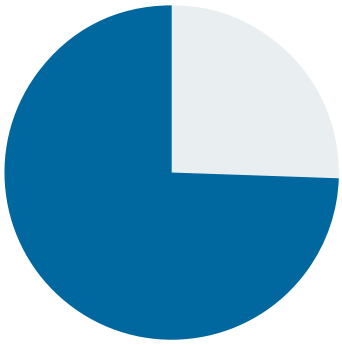
# High prescription fill rates support patients' access to treatment regardless of insurance type*

CREXONT® (carbidopa and levodopa) EXTENDED-RELEASE CAPSULES 35mg/140mg · 52.5mg/210mg 70mg/280mg · 87.5mg/350mg

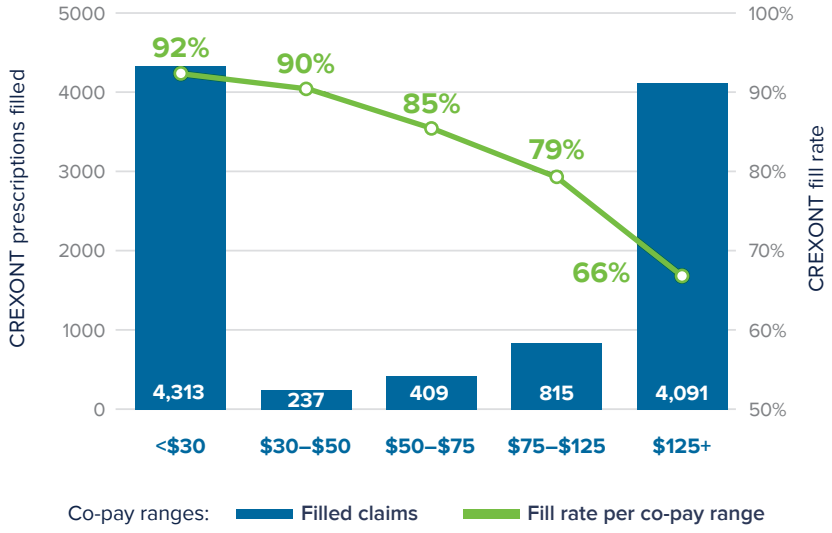
## Medicare Part D

**CREXONT fill rates**
August 2024 to December 2025



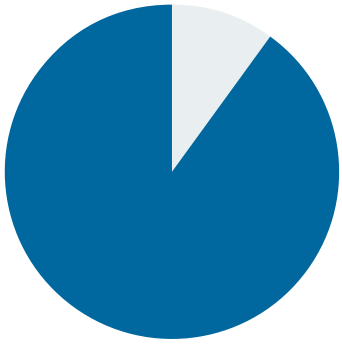
74%
Prescriptions filled*

**CREXONT fill rates per co-pay bucket**



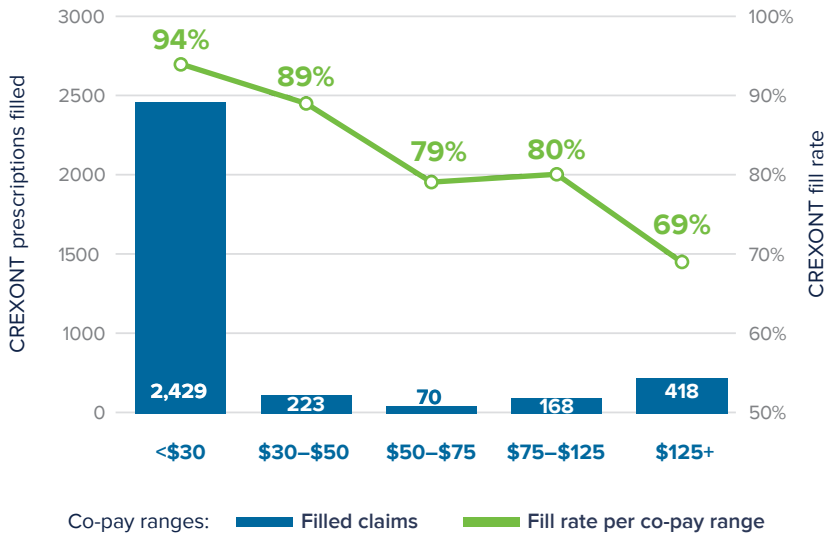

## Commercial insurance

**CREXONT fill rates**
August 2024 to December 2025



88%
Prescriptions filled*

**CREXONT fill rates per co-pay bucket**




*All pharmacy claims and co-pay range data are provided by IQVIA MAP portal March 2026 and represent CREXONT prescriptions filled between August 2024 and December 2025. Formularies are subject to change that could impact CREXONT fill rates. Please check with the health plan to confirm coverage for individual patients.

# Explore ways for your patients to save

## CREXONT Savings Program

Eligible commercially insured patients may qualify for a $25 co-pay on their prescriptions, applied automatically for most patients at the pharmacy through the CREXONT Savings Program.*†‡

## TRICARE Uniform and VA National Formulary

Patients covered under TRICARE Uniform and the Veterans Health Administration now have affordable access to CREXONT, offering personalized extended-release treatment to help manage Parkinson's symptoms.

## Medicare Prescription Payment Plan

For Medicare Part D patients, the Medical Prescription Payment Plan allows prescription drug costs to be paid in fixed monthly installments.

## Amneal Patient Assistance Program

For eligible patients, prescriptions are covered through the Amneal Patient Assistance Program.†‡

## Support Through Foundations

Patients may also be able to get support through other means such as the Patient Access Network foundation or The Assistance Fund (TAF).

**Get your patients the support they need.**

Visit **CREXONThcp.com/support** to help your patients access CREXONT.

*Maximum benefit of $150.

†The CREXONT Co-Pay Savings Program is not valid for prescriptions submitted for reimbursement to Medicare, Medicaid, other federal or state programs (including any state pharmaceutical assistance programs), or private indemnity or HMO insurance plans that reimburse you for the entire cost of your prescription drugs. This program is good for use only with a CREXONT prescription at the time the prescription is filled by the pharmacist and dispensed to the patient. Offer good only in the USA at participating retail pharmacies. Void if prohibited by law, taxed, or restricted. Amneal reserves the right to rescind, revoke, or amend this offer at any time without notice. By participating in this program, you acknowledge that you are an eligible patient and that you understand and agree to comply with the terms and conditions of this offer.

‡Subject to eligibility requirements.

**Reference: 1.** Data on file. Amneal Pharmaceuticals LLC.

Amneal

CREXONT® (carbidopa and levodopa)
EXTENDED-RELEASE CAPSULES
35mg/140mg · 52.5mg/210mg
70mg/280mg · 87.5mg/350mg