Adlarity®
(donepezil transdermal system)

Pharmacy Guide to ADLARITY®

Product overview

ADLARITY Copay Savings Card and processing instructions

Corium Cares™

Not actual size.

INDICATION

ADLARITY is indicated for the treatment of mild, moderate, and severe dementia of the Alzheimer's type.

IMPORTANT SAFETY INFORMATION

Contraindications

ADLARITY is contraindicated in patients with known hypersensitivity to donepezil or to piperidine derivatives or with a history of allergic dermatitis with use of ADLARITY.

Please see additional Important Safety Information throughout and click here for Full Prescribing Information.

ADLARITY: The first and only once-weekly transdermal formulation of donepezil[1,2]

Dosage strengths and NDC numbers[1]

ADLARITY 5 mg/d: NDC 65038-055-03

ADLARITY 10 mg/d: NDC 65038-056-03

One once-weekly ADLARITY transdermal system replaces 7 days of oral donepezil 5 mg/d or 10 mg/d tablets.[1]

Starting ADLARITY[1]

- The recommended starting dose of ADLARITY is 5 mg/d
- After 4 to 6 weeks, the dose may be increased to 10 mg/d

Switching to ADLARITY from oral donepezil[1]

- Patients currently on oral donepezil 5 mg/d: ADLARITY 5 mg/d once weekly
- Patients on oral donepezil 5 mg/d for at least 4 to 6 weeks or those currently on 10 mg/d: ADLARITY 10 mg/d once weekly

ADLARITY is conveniently administered without regard to food intake[1]

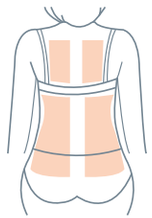
IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions

- **Application site skin reactions:** ADLARITY may cause skin application-site reactions. These reactions are not necessarily indicative of sensitization; however, allergic contact dermatitis may occur and should be suspected if application-site reactions spread beyond the size of the transdermal system, there is evidence of a more intense local reaction, and symptoms do not significantly improve within 48 hours of transdermal system removal.
- **Anesthesia:** ADLARITY, as a cholinesterase inhibitor, is likely to exaggerate succinylcholine-type muscle relaxation during anesthesia.

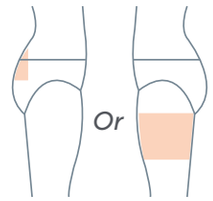
ADLARITY offers patients and caregivers application site flexibility[1]

Recommended application site	For patients who are able to **self-apply** or if ADLARITY is not expected to be removed by the patient before the full 7 days



ADLARITY may be applied to the upper back below the shoulder blades (avoiding the spine), where it may be less likely to be removed by the patient.[3]

Back and upper buttocks



ADLARITY may be easily self-applied on the upper buttocks or the upper outer thigh.[3]

Upper buttocks or the upper outer thigh

ADLARITY should be replaced every 7 days. Only 1 transdermal system should be worn at a time.[1]

An application site should be chosen that has not been used in the past 14 days.[1]

See the Instructions for Use for step-by-step instructions.

- ADLARITY use does not need to be interrupted due to bathing or hot weather. Avoid long exposure to external heat sources[1]
- Store ADLARITY in the refrigerator. Allow the pouch to reach room temperature before opening[1]

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions (continued)

- **Cardiovascular conditions:** Cholinesterase inhibitors, including ADLARITY, may have vagotonic effects on the sinoatrial and atrioventricular nodes. These effects may manifest as bradycardia or heart block in patients both with and without known underlying cardiac conduction abnormalities. Syncopal episodes have been reported in association with the use of donepezil.

Please see additional Important Safety Information throughout and click here for Full Prescribing Information.

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Most common adverse reactions

The most common adverse reactions (incidence >3%) occurring in a clinical study of healthy volunteers receiving ADLARITY 10 mg/d were[1]

- Headache (15%)
- Application site pruritus (9%)
- Muscle spasms (9%)
- Insomnia (7%)
- Abdominal pain (6%)
- Application site dermatitis (6%)
- Constipation (6%)
- Diarrhea (4%)
- Application site pain (4%)
- Dizziness (4%)
- Abnormal dreams (4%)
- Skin laceration (4%)

Incidences of skin irritation with ADLARITY were mild[1,a]

- Skin irritation observed 30 minutes after removal of ADLARITY 10 mg/d (268 transdermal systems) included erythema (64.6%), papules (16.0%), and edema (0.4%)[1,4]

