### PURCHASE DATES: 01/01/2023 - 06/30/2023

### vision essentials by KAISER PERMANENTE.



CooperVision<sup>®</sup> **MiS** 

MiSight<sup>®</sup> 1 day for daily wear

MiSight<sup>®</sup> 1 day brand: \$75 off (4) 90-packs or (2) 180-packs

# **\$75** Prescription Savings Card

## MiSight<sup>®</sup> 1 day

is the FIRST and ONLY one for myopia control in age-appropriate children.\*\*

MiSight<sup>®</sup> 1 day soft contact lenses are specifically designed for myopia control and are FDA approved\* to slow the progression of myopia in children aged 8-12 at the initiation of treatment<sup>1†</sup>





### MiSight<sup>®</sup> 1 day brand: \$150 off (8) 90-packs or (4) 180-packs

CooperVision®

MiSight<sup>®</sup> 1 day

**\$150** Prescription Savings Card

\*Indications and Important Safety Information. Rx only. Results may vary. ATTENTION: Reference the Patient Information Booklet for a complete listing of Indications and Important Safety Information.

Indications: MiSight® 1 day (omafilcon A) soft (hydrophilic) contact lenses for daily wear are indicated for the correction of myopic ametropia and for slowing the progression of myopia in children with non-diseased eyes, who at the initiation of treatment are 8-12 years of age and have a refraction of -0.75 to -4.00 diopters (spherical equivalent) with  $\leq$  0.75 diopters of astigmatism. The lens is to be discarded after each removal. Warnings: Problems with contact lenses could result in serious injury to the eye. Do not expose contact lenses to water while wearing them. Under certain circumstances MiSight® lenses optical design can cause reduced image contrast/ghosting/halo/glare in some patients that may cause difficulties with certain visually-demanding tasks. Precautions: Daily wear single use only. Patient should always dispose when lenses are removed. No overnight wear. Patients should exercise extra care if performing potentially hazardous activities. Adverse events: Including but not limited to infection/inflammation/ulceration/ abrasion of the cornea, other parts of the eye or eyelids. Some of these adverse reactions can cause permanent or temporary loss of vision. If you notice any of the stated in your child, immediately have your child remove the lenses and contact your eye care professional.

+ Compared to a single vision 1 day lens over a 3 year period.

# Only FDA approved soft contact lens designed for myopia control in the U.S.

 Chamberlain P, et al. A 3-year randomized clinical trial of MiSight<sup>®</sup> lenses for myopia control. Optom Vis Sci. 2019; 96(8):556–567.



#### Questions? Visit us at CooperVisionPromotions.com and click (2) Help Center

**CLAIM TERMS & CONDITIONS:** To receive your claim payment, you must satisfy each of the requirements and have the following documentation: (A) a valid sales receipt that includes: (i) patient name; (ii) purchase location; (iii) CooperVision contact lens product purchased; (iv) number of boxes purchased; and (v) date of purchase; and (B) a product box end panel (one for each eye). Failure to follow each of these steps is a rejection of this rebate offer. Offer valid only when contact lenses are purchased from prescribing eye care professional or affiliated location. Offer valid only for residents of the U.S., Puerto Rico and U.S. Virgin Islands. Offer not valid where prohibited by law and not valid with any other offer or rebates. Rebate not valid in combination with purchase at 1-800 CONTACTS or Internet Retailers. Allow up to 8 weeks to receive the payment email with instructions for redeeming a physical or virtual Prepaid card. CooperVision reserves the right to cancel, suspend, or modify part of or this entire rebate program at any time without notice, for any reason in its sole discretion including for fraud prevention measures. CooperVision is not responsible for lost, late, illegible, stolen, or incomplete requests. All submitted materials become property of CooperVision and will not be returned. Limit two rebates per person per (12) twelve-month period based on purchase date and ten (10) rebates per address and/or email address per twelve (12) month period, except where prohibited by law. Excessive submissions and/or other fraudulent activities may result in federal prosecution. Submitsions made on behalf of a consumer by an eye care provider may result in the rejection of this claim offer. If you elect to donate a portion, or your entire claim amount, all donated claim money submitted between 01/01/2023 - 06/30/2023 will be contributed by CooperVision to Optometry Giving Sight. © 2023 CooperVision.

• If you don't have access to the internet, please call 1-877-875-6043 for assistance.

**‡NOTICE TO CONSUMERS:** If you are personally filing a claim for reimbursement from a third-party payer (e.g., insurance company, employer group, etc.) for the purchase of this product, your claim must be based upon your payment less the amount of the rebate. If your doctor is filing the claim, you must notify the doctor's office of the need to deduct this rebate amount from the purchase price used in calculating the claim.

Rebate paid in the form of a CooperVision® Prepaid Mastercard®. Your rebate will be delivered via email with instructions for selecting your prepaid card. You must select your card within 3 months from the date these instructions are sent via email. Your right to the payment may expire after that time. If a valid email address is not provided, a physical prepaid card will be automatically selected and sent to your mailing address on file. Use your card everywhere Mastercard is accepted in the U.S. Issued by The Bancorp Bank, Member FDIC, pursuant to license by Mastercard International Incorporated. Mastercard is a registered trademark, and the circles design is a trademark of Mastercard International Incorporated. Your use of the prepaid



card is governed by the Cardholder Agreement, and some fees may apply. This is not a gift card. Please note that prepaid cards are subject to expiration, so pay close attention to the expiration date of the card. Cards will not have cash access and can be used everywhere debit Mastercard is accepted. Card is valid through the last day of the expiration month. You will not have access to the funds after expiration. The Cardholder Agreement can be found at coopervisiondigitalrewards.com once you receive your payment notification. PURCHASE DATES: 01/01/2023 - 06/30/2023

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Scan code to submit your claim Offer Code: 23-12429

