



Welcome to  
**Sunovion Support™**

A prescription assistance program

**Sunovion Support™**  
PRESCRIPTION ASSISTANCE PROGRAM



## Prescription assistance is available

It's hard to know what to do if you can't afford your medication.

That's why Sunovion Pharmaceuticals Inc. created Sunovion Support™. A program that provides up to six prescriptions/fills<sup>†</sup> of Latuda® (lurasidone HCl) tablets at no cost to people who qualify.

Please see Important Safety Information including **Boxed Warning** on pages 7 through 10 and discuss accompanying full Prescribing Information with your healthcare professional.

This brochure can help you determine if you're eligible for the Program. And, quickly walk you through every step of the application process.

<sup>†</sup>Equivalent to 6 months of therapy

## Are you a caregiver?

Help the person you're caring for through the application process. It's important for you to read this brochure to learn how your loved one could receive up to 6 prescriptions/fills of medication at no cost. Here's how you can help.

- Check their eligibility for the Program
- Help them fill out the application form and have them sign it
- Get a healthcare professional's signature on the form
- Make sure all the required documents are sent with the form
- Include the medication prescription from their healthcare professional

To help you, and the person you're caring for, track each step of the application process, a handy checklist is provided at the end of the brochure.

## Applying for the Program takes 5 easy steps

It's easy to apply for Sunovion Support. Just follow the 5 easy steps described on the next few pages. If you have a question at any point in the process, please call the toll-free number, 1-877-850-0819, to speak with a Sunovion Support Specialist, or visit the program Web site [www.sunovionsupport.com](http://www.sunovionsupport.com)

# (1) Find out if you're eligible

To help you get started right now, check the list below to see if you're eligible:

- You're a resident of the US, Puerto Rico, or the US Virgin Islands; 18 years of age or older
- You're being treated by a healthcare professional licensed in the US
- Your healthcare professional has prescribed LATUDA
- You don't have any prescription insurance coverage (this includes Medicare and Medicaid)
- Your annual income is at or below 300%, see chart below<sup>††</sup>, of the federal poverty level for the number of people in your household.

Number of people in family	Annual household income
1	\$32,670
2	\$44,130
3	\$55,590
4	\$67,050
5	\$78,510

For each family member add \$14,340 in income.

<sup>††</sup>Based on the 2011 Federal Poverty Guidelines for 48 contiguous states and the District of Columbia. Poverty levels for residents of Alaska and Hawaii may be higher.

# (2) Fill out an application form

There are several ways to get an application form. It can be found at the following Web site, **[www.sunovionsupport.com](http://www.sunovionsupport.com)**.

*Or, by calling the toll-free number at 1-877-850-0819 and speaking with a Sunovion Support Specialist.*

## Include financial information with your application form

Please include information about your annual income and proof of income with the application form. This is required if you file a federal tax return (1040 or 1040EZ form). If you do not have a current paystub, W-2 or file a Federal Tax Return, you can request a free Verification of Non-Filing by visiting IRS.gov and click on "Order a Transcript" or call 1-800-908-9946 to receive a Form 4506-T and check box 7 to request verification of non-filing. You must include this verification with your application. Also, be sure to choose how you'd like to receive your prescription. You can get it at the pharmacy, with a program pharmacy card, or have it sent directly to your healthcare professional.

# (3) Ask your healthcare professional to complete their part of the process

Ask your healthcare professional to fill out their section of the application form and sign it. Include your prescription for LATUDA when you send it in.

## (4) Send in your form

Mail your application form, with required documents, in an envelope using the address below:

PO Box 220285 | Or fax to  
Charlotte, NC 28222-0285 | 1-877-850-0821

## (5) Your Application is Processed

Each application is checked to see if the applicant qualifies for the Program. Forms must include all requested documents to be complete.

A Sunovion Support Specialist will contact you if your application form is missing information or documents and/or you do not qualify for the Program.

Please note that you are free to switch your healthcare professional at any time while participating in the Program. It will not affect your eligibility for prescription assistance. Sunovion Support™ is offered to you regardless of which healthcare professional or pharmacy you choose.

## Here's a handy checklist to help you track the steps as you complete them

- Review your eligibility for the Program
- Complete the application form and sign it (incomplete forms will be returned)
- Send your prescription with the form
- Ask your healthcare professional to fill out their section of the application form and sign it
- Send proof of income with the form
- Put a stamp on the envelope
- Make a copy of the form for your files

If it's easier, fax your application and other documents to: 1-877-850-0821

### Have questions or want to learn more about the Program?

Please call the toll-free number to speak with a Sunovion Support Specialist.

