please call 1-848HELINSINN-U (1-844-357-4668).

Eligibility Criteria: Good toward the purchase of AKYNZEO Capsule prescriptions. No substitutions permitted. Save this card to reuse with each prescription. Not available to patients enrolled in state or federal healthcare programs, including Medicare, Medicaid, Medigap, VA, DoD or TRICARE. Offer available to MA residents through December 31, 2019. For all other patients, this offer will expire December 31, 2019. May not be trading, or counterfeiting of this card. Such activities may result in imprisonment of 10 years, fines up to \$25,000, or both. Void outside the USA and where prohibited by law. Helsinn Therapeutics (U.S.), Inc. Reserves the right to rescind, revoke, or amend this offer at any time without notice. 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 on third-party payers. The value of this card is not contingent on any prior or future purchases. The card is solely intended to provide savings on any purchase of AKYNZEO Capsules. Use of the card for any one purchase does not obligate the patient to make future purchases of AKYNZEO or any other product.

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trialcard
US Patent No. 7,925,531

Mail-in Rebate

If your pharmacist was unable to provide this savings, you can still take advantage of this offer.

1. Complete this form with your name and address.
2. Circle the product name/number, date, your name, and amount paid on the original pharmacy receipt. Cash register receipt NOT accepted.
3. Mail this form, your pharmacy receipt, and a copy of your AKYNZEO® (netupitant/palonosetron) Capsule Savings Card to the address below. You may also want to keep a copy of all documentation for your records.

AKYNZEO Capsule Savings Card, 2250 Perimeter Park Drive, Suite 300, Morrisville, North Carolina 27560

4. If all information has been properly provided, a check will be mailed to you within 10-14 business days of our receipt of this information.

First Name	Last Name
Address	Suite/Apartment #
City	State
	ZIP
	Phone
Signature	Date

By my signature, I certify that I meet the Eligibility Criteria listed below and that I am not enrolled in a state or federal healthcare programs, including Medicare, Medicaid, Medigap, VA, DoD or TRICARE.

Eligibility Criteria: Good toward the purchase of AKYNZEO Capsule prescriptions. No substitutions permitted. Save this card to reuse with each prescription. Not available to patients enrolled in state or federal healthcare programs, including Medicare, Medicaid, Medigap, VA, DoD or TRICARE. Offer available to MA residents through December 31, 2019. For all other patients, this offer will expire December 31, 2019. 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 card. Such activities may result in imprisonment of 10 years, fines up to \$25,000, or both. Void outside the USA and where prohibited by law. Helsinn Therapeutics (U.S.), Inc. reserves the right to rescind, revoke, or amend this offer at any time without notice. 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 on third-party payers. The value of this card is not contingent on any prior or future purchases. The card is solely intended to provide savings on any purchase of AKYNZEO Capsules. Use of the card for any one purchase does not obligate the patient to make future purchases of AKYNZEO or any other product.

