SEAMLESS STARTS

SUNOSI® (solriamfetol) CIV
75, 150 mg tablets

For adults with excessive daytime sleepiness (EDS) due to obstructive sleep apnea (OSA)[1]

1 Confirm patient eligibility

- ○ Diagnosed with EDS due to OSA[1]

  ICD-10 code for OSA: G47.33[2]
  (Note: there is no ICD-10 code for EDS.)

- ○ Adherent with airway therapy, such as CPAP or oral appliance, for at least 1 month[1]
- ○ Tried a wake-promoting agent such as modafinil (only if required by insurance)[3]

2 Prescribe

3 Provide samples or a free trial offer and a savings card

Patients can get started with **free samples** or redeem a free trial offer for **30 tablets**.*

OVER 95% of commercially insured patients have access to SUNOSI. These patients may get up to **90 days of SUNOSI for as little as $9**.[4†]

StartSUNOSI.com

CoverMyMeds® is a tool that helps you initiate and submit a prior authorization.

covermymeds.com

*Valid prescription required. Patients may receive a lifetime maximum of 30 tablets of SUNOSI (75 mg and 150 mg only) through this free trial offer.

†Eligible patients will pay as little as $9 with a valid prescription for an FDA-approved indication; monthly, annual, and/or per-claim maximum program benefits may apply and vary depending on the patients' specific terms of their prescription drug plan and to ensure that the funds are used for the benefit of the patient, based on factors determined by Axsome. See full Terms and Conditions.

CPAP=continuous positive airway pressure.

INDICATION

SUNOSI is indicated to improve wakefulness in adults with excessive daytime sleepiness (EDS) associated with 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 additional Important Safety Information and full Prescribing Information.

FULFILL INSURANCE REQUIREMENTS (if needed)

- You may need to provide documentation for prior authorization, including diagnostic test results, CPAP/oral appliance usage, and history of previous medications
- A Letter of Medical Necessity may be used to support an appeal in the event a SUNOSI prescription is denied by a patient's insurance

IMPORTANT SAFETY INFORMATION (CONT'D)

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 aISI 05/2022

Please see additional Important Safety Information and full Prescribing Information.

For more information about SUNOSI, visit SUNOSIhcp.com.

References: 1. SUNOSI (solriamfetol) [prescribing information]. New York, NY: Axsome Therapeutics, Inc. **2.** Centers for Medicare & Medicaid Services. ICD-10-CM Index to Diseases and Injuries. Accessed January 4, 2024. https://www.cms.gov/medicare/coding-billing/icd-10-codes/2024-icd-10-cm **3.** Rosenberg R, Schweitzer PK, Steier J, Pepin J-L. Residual excessive daytime sleepiness in patients treated for obstructive sleep apnea: guidance for assessment, diagnosis, and management. *Postgrad Med*. 2021;133(7):772-783. **4.** Data on File. AXS-SUN0010323. New York, NY: Axsome Therapeutics, Inc.

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