**1-877-850-0819**

Hours of operation:  
Monday through Friday  
8:00 AM to 8:00 PM, EST

## IMPORTANT SAFETY INFORMATION FOR LATUDA

### **WARNING: INCREASED MORTALITY IN ELDERLY PATIENTS WITH DEMENTIA-RELATED PSYCHOSIS**

Elderly people with dementia-related psychosis (a severe mental health problem) taking atypical antipsychotic drugs, including LATUDA, are at an increased risk for death compared with those taking placebo (sugar tablet). LATUDA is not approved for the treatment of people with dementia-related psychosis (see **BOXED WARNING**). An increased risk for stroke and ministroke has been reported in elderly people with dementia-related psychosis.

**Neuroleptic malignant syndrome (NMS):** NMS is a rare and potentially fatal side effect reported with LATUDA and similar medicines. Call your healthcare provider right away if you have high fever; stiff muscles; confusion; changes in pulse, heart rate, or blood pressure; sweating; or muscle pain and weakness. Treatment should be stopped if you have NMS.

**Tardive dyskinesia (TD):** TD is a serious and sometimes permanent side effect reported with LATUDA and similar medicines. TD includes uncontrollable movements of the face, tongue, and other parts of the body. The risk for developing TD and the chance that it will become permanent is thought to increase the longer a person takes the medicine and the more medicine a person

takes over time. TD can develop after a person has been taking the medicine for a short time at low doses, although this is much less common. There is no known treatment for TD, but it may go away partially or completely if the person stops taking the medicine.

### **Metabolic Changes**

**High blood sugar:** High blood sugar and diabetes have been reported with LATUDA. If you have diabetes or risk factors for diabetes, such as being overweight or a family history of diabetes, your blood sugar should be tested at the beginning of and throughout treatment with LATUDA. Complications of diabetes can be serious and even life threatening. Tell your healthcare provider if you have blood sugar problems or signs of diabetes, such as being thirsty all the time, going to the bathroom a lot, or feeling weak or hungry.

### **High cholesterol and triglycerides:**

Undesirable alterations in lipids have been observed in patients treated with atypical antipsychotics.

**Weight gain:** Some patients may gain weight while taking LATUDA. Your healthcare provider should check your weight regularly. Talk to your healthcare provider about ways to help control your weight, such as eating a healthy, balanced diet and exercising.

### **Additional Important Warnings :**

- Light-headedness or faintness caused by a sudden change in heart rate and blood pressure when rising quickly from a sitting position has been reported with LATUDA.
- Low white blood cell counts and related conditions have been reported with LATUDA and similar medicines. Tell your healthcare provider if you have or had low white blood cell counts.
- LATUDA and medicines like it may raise the levels of prolactin. Tell your healthcare provider if you experience a lack of menstrual periods, leaking or enlarged breasts, or impotence.
- Tell your healthcare provider if you have a seizure disorder, have had seizures in the past, or have conditions that increase your risk for seizures.
- Tell your healthcare provider if you experience prolonged, abnormal muscle spasm or contraction, which may be signs of a condition called dystonia.
- LATUDA can affect your judgment, thinking, and motor skills. You should not drive or operate hazardous machinery until you know how LATUDA affects you.
- LATUDA may make you more sensitive to heat. You may have trouble cooling off. Be careful when exercising or when doing things likely to cause dehydration or make you warm.
- The symptoms of schizophrenia may include thoughts of suicide or of hurting yourself or others. If you have these

thoughts at any time, tell your healthcare provider or go to an emergency room right away.

- LATUDA and medicines like it have been associated with swallowing problems. If you have had or have swallowing problems, you should tell your healthcare provider.

**Pregnancy:** Tell your healthcare provider if you are pregnant or if you are planning to get pregnant while taking LATUDA. Breast feeding is not recommended during treatment with LATUDA.

Tell your healthcare provider about all prescription and over-the-counter medicines you are taking or plan to take, since there are some risks for drug interactions with LATUDA. Avoid drinking alcohol while taking LATUDA.

In people with schizophrenia, the most common side effects that occurred with LATUDA were sleepiness, an inner sense of restlessness or need to move (akathisia), movement abnormalities such as tremors, slow movement, or muscle stiffness (parkinsonism), upset stomach, and agitation.

This is not a complete summary of safety information. Please discuss the full Prescribing Information for prescription LATUDA with your healthcare provider.

# About Sunovion Support™

Sunovion created Sunovion Support to help eligible people receive prescription assistance. At Sunovion, we put people first and are determined each day to fulfill the promise of supporting healthy bodies and healthy lives.

## Enroll today!


- Get prescription assistance at no cost (if eligible)
- Easy enrollment process
- No cost to apply
- Simple application form, available online or by calling a toll-free number

Sunovion reserves the right to modify the Sunovion Support program anytime

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 **SUNOVION**  
Healthy bodies, healthy lives

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1-877-850-0819  
[www.sunovionsupport.com](http://www.sunovionsupport.com)

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