[a]An open-label study in 60 healthy volunteers who received ADLARITY 5 mg/d for 5 weeks in Period 1 as a titration dose. In Periods 2 and 3, the volunteers received either ADLARITY 10 mg/d for 5 weeks or oral donepezil 10 mg/d tablets for 5 weeks in a randomized, crossover fashion.[1]

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions (continued)

- **Nausea and vomiting:** Donepezil, the active ingredient in ADLARITY, may cause diarrhea, nausea, and vomiting. In most cases these effects have been transient, although some cases lasted 1 to 3 weeks. Patients should be monitored closely during initiation of treatment and after dose increases.
- **Peptic ulcer disease and gastrointestinal bleeding:** Cholinesterase inhibitors, including ADLARITY, may increase gastric acid secretion. Patients should be monitored closely for active or occult gastrointestinal bleeding, especially those with a history of ulcer disease or those receiving concurrent nonsteroidal anti-inflammatory drugs (NSAIDs).
- **Genitourinary conditions:** Although not observed in clinical trials of ADLARITY, bladder outflow obstruction may occur.

The ADLARITY Copay Savings Card and processing instructions

Eligible commercially insured patients' out-of-pocket expense should be no more than $30. The program is easy to use and the copay card is preactivated for patients with prescriptions, whether or not ADLARITY is covered by their plan.[a]

Eligibility criteria include

- Commercially insured patient
- Valid ADLARITY prescription
- US resident

A quick note to the pharmacist and staff: Corium is committed to ensuring your staff and eligible patients have a positive experience when processing our savings offerings and filling prescriptions. That is why we have created this resource with the information needed to help you assist your ADLARITY patients.

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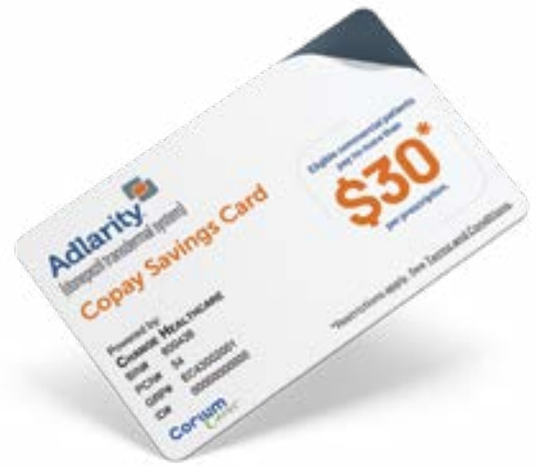

If you have any difficulty applying our copay savings offer, please call our dedicated staff at **1-800-910-8432**. Support is available Monday-Friday, 8 AM to 8 PM ET (except holidays).

Visit ADLARITY.com/savings-and-support for more information.

Need help processing the copay savings offer? **Call 1-800-910-8432.**

[a]Restrictions apply. See Terms and Conditions at ADLARITY.com.

This offer is good for eligible commercially insured patients with a valid ADLARITY prescription and may not be used for any other product. Uninsured patients and cash-paying patients are not eligible. This offer is not insurance and is not valid for patients covered under Medicaid, Medicare, TRICARE, or any other federal or state healthcare program.

Please see additional Important Safety Information throughout and click here for Full Prescribing Information.

Adlarity® (donepezil transdermal system)

General processing instructions

These instructions can help you process an ADLARITY Copay Savings Card. Submit the primary claim to your patient's insurance provider for this prescription. Then, submit a secondary transaction using one of the applicable Coverage Codes: **OCC 08** for insured, covered patients or **OCC 03** for insured, not covered patients. The secondary transaction should be submitted to **CHANGE HEALTHCARE** using the BIN, PCN, Group, and ID on the copay card.

IMPORTANT NOTE: *Each pharmacy may have its own set of processing systems and procedures. As such, these instructions may not always work.* If you have any difficulty applying our copay savings offer, please call our dedicated staff at **1-800-910-8432**. Support is available Monday-Friday, 8 AM to 8 PM ET (except holidays).

