

Patients Pay as Little as
\$15
per Month*

By using the RELEXXII® Savings Card*

ONCE-DAILY
Relexxii
methylphenidate HCl
EXTENDED-RELEASE TABLETS

Expires: 12-31-2025
BIN: 610600
PCN: AS
GROUP: 539
Card ID: 53900162509

SAVINGS CARD

45mg 63mg 72mg
18mg 27mg 36mg 54mg

Eligible commercially insured patients pay as little as \$15 per month*

Offer valid for all seven RELEXXII strengths

How to Use the RELEXXII® Savings Card

- 1 Present your RELEXXII® Savings Card to your pharmacist (along with your prescription if your doctor did not ePrescribe)
- 2 Tell your pharmacist you want to receive RELEXXII tablets for every prescription fill
- 3 When you pick up your prescription, check that you received RELEXXII tablets and paid as little as \$15

*Co-pay assistance is applicable to prescription coverage for eligible commercially insured patients. Offer void where prohibited. No income restrictions apply. Other restrictions may apply. For full terms and conditions, see the final page or visit relexxii.com/savings

INDICATION & IMPORTANT SAFETY INFORMATION, INCLUDING BOXED WARNING

INDICATION

RELEXXII is a central nervous system (CNS) stimulant indicated for the treatment of attention deficit hyperactivity disorder (ADHD) in adults (up to the age of 65 years) and pediatric patients 6 years of age and older.

WARNING: ABUSE, MISUSE, AND ADDICTION

See full prescribing information for complete boxed warning.

RELEXXII has a high potential for abuse and misuse, which can lead to the development of a substance use disorder, including addiction. Misuse and abuse of CNS stimulants, including RELEXXII, can result in overdose and death.

- Before prescribing RELEXXII, assess each patient's risk for abuse, misuse, and addiction.
- Educate patients and their families about these risks, proper storage of the drug, and proper disposal of any unused drug.
- Throughout treatment, reassess each patient's risk and frequently monitor for signs and symptoms of abuse, misuse, and addiction.

See next page for full ISI.

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- RELEXXII is contraindicated in patients with known hypersensitivity to methylphenidate or other components of RELEXXII.
- RELEXXII is contraindicated in patients with concurrent treatment of monoamine oxidase inhibitor (MAOI) or using MAOI within the preceding 14 days.
- Risks to Patients with Serious Cardiac Disease: Avoid use in patients with known structural cardiac abnormalities, cardiomyopathy, serious cardiac arrhythmias, coronary artery disease, or serious cardiac disease.
- Increased Blood Pressure and Heart Rate: Monitor blood pressure and pulse. Monitor all RELEXXII-treated patients for hypertension and tachycardia.
- Psychiatric Adverse Reactions: Prior to initiating RELEXXII, screen patients for risk factors for developing a manic episode. If new psychotic or manic symptoms occur, consider discontinuing RELEXXII.
- Priapism: If abnormally sustained or frequent and painful erections occur, patients should seek immediate medical attention.
- Peripheral Vasculopathy, including Raynaud's Phenomenon: Careful observation for digital changes is necessary during RELEXXII treatment. Further clinical evaluation (e.g., rheumatology referral) may be appropriate for patients who develop signs or symptoms of peripheral vasculopathy.
- Long-Term Suppression of Growth in Pediatric Patients: Closely monitor growth (height and weight) in pediatric patients. Pediatric patients not growing or gaining weight as expected may need to have their treatment interrupted.
- Gastrointestinal Obstruction: Avoid use with preexisting GI narrowing.
- Acute Angle Closure Glaucoma: RELEXXII treated patients considered at risk for acute angle closure glaucoma (e.g., patients with significant hyperopia) should be evaluated by an ophthalmologist.
- Increased Intraocular Pressure (IOP) and Glaucoma: Prescribe RELEXXII to patients with open-angle glaucoma or abnormally increased IOP only if the benefit of treatment is considered to outweigh the risk. Closely monitor patients with a history of increased IOP or open angle glaucoma.
- Motor and Verbal Tics, and Worsening of Tourette's Syndrome: Before initiating RELEXXII, assess the family history and clinically evaluate patients for tics or Tourette's syndrome. Regularly monitor patients for the emergence or worsening of tics or Tourette's syndrome. Discontinue treatment if clinically appropriate.

