



NC Family to Family Health Information Center

"A beacon for families of children with special health care needs."

NC Family to Family Health Information Center
ECAC
907 Barra Row, Suites 102/103
Davidson, NC 28036
Phone: (704) 892-1321
Fax: (704) 892-5028
Parent Information Line: 1-800-962-6817
hic@ecacmail.org
www.ecac-parentcenter.org

Fact Sheet

18

Prescriptions Assistance Programs



The cost of medication can be a heavy financial burden even with insurance benefits. A number of the major pharmaceutical companies provide some type of patient assistance programs to assist with the cost of medication.

Start by asking your physician's office for help. Most medical offices have at least one person on staff that can help you determine if the pharmaceutical company that manufactures your medication has an assistance program. If there is a formal program in place, your physician's office would then need to initiate the sometimes lengthy paperwork process. Most patient assistance programs have very strict income guidelines and, often, insurance coverage would affect eligibility.

Should you want to investigate patient assistance programs on your own, begin by researching the manufacturer of your medication. If you take a generic brand, find out the brand name that your medication is replacing. To obtain the name of the manufacturer, you could ask your pharmacist or search online. By searching online, you can usually obtain the other pertinent information such as the toll free telephone number, address, and often the actual patient assistance application.

The application, usually just financial information, must be completed by the patient and proof of income (such as tax records) may be required. The application is then given to your doctor for completion. There is a section on the application asking for the name of the medication you need assistance with, the strength, and the quantity. You should leave this important section for the physician to complete. A written prescription must usually be attached to the application and it can all be mailed by your physician when completed.

The notification of acceptance or denial in most patient assistance programs is usually handled by mail. Either you or your physician should receive this notice. If you don't hear anything for several weeks— keep calling!

Upon acceptance into an assistance program, it is at the discretion of the manufacturer how much medication they will send and how frequently. They will also let you know how often you will need to fill out the application again. The medication itself may be mailed to your home or it may be mailed to your physician's office. It is important to establish a relationship with the person in your physician's office that handles the patient assistance programs so that your medication will not end up in the general sample medication area.

Should your application for assistance be denied, there is still hope for help with medication costs! The majority of physician offices have a "samples" closet. Drug manufacturing representatives or "drug reps" frequently visit physicians to give them details about their products. In exchange for a signature, your physician will receive free medication samples that can be used as the physician



The Family to Family Health Information Center is a Program of The Exceptional Children's Assistance Center (ECAC) and is affiliated with Family Voices of North Carolina. This fact sheet was developed with funding from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, Division of Services for Children with Special Health Needs. The NC Family to Family Health Information Center operates under the auspices of grant # H84MC08000.

FAMILY VOICES[®]

Make sure your doctor knows that you need help with your medication. Each time you visit, ask if they have samples of the medications you are on. Do not be shy about asking for them. If you do not ask, the next patient will! If they happen not to have any of the medications you are on, obtain permission to call another time. You may want to ask for a contact name so you will not have to leave a message for your physician when you call back.

Should your physician want to start you on a new prescription and there are no samples available, ask for two prescriptions! The first prescription should be a small quantity to make sure you can tolerate the medication before you invest a great deal of money. The second prescription should be for the regular amount of medicine. If the new prescription is called in by telephone and you do not have the opportunity to ask for two prescriptions, talk to your pharmacist about only purchasing a small amount initially.

There are several ways to obtain help with the cost of medication. Investigate your options! Make the necessary phone calls. Complete the paperwork and do the follow up.

Two programs that are available include Together Rx Access and Partnership for Prescription Assistance. Together Rx Access is a prescription savings program that ten pharmaceutical companies founded together. This service is free and could save you from 25-40% on both brand name and generic medication. There is no fee and only three eligibility requirements:

1. No prescription drug coverage
 2. Not eligible for Medicare
- and
3. Legal resident of the US or Puerto Rico

For information about this program, call 1-800-444-4106 or visit their website at www.togetherrxaccess.com/apply.html.

The Partnership for Prescription Assistance is a single point of access to more than 475 public and private patient assistance programs. More than 180 of the programs are offered by pharmaceutical companies. Even if you have prescription insurance coverage, you may be eligible for some type of help. To contact PPA call 1-888-4PPA-NOW or 1-888-477-2669 or online at www.pparx.org.

Use the following website to see a list of most of the major pharmaceutical companies: www.ispex.ca/companies/diapharm.html. Simply click on the manufacturer of your medication and you will be re-directed to their website.

Use the attached checklist to help get your medication cost under control!



Prescription Medication Worksheet	
Use One Sheet for Each Medication	
Patient's Name	
Prescription Coverage? YES NO	
If yes, Insurance Name:	
ID #	
Group #	
Benefit %/Copay Amount:	
Name of Medication	
Strength	
Frequency	
Amount	
Brand Name (If Taking Generic)	
Manufacturer/Phone/Web Information	
Patient Assistance Program?	
Requirements	
Date Application Completed	
Date Physician Received	
Date Accepted/Denied	
Terms	