Xalatan®
(latanoprost ophthalmic solution) 0.005%
SAVINGS CARD

BIN#: 610020
Group#: 99992035
ID#:

YOU MAY PAY AS LITTLE AS **$0** PER 30-DAY FILL*

with a maximum savings of $125 per month and $1,500 per year

*Terms and conditions apply. See below.
This card is not health insurance and will be accepted only at participating pharmacies.

This is not an actual savings card.

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BRAND-Name Savings May Be Waiting for You!

Eligible patients who receive a XALATAN Savings Card* may find these tips helpful when picking up your XALATAN prescription.

Begin — at your doctor's office and ask if writing Dispense As Written (DAW)† is appropriate on your XALATAN prescription.

Remember — to take the XALATAN Savings Card with you to the pharmacy.

Ask — your pharmacist for the XALATAN savings if you are eligible. Remind your pharmacist that your XALATAN Savings Card does not work with other products.

Notify — the pharmacist before you finalize your purchase if you did not receive the XALATAN you were prescribed.

Don't — forget to bring your XALATAN Savings Card, if you are eligible, each time you visit the pharmacy.

If you didn't get the BRAND-name savings that come with your XALATAN Savings Card, check to make sure:
- You received brand-name XALATAN in your prescription bag. Your card only works with brand-name XALATAN
- Your XALATAN Savings Card details were entered correctly
- Your pharmacist called 1-866-562-6147 for help processing the card for this brand

XALATAN is available by prescription only in 50 mcg/mL.

*Eligibility required. Terms and conditions apply. Full terms and conditions can be found at XALATAN.com/savings-terms. This Savings Offer will be accepted only at participating pharmacies. This Savings Offer is not health insurance. No membership fees. Maximum savings cap of $1,500 per calendar year. This Savings Offer is not valid for prescriptions that are eligible to be reimbursed, in whole or in part, by Medicaid, Medicare, or other federal or state healthcare programs. This Savings Offer is not valid for prescriptions that are eligible to be reimbursed in whole by private insurance plans or other health or pharmacy benefit programs. Viatris reserves the right to revoke, rescind, or amend this Savings Offer without notice. For further information, call 1-866-562-6147, visit XALATAN.com, or write: Viatris, 1000 Mylan Boulevard, Canonsburg, PA 15317.

†Language and requirements may vary based on your state's law.

VIATRIS™