

Qbrexza[®]
(glycopyrronium) cloth

OpusHealth[™]

RxBIN: 601341

RxPCN: OHCP

RxGRP: OH6708011

RxD: INVALID ID

JOURNEY
MEDICAL CORPORATION

PATIENT SAVINGS CARD

Eligible Insured Patients

Pay as Little as

\$0*

NDC 70428-011-12 - Rx Only

*Certain restrictions apply.
See back for program rules
and eligibility requirements.

Patient Instructions: Present this card to your participating pharmacist, along with your insurance card, and a valid prescription for QBREXZA® (glycopyrronium) cloth. Commercially insured patients may receive savings to reduce the co-pay amount to \$0. Cardholders with questions, please call 1-888-786-5876.

Eligibility Criteria: This offer is only good with a prescription of QBREXZA. This Savings Card is valid for QBREXZA (NDC 70428-011-12). This offer is not valid for prescriptions reimbursed by Medicare, Medicaid, federal or state programs (including any state prescription drug programs). Offer good only in the United States and cannot be redeemed at government subsidized pharmacies. The selling, purchasing, trading, or counterfeiting of this offer is prohibited by law. Not valid with any other offer. Maximum reimbursement limits apply. Void where prohibited.

Pharmacist Instructions: This card must be accompanied by a valid prescription for QBREXZA. Please submit the co-pay authorized by the patient's primary insurance as a secondary transaction to Opus Health. Pharmacists with questions, please call Opus Health at 1-800-364-4767. This card is the property of Journey Medical Corporation and Opus Health and must be returned upon request. Not valid for patients covered under Medicare, Medicaid, or similar state or federal programs. Card is nontransferable. This card is not an insurance benefit. Both parties retain the right to rescind, revoke, amend, or terminate this offer or the program in its entirety at any time.

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