SUNOSI® (solriamfetol) CIV
75, 150 mg tablets

SUNOSI PATIENT ROADMAP

For Patients With Excessive Daytime Sleepiness (EDS) associated with Obstructive Sleep Apnea (OSA) or Narcolepsy

3 steps to help your patients access SUNOSI® (solriamfetol), 75 and 150 mg tablets

1 CONFIRM PATIENT ELIGIBILITY

- Ensure eligibility for treatment by confirming patient is diagnosed with **EDS associated with OSA** or **Narcolepsy** and fulfills any prior authorization (PA) criteria that may be required by the insurance plan referencing the chart below[1]
- Write the prescription and send to pharmacy

EDS in OSA	EDS in Narcolepsy
Has tried a wake-promoting agent (WPA) (if required by insurance plan)[2] **WPA Examples:** modafinil, armodafinil	Has tried a WPA and/or stimulant (if required by insurance plan)[3] **WPA Examples:** modafinil, armodafinil **Stimulant Examples:** methylphenidate, amphetamines
Please note there is no ICD-10 code for EDS. Please apply code of applicable primary diagnosis. **G47.33** Obstructive sleep apnea (adult, pediatric)	**Please note there is no ICD-10 code for EDS. Please apply code of applicable primary diagnosis.** **G47.411** Narcolepsy with cataplexy **G47.419** Narcolepsy without cataplexy **G47.421** Narcolepsy in conditions classified elsewhere with cataplexy **G47.429** Narcolepsy in conditions classified elsewhere without cataplexy
Has been using CPAP/BiPAP or other OSA airway treatment for at least 1 month[1]	

2 ACCESSING SUNOSI

- If required, you may need to provide documentation for PA, including diagnostic test results, CPAP/BiPAP usage **(OSA only)**, and history of previous medications tried
- Use CoverMyMeds®, a web-based portal, to help initiate PA or step edit. Visit covermymeds.com to sign up or log in to your account
- A Letter of Medical Necessity can help you with an appeal submission or denial of a SUNOSI prescription

covermymeds®

3 ADDRESSING FINANCIAL SUPPORT

- The SUNOSI Savings Program may be an option for your patients[a]
- Over 95% of commercially insured patients across the nation have coverage for SUNOSI. Eligible patients can get their prescription for **as little as $9** per month at participating retail pharmacies with the Savings Card[5]

Scan the QR code using the camera app on your mobile phone to access the following:

SUNOSI Savings Program, with full Terms and Conditions, and download the Savings Card for your patients

Health plan formulary coverage for SUNOSI in your area

Not actual size.

[a]Eligible patients with a valid prescription for SUNOSI who present this Savings Card at participating pharmacies may pay as little as $9. Monthly and annual limits apply. Limited to 15 uses per year. Offer not applicable to copays of $9 or less.

CPAP=continuous positive airway pressure; HCP=healthcare provider; OSA=obstructive sleep apnea.

INDICATION

SUNOSI is indicated to improve wakefulness in adults with excessive daytime sleepiness (EDS) associated with narcolepsy or obstructive sleep apnea (OSA).

LIMITATIONS OF USE

SUNOSI is not indicated to treat the underlying obstruction in OSA. Ensure that the underlying airway obstruction is treated (e.g., with continuous positive airway pressure (CPAP)) for at least one month prior to initiating SUNOSI. SUNOSI is not a substitute for these modalities, and the treatment of the underlying airway obstruction should be continued.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

SUNOSI is contraindicated in patients receiving concomitant treatment with monoamine oxidase inhibitors (MAOIs), or within 14 days following discontinuation of an MAOI, because of the risk of hypertensive reaction.

Please see next page for additional Important Safety Information and accompanying full Prescribing Information, or click here for full PI.

IMPORTANT SAFETY INFORMATION (cont.)
WARNINGS AND PRECAUTIONS

Blood Pressure and Heart Rate Increases

SUNOSI increases systolic blood pressure, diastolic blood pressure, and heart rate in a dose-dependent fashion.

Epidemiological data show that chronic elevations in blood pressure increase the risk of major adverse cardiovascular events (MACE), including stroke, heart attack, and cardiovascular death. The magnitude of the increase in absolute risk is dependent on the increase in blood pressure and the underlying risk of MACE in the population being treated. Many patients with narcolepsy and OSA have multiple risk factors for MACE, including hypertension, diabetes, hyperlipidemia, and high body mass index (BMI).

Assess blood pressure and control hypertension before initiating treatment with SUNOSI. Monitor blood pressure regularly during treatment and treat new-onset hypertension and exacerbations of pre-existing hypertension. Exercise caution when treating patients at higher risk of MACE, particularly patients with known cardiovascular and cerebrovascular disease, pre-existing hypertension, and patients with advanced age. Use caution with other drugs that increase blood pressure and heart rate.

Periodically reassess the need for continued treatment with SUNOSI. If a patient experiences increases in blood pressure or heart rate that cannot be managed with dose reduction of SUNOSI or other appropriate medical intervention, consider discontinuation of SUNOSI.

Patients with moderate or severe renal impairment could be at a higher risk of increases in blood pressure and heart rate because of the prolonged half-life of SUNOSI.

Psychiatric Symptoms

Psychiatric adverse reactions have been observed in clinical trials with SUNOSI, including anxiety, insomnia, and irritability.

Exercise caution when treating patients with SUNOSI who have a history of psychosis or bipolar disorders, as SUNOSI has not been evaluated in these patients.

Patients with moderate or severe renal impairment may be at a higher risk of psychiatric symptoms because of the prolonged half-life of SUNOSI.

Observe SUNOSI patients for the possible emergence or exacerbation of psychiatric symptoms. Consider dose reduction or discontinuation of SUNOSI if psychiatric symptoms develop.

MOST COMMON ADVERSE REACTIONS

The most common adverse reactions (incidence ≥5%) reported more frequently with the use of SUNOSI than placebo in either narcolepsy or OSA were headache, nausea, decreased appetite, anxiety, and insomnia.

SUN HCP ISI 05/2022

Please see accompanying full Prescribing Information, or click here for full PI.

For more information about SUNOSI, visit sunosihcp.com.

References: 1. SUNOSI [package insert]. New York, NY: Axsome Therapeutics, Inc. **2.** Rosenberg R, Schweitzer PK, Steier J, et al. Residual excessive daytime sleepiness in patients treated for obstructive sleep apnea: guidance for assessment, diagnosis, and management. *Postgrad Med.* 2021;133(7):772-783. **3.** Maski K, Trotti LM, Kotagal S. et al. Treatment of central disorders of hypersomnolence: an American Academy of Sleep Medicine clinical practice guideline. *J Clin Sleep Med.* 2021;17(9):1881-1893. **4.** Centers for Medicare & Medicaid Services. ICD-10-CM Tabular List of Diseases and Injuries. Accessed August 11, 2022. https://www.cms.gov/medicare/icd-10/2022-icd-10-cm **5.** Data on File (AXS-SUN0010323). New York, NY: Axsome Therapeutics, Inc.

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