



Pay as little as \$30*



To redeem:

- Give this sheet and your prescription for BREXAFEMME to your pharmacist
- Or, text **“SAVE”** to **“BREXA”** and receive a mobile savings card†
- Commercial insurance patients may pay as little as \$30
- Cash-paying patients may pay as little as \$120

Have questions? We can help. Call 1-844-431-9894.

*See reverse side for Terms and Conditions.

†Message and data rates may apply. 1 message per request.
Reply “HELP” for help and “STOP” to stop.

Please see full Prescribing Information and Patient Information at BREXAFEMME.com.

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To Patients: Offer valid for eligible commercially-insured and cash-paying patients with a prescription for BREXAFEMME® (Ibrexafungerp) including a valid Prescriber ID#. If eligible, you may pay as little as \$30, and the card will pay up to the maximum benefit. If cash-paying, you may pay as little as \$120, and the card will pay up to the maximum benefit. For questions about the BREXAFEMME Savings Card, call 1-844-431-9894.

To Pharmacists: By using this offer, you certify you have not submitted a claim for reimbursement of this Rx with any federal, state, or other government program. Participation must comply with all relevant laws and regulations as a pharmacy provider, and must comply with the terms and conditions below.

Pharmacist instructions for a patient with an Eligible Third Party: Submit claim to the primary Third Party Payer first, then submit balance due to **Change Healthcare** (as a Secondary Payer; copay-only billing using valid Other Coverage Code (e.g. 8, 3)). The patient may pay as little as \$30, and the card will pay up to the maximum benefit. Reimbursement comes directly from **Change Healthcare**.

Pharmacist instructions for a cash-paying patient: Submit claim to **Change Healthcare**. Include valid Other Coverage Code (e.g. 0, 1). The card will pay up to the maximum benefit. After the offer is applied, the patient will be responsible for any remaining balance due. Reimbursement comes directly from **Change Healthcare**. For questions with processing, call the Change Healthcare help desk at 1-800-433-4893.

Terms and Conditions: Offer valid only in the United States. Offer not valid for those enrolled in Medicare, Medicaid, TRICARE or any other federal or state healthcare plan. If you are enrolled in a state or federal healthcare plan, you may not use this Savings Card (even if you elect to be processed as an uninsured/cash-paying patient). Offer will be accepted at participating pharmacies only. This offer is not health insurance.

By using this offer you agree to comply with terms of your health insurance contract which may require you to tell your insurer about the offer. It is illegal to sell (or offer to sell), purchase, or trade this offer. Offer is not transferable. Valid for one prescription. Not valid if reproduced. Void where prohibited by law. SCYNEXIS Inc., reserves the right to rescind, revoke, or amend this offer without notice at any time.

SCYNEXIS