



OFFER IS INVALID FOR PATIENTS WHOSE PRESCRIPTION CLAIMS ARE ELIGIBLE TO BE REIMBURSED, IN WHOLE OR IN PART, BY ANY GOVERNMENT PROGRAM. TO USE THIS OFFER, PATIENTS MUST HAVE COMMERCIAL INSURANCE AND COVERAGE FOR DASATINIB.

Easy, affordable access to Dasatinib Tablets

PRESENT THIS CARD TO YOUR PHARMACIST ALONG WITH A VALID PRESCRIPTION FOR

Dasatinib Tablets

The following strengths by 11-digit NDC are allowable on this offer:

Dasatinib 20mg, 60ct	66993-0233-60
Dasatinib 50mg, 60ct	66993-0234-60
Dasatinib 70mg, 60ct	66993-0235-60
Dasatinib 80mg, 30ct	66993-0236-30
Dasatinib 100mg, 30ct	66993-0237-30
Dasatinib 140mg, 30ct	66993-0238-30

PRASCO CO-PAY CARD

PAY AS LITTLE AS

\$0

BIN#	600426
PCN#	54
GRP#	EC39907001
ID#	09947265730

Dear Patient: The Dasatinib Tablets Co-pay Card is being provided to you by Prasco, LLC to cover the portion of your Dasatinib Tablets prescription co-pay up to \$500 for Dasatinib per 30-day fill, with a maximum coverage of up to \$6,000 per year

See terms and conditions below.

- Restrictions apply. Limit one card per person per month. Refill a qualifying prescription once every 30 days.
- Commercially insured patients may pay as little as \$0 when co-pay card is applied. Maximum co-pay card savings is \$500 off the 30-day prescription cost and the patient is responsible for any costs once this limit is reached. The total savings maximum is \$6,000 per year.
- Please present this card along with your prescription to your pharmacy. Remind the pharmacist to return this card so you can reuse it for remaining qualifying refills, if applicable.
- For further information or questions, please call 1-888-302-0886.

Pharmacist Instructions for a Patient with an Eligible Third Party with Coverage for the Product:

- Submit the claim to the primary Third Party Payer first, then submit the balance due to **CHANGE HEALTHCARE** as a Secondary Payer COB [Coordination of Benefits] with patient responsibility amount and a valid Other Coverage Code, (e.g. 8). The patient will pay \$0. Reimbursement will be received from **CHANGE HEALTHCARE**.
- Valid Other Coverage Code required.
- Only commercially insured patients whose primary insurance covers Dasatinib Tablets are eligible for savings.
- 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.

Dasatinib Tablets Savings Program Terms and Conditions:

Patients must be 1 year of age or older and have primary commercial insurance coverage for Dasatinib Tablets. Cash discount cards and other non-insurance plans are invalid as primary insurance under this offer. Patient is responsible for payment of any excess co-payment if patient exceeds the cap. This offer may not be redeemed for cash. Offer is invalid in Massachusetts, California, and where prohibited by law. **Offer is invalid for (i) cash paying patients, (ii) patients without commercial drug insurance, and (iii) patients whose prescription claims for Dasatinib Tablets are eligible to be reimbursed, in whole or in part, by any governmental program, including, without limitation, Medicaid, Medicare, Medicare Part D, Medigap, DOD, VA, TRICARE/CHAMPUS, or any State Patient or Pharmaceutical Assistance Program.** Available only in the US and Puerto Rico for residents of the US and Puerto Rico. By accepting this offer, you agree that if you are required to do so under the terms of your insurance coverage for this prescription or are otherwise required to do so by law, you will notify your insurance carrier of your redemption of this card. Offer is nontransferable and cannot be combined or utilized with any other program, discount, discount card, incentive, or similar offer involving Dasatinib Tablets. It is prohibited for any person to (i) sell, purchase, or trade, (ii) offer to sell, purchase, or trade, or (iii) counterfeit this card. Prasco, LLC may terminate, rescind, revoke, or amend this offer at any time without notice. Program managed by ConnectiveRx on behalf of Prasco, LLC.

This card is not health insurance.

Please see [Full Prescribing Information and Patient Information](#).

