

SUTAB[®]
(sodium sulfate, magnesium sulfate, and potassium chloride)
Tablets
1.479 g/0.225 g/0.188 g

Important For SUTAB[®]:

Your patients can take this card to their pharmacy to pay as little as \$40!

Follow the steps below when sending the prescription:

- 1) Call **SUTAB** into the pharmacy. Dispense 1 kit of (24 tablets)
- 2) Provide pharmacy with **BIN, PCN, Group, Member ID** from copay card
*If E-Scribing, type the above info into “*DRUG INSTRUCTIONS*” section
- 3) If the patient’s SUTAB prescription is not covered, tell pharmacy to process this copay card with their rejection from insurance as a **Coordination of benefits (COB)** to receive the \$40 copay

***Note:** This card also reduces costs for cash-pay patients to \$40. The cash benefit was changed from \$75 to \$40 on February 18, 2021. This information may not be reflected on the copay card but will be honored when the copay card is applied. Offer subject to change. Instructions for the pharmacy are on the back of the card as shown below. Feel free to fax both sides of your card to the pharmacy or send with patient.

For any questions regarding the offer or processing, please call: 1-844-926-4140

**PAY AS LITTLE AS \$40
ON YOUR PRESCRIPTION**
Up to program maximum, which is subject to change.

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**BIN: 004682
PCN: CN
GROUP: WCSEB4101
MEMBER ID: XXXXXXXXXXXX**

Patients can take this card to their pharmacist to save on SUTAB[®] tablets. For more information please visit www.sutab.com. Terms and conditions apply, see back of offer for more details.