DRUG INTERACTIONS

- Concomitant use of Monoamine oxidase Inhibitor's (MAOIs) and CNS stimulants can cause hypertensive crisis. Potential outcomes include death, stroke, myocardial infarction, aortic dissection, ophthalmological complications, eclampsia, pulmonary edema, and renal failure. Do not administer RELEXXII concomitantly with MAOIs or within 14 days after discontinuing MAOI treatment.
- RELEXXII may decrease the effectiveness of drugs used to treat hypertension. Monitor blood pressure and adjust the dosage of the antihypertensive drug as needed.
- Concomitant use of halogenated anesthetics and RELEXXII may increase the risk of sudden blood pressure and heart rate increase during surgery. Avoid use of RELEXXII in patients being treated with anesthetics on the day of surgery.
- Combined use of methylphenidate with risperidone when there is a change in dosage of either or both medications, may increase the risk of extrapyramidal symptoms (EPS). Monitor patients on RELEXXII for signs of EPS with concomitant use of risperidone with associated changes in dosage.

You may report side effects to Vertical Pharmaceuticals, LLC at 1-800-444-5164 or to the FDA at 1-800-FDA-1088. Please visit Relexxii.com for full Prescribing Information, including Boxed Warning.

PHARMACIST:

- Submit primary claim to your patient's insurance provider for RELEXII tablets
- Submit a secondary transaction (COB) using one of the applicable Coverage Codes below:
 - 03 if primary insurance has denied coverage, or
 - 08 to reduce the patient's co-pay expense
- The secondary transaction should be submitted to AlphaScrip (BIN: 610600 , PCN: AS,) using the Group # and ID

Return this Card to your patient after dispensing the prescription.

For questions regarding the electronic processing of this Card, please call the AlphaScrip Pharmacy Help Desk at 1-877-274-3244.

RELEXII® Savings Card Terms & Conditions

By using the RELEXII® Savings Card ("Card"), you acknowledge that you currently meet the eligibility criteria and will comply with the following terms and conditions:

- The Card is not valid for prescriptions that are eligible to be reimbursed:
 - in whole or in part, by Medicaid, Medicare (including Medicare Part D), Tricare, Puerto Rico Government Health Insurance Plan, or any other federal or state-funded healthcare benefit program (collectively, "Government Programs");
 - by commercial plans or other health or pharmacy benefit programs that reimburse for the entire cost of prescription drugs
- Eligible commercially insured patients using this Card may pay as little as \$15 per month. To qualify for this offer, your out-of-pocket expense must be a minimum of \$15 per prescription. Patient, pharmacist, and prescriber agree not to seek reimbursement for all or any part of the benefit received by the patient through the Card. Both patient and pharmacist are each individually responsible for reporting receipt of coupon benefit to any insurer, health plan, or other third party who pays for or reimburses any part of the prescription filled using the Card, as required.
- This Card is not health insurance and is not intended as a substitute for health insurance.
- This Card can be used only by eligible residents in the United States and Puerto Rico and only at participating pharmacies. This offer is valid only for patients with a valid prescription for RELEXII tablets at the time the prescription is filled and dispensed by the pharmacist. Void where prohibited by law, taxed, or restricted.
- The Card is limited to one per person and is not transferable. No substitutions are permitted. It is illegal to sell, purchase, trade, or counterfeit, or offer to sell, purchase, trade, or counterfeit the Card. The Card is available for each valid prescription. No other purchase is necessary. No income restrictions apply. This offer cannot be combined with any other rebate, coupon, free trial, discount, or similar offer.
- Certain information pertaining to your use of the Card will be shared with Alora Pharmaceuticals, LLC, the sponsor of the Card, and its affiliates. The information disclosed may include the date the prescription is filled, the amount of product dispensed by the pharmacists, and the amount of your co-pay that will be paid for by using this Card. For more information, please see Privacy Policy.
- Alora Pharmaceuticals, LLC reserves the right to rescind, revoke, or amend this offer without notice. For expiration date, please refer to the Card.



Distributed by:
Vertical Pharmaceuticals, LLC
Alpharetta, GA 30005
alorpharma.com
1-800-444-5164
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Please see the Full Prescribing Information including BOXED WARNING at relexxii.com/pi or scan here



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