

DURYSTA[®]
(bimatoprost intracamerai implant) 10 mcg



**SAVINGS
PROGRAM**

YOU MAY BE ELIGIBLE TO PAY AS LITTLE AS \$0* FOR DURYSTA[®]



IT'S EASY—JUST ASK YOUR DOCTOR'S OFFICE TO ENROLL YOU

- **To be eligible, you must be:**
 - Commercially insured on a plan that covers DURYSTA[®]
 - Have no government-sponsored insurance, such as Medicare or Medicaid
 - Prescribed DURYSTA[®] for an approved use
 - A US resident who is 18 years or older
- **Your doctor's office will confirm your eligibility and enroll you before you receive DURYSTA[®]—just sign the enrollment form**
- **Once enrolled, you will pay as little as \$0* for DURYSTA[®]**
 - Your doctor's office will collect your copay for DURYSTA[®] (or, if you use a specialty pharmacy, they will collect it)

*Maximum savings benefit of \$1700 per eye.

DURYSTA[®] Savings Program expires June 30, 2022.



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