

YOUR SAVINGS CARD IS READY TO USE RIGHT AWAY*

Xanax[®]
alprazolam tablets 

You may pay
as little as
\$4

a month with a
maximum savings of
\$125 per monthly fill
and **\$1500** per year*

Xanax[®]
alprazolam tablets 

XANAX Savings Card

BIN: 637765 Group: TCXANAX1
Rx CRX: CN ID: null

*Terms and conditions apply. See below.
This card is not health insurance and will be accepted
only at participating pharmacies.

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- ✓ Take your brand-name XANAX prescription and Savings Card to any participating pharmacy.
- ✓ Remind your pharmacist that your Savings Card only works with brand-name XANAX.
- ✓ Keep this printout and use it to save on future XANAX prescriptions.

Check your pills: Some Pharmacies May Fill a Branded Prescription With a Generic Medication

- Before you leave the pharmacy, **check your pills to make sure the shape and distinctive markings** match one of the pills pictured here
- If your pills don't match, speak to your pharmacist right away to **get the brand-name XANAX your doctor prescribed**



0.25 mg



0.5 mg



1 mg



2 mg

Pills shown not actual size.

Information for Pharmacists:

For Patients with an Eligible Third-Party Payer: Submit this claim to the patient's private primary third-party payer first; then submit the balance due using BIN #637765 and PCN CRX as a secondary payer COB with a "patient responsibility amount" using a Valid Other Coverage Code (eg, 0, 1, 3, or 8). The patient's out-of-pocket cost will be reduced up to the maximum reimbursement limit for the program. Cash Discount Cards are not valid as primary insurance under this Savings Offer.

For a Patient Paying Cash: Please submit this claim with a Valid Other Coverage Code (eg, 1) to BIN# 637765 and PCN CRX. For help processing this offer, call 1-855-854-4535.

XANAX is available by prescription only in 0.25, 0.5, 1, and 2 mg tablets.

*Eligibility required. Terms and conditions apply. Full terms and conditions can be found at [XANAX.com/savings-terms](https://www.viatris.com/savings-terms). This Savings Offer will be accepted only at participating pharmacies. This Savings Offer is not health insurance. No membership fees. Maximum savings cap of \$1,500 per calendar year. This Savings Offer is not valid for prescriptions that are eligible to be reimbursed, in whole or in part, by Medicaid, Medicare, or other federal or state healthcare programs. This Savings Offer is not valid for prescriptions that are eligible to be reimbursed in whole by private insurance plans or other health or pharmacy benefit programs. ViatriX reserves the right to revoke, rescind, or amend this Savings Offer without notice. For further information, call 1-855-854-4535, visit [XANAX.com](https://www.viatris.com), or write: ViatriX, 1000 Mylan Boulevard, Canonsburg, PA 15317.

Please see [Full Prescribing Information, including Boxed WARNING](#), and [Medication Guide](#).

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