

Savings Program Terms and Conditions for GIMOTI

Patient Eligibility and Restrictions

\$0 per prescription. To qualify for the GIMOTI Savings Program (the Program) to pay \$0 per prescription, the patient must:

- Be at least 18 years of age
- Have commercial or private insurance that does not cover the entire cost of the prescription
- Have a GIMOTI prescription for an FDA-approved indication
- Be a resident of the United States or a United States territory

\$20 per prescription. Cash paying patients may be eligible to pay only \$20 per prescription. A "cash paying" patient is someone who does not have insurance coverage or has commercial insurance that does not cover GIMOTI. Medicare Part D enrollees who are in the prescription drug coverage gap ("donut hole") are not considered cash-pay patients and are not eligible for copay assistance.

The Program is void where prohibited, taxed, or otherwise restricted by law. Patients using Medicare, Medicaid, Medigap, Veterans Affairs, Department of Defense, TRICARE, or any other federal or state government program for their QOL Medical, LLC medicine are **not eligible** for the Program, and purchases made under the Program may not be claimed in any Part D True Out-of-Pocket Cost Submission.

The Program benefit is not transferable and may not be used with any other discount, coupon, rebate, free trial, or similar offer. The Program is not health insurance. If the patient's insurance status changes, they must notify the Program immediately. QOL Medical, LLC reserves the right to rescind, revoke, or amend this offer without notice at any time.

For questions regarding setup, claim transmission, patient eligibility, or other issues, call ASPN Pharmacies at 1-844-2GIMOTI (1-844-244-6684) Monday through Friday, 8:30 AM to 8:00 PM (Eastern Time).