

PRINT THIS AND TAKE IT TO YOUR PHARMACY

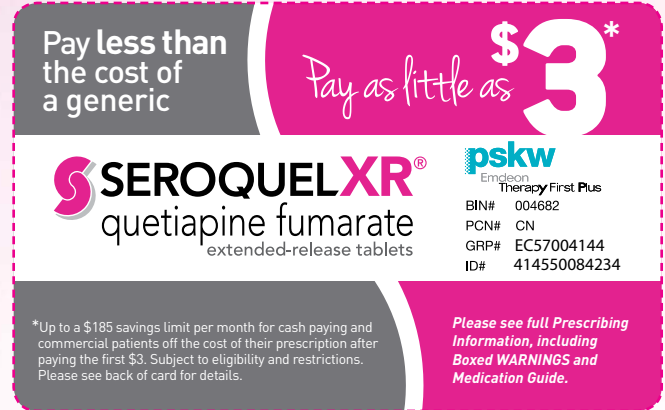
Ask for branded **SEROQUEL XR.**

Pay as little as
\$ **3**

Get branded SEROQUEL XR for **less than** the cost of a generic†

- Card is ready to use; no activation is required
- Simply present this card to your pharmacist, along with a valid prescription for branded SEROQUEL XR, and you may receive savings on your out-of-pocket costs over \$3*
 - For eligible patients, you pay the first \$3 and AstraZeneca will pay up to the next \$185 for patients with commercial insurance or if you are cash paying

†Source: Fingertip Formulary® as of 6/7/2016. Formulary Cost comparisons do not imply superiority over generics.



ELIGIBILITY

TERMS AND CONDITIONS: Offer good for eligible patients purchasing a 30-day supply of SEROQUEL XR® (quetiapine fumarate) tablets with a valid prescription. Eligible commercially insured patients will pay \$3 per 30-day supply, subject to a maximum savings of \$185 per 30-day supply. Uninsured (cash-paying) patients will receive up to \$185 in savings on out-of-pocket costs that exceed \$3 per 30-day supply. Offer not valid for prescriptions purchased under Medicaid, Medicare, or similar state or federally sponsored programs. Offer not valid for patients enrolled in a state or federally funded prescription insurance program even if patient elects to be processed as an uninsured patient. Offer valid for retail prescriptions, residents of the United States and Puerto Rico, and patients over 10 years of age only. Patient is responsible for any applicable taxes. Offer is good for 12 uses; each 30-day supply counts as 1 use. Offer is not transferable, is not insurance, is limited to one per person, and may not be combined with any other offer. Void where prohibited by law, taxed, or restricted. Patients, pharmacists, and prescribers cannot seek reimbursement from health insurance or any third party for any part of the benefit received by the patient through this offer. Offer may be changed or discontinued at any time without notice. Offer not conditioned on any past, present, or future purchase. More details on www.SeroquelXR.com. Please call 1-888-547-8054 with questions and for full eligibility details.

Pharmacist Instructions for a Patient With an Eligible Third Party: Submit the claim to the primary Third-Party Payer first, then submit the balance due to **Therapy First Plus** as a Secondary Payer COB with patient responsibility amount and a valid Other Coverage Code (**eg, 8**). The patient is responsible for the first \$3 on a 30-day supply. Reimbursement will be received from **Therapy First Plus**.

Pharmacist Instructions for a Cash-Paying Patient: Submit this claim to **Therapy First Plus**. A valid Other Coverage Code (**eg, 1**) is required. The card will cover up to \$185 per 30-day supply. Reimbursement will be received from **Therapy First Plus**.

Valid Other Coverage Code Required: For any questions regarding **Therapy First Plus** online processing, please call the Help Desk at 1-800-422-5604.

BY USING THIS CARD, YOU AND YOUR PHARMACIST UNDERSTAND AND AGREE TO COMPLY WITH THESE ELIGIBILITY REQUIREMENTS AND TERMS OF USE.

Please see full [Prescribing Information](#), including [Boxed WARNINGS](#) and [Medication Guide](#).

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SEROQUEL XR is a registered trademark of the AstraZeneca group of companies.
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