Independent pharmacies

- The process may vary, depending on the software used by the pharmacy
- Submit a claim with the patient's primary and secondary insurance information
- If the patient's primary insurance returns a Prior Authorization, submit a secondary transaction using one of the applicable Coverage codes: **OCC 08** for insured, covered patients or **OCC 03** for insured, not covered patients
- If there is still an issue with COB billing, please contact the respective system help desk, which can assist in processing the claim

WALMART®

1. Submit a split bill with the primary insurance card and guarantee card. When the primary insurance card is rejected, press F10.
2. Select **Other payer type 3** (BIN and Other Payer ID).
3. Use the appropriate **BIN**[a] for the other insurance.
4. Choose **Guarantee card** again at the top of the screen.
5. Select **Other coverage exists** from the drop-down at the bottom.
6. After the claim is split billed, access the claim in Resolution.
7. Verify the rejection from the primary insurance card is nonworkable.
8. Delete the primary insurance card from the payment section of the Resolution screen.
9. Press F10 and select **OCC 03**, then hit **ACCEPT**.
10. Submit from Resolution screen, then submit again.
11. When the claim rejects again, delete the primary insurance card.
12. Submit the claim again.

[a]Other insurance on a coordinated claim.

WALGREENS®

If a patient's primary insurance rejects due to **Prior Authorization**, **Step Edit**, or **NDC Block**, remove the TPR exception by cashing out the claim in IC+, then

1. Open **SDL**.
2. Submit to primary insurance.
3. When primary insurance is rejected, click **CANCEL**.
4. Select the secondary plan ID.
5. Click **COB**.
6. Confirm the primary insurance **BIN** is populated.
7. Verify **OCC 03** is active.
8. Click **OK**, then **SUBMIT**.

If the steps provided **do not** work, or if the **OCC 03** field is grayed out, then

1. Confirm that **Auto COB** is set up on the patient's coupon profile for the coupon being billed. Restart the claim from scratch once **Auto COB** is set up.
2. When using a coupon with BIN/PCN 600426/54 and the pharmacy is unable to locate that BIN/PCN in their system, select the Plan ID: **GCCSS**.
3. If there is still an issue with COB billing, please contact the Danville Accounting Center (see below), which can assist in processing the claim over the phone.

Call the Danville Accounting Center at **1-877-422-7702**, Monday-Friday, 8 AM to 5 PM ET.

If contacting the Danville Accounting Center after business hours, please open a ticket per the normal process for Walgreens Pharmacists/Technicians.

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions (continued)

- **Seizures:** Cholinomimetics, including ADLARITY, are believed to have some potential to cause generalized convulsions; however, seizure activity may also be a manifestation of Alzheimer's disease.
- **Pulmonary conditions:** Cholinesterase inhibitors, including ADLARITY, should be prescribed with care to patients with a history of asthma or obstructive pulmonary disease.

Adverse Reactions

The most common adverse reactions (greater than 5% with donepezil tablets and twice the placebo rate) are nausea, diarrhea, insomnia, vomiting, muscle cramps, fatigue, and anorexia.

Please see additional Important Safety Information throughout and click here for Full Prescribing Information.

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CVS®

The pharmacist should simultaneously enter the patient's primary and secondary insurance information. If the patient's primary insurance returns a **Prior Authorization**, **Step Edit**, or **NDC Block**, then

1. Enter **OCC 08** to override the primary insurance.
2. Choose **Additional information**.
3. Set Plan **ID** to **Therapy first**.

If unable to resolve the issue, please contact the CVS Help Desk/Insurance Company and apply the secondary insurance.

TARGET®

For stores not converted to CVS

Simultaneously enter the patient's primary and secondary insurance information. If the patient's primary insurance returns a **Prior Authorization**, **Step Edit**, or **NDC Block**, the system will instruct the pharmacist to continue to the next screen, which should be the coupon program.

PUBLIX®

Simultaneously enter the patient's primary and secondary insurance information. If the patient's primary insurance returns a **Prior Authorization**, **Step Edit**, or **NDC Block**, the system will instruct the pharmacist to continue to the next screen, which should be the coupon program.

Need help processing the copay savings offer? **Call 1-800-910-8432.**

IMPORTANT SAFETY INFORMATION (continued)

Drug Interactions

Cholinesterase inhibitors, including donepezil, have the potential to interfere with the activity of anticholinergic medications. A synergistic effect may be expected when cholinesterase inhibitors are given concurrently with succinylcholine, similar neuromuscular blocking agents, or cholinergic agonists such as bethanechol.

Please see additional Important Safety Information throughout and click here for Full Prescribing Information.

References: 1. ADLARITY. Prescribing information. Corium, Inc; 2022. **2.** Soo LE, Amit KJ, Parminder S, inventors; Corium International, Inc, assignee. Donepezil transdermal delivery system. U.S. patent 9,993,466. June 12, 2018. **3.** ADLARITY. Instructions for use. Corium, Inc; 2022. **4.** Data on file. Corium, Inc.

Corium

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