

PHARMACEUTICAL ASSISTANCE PROGRAMS

Many pharmaceutical companies provide prescription medicines free of charge to consumers and to physicians whose patients might not otherwise have access to necessary medicines. Each of the special programs offered by the pharmaceutical companies has its own set of eligibility criteria and specific instructions about making a request for assistance. In many cases, your physician is required to refer you to the pharmaceutical assistance program or to make an application on your behalf.

Most of these programs have strict eligibility requirements. Many require that a patient have no health coverage (including Medicaid or “Medigap” insurance). Some companies use income limits to ascertain eligibility.

This guide lists some of the drugs available from the different companies. Other drugs may also be available. Talk with your pharmacist or physician to find out which company makes the drug you need.

These programs may change at any time. Other programs may also be available. If you need assistance, talk to your doctor. He or she may be able to ask local sales representatives about other programs. In addition, the Pharmaceutical Research and Manufacturers of America (PhRMA) maintains a list of companies with patient assistance programs. Visit the organization’s Web site at <http://www.phrma.org> for additional information.

The following section provides information about the pharmaceutical assistance programs offered by various drug manufacturers. They are listed in alphabetical order by manufacturer.

Abbott Laboratories Patient Assistance Program

(800) 222-6885

Product: Most Abbott Laboratories products.

Physicians should call for application information.

**Agouron
Pharmaceuticals**

Agouron Patient Assistance Program

(888) 777-6637

Products: Viracept and Rescriptor

The applicant or physician may contact the program. Applications are mailed to the physician. Eligibility is determined on a case-by-case basis.

Alcon Labs

Glaucoma Assistance Program

(800) 451-3937

Products: Glaucoma medications only

Ophthalmologists must call on behalf of the patient.

Medical Needs Program

(800) 222-8103, Ext #3

Products: All non-glaucoma products

The physician must write a letter on the patient's behalf.

Allergan, Inc.

Allergan Patient Assistance Program

(800) 347-4500

Products: Alphagan, Betagen, Celluvisc, Propine, Pilagan, Epifrin, Laci-Lube, Refresh, Refresh Plus, Refresh PM, Tears Plus

The physician must send a special request letter on behalf of the patient.

**Alza
Pharmaceuticals**

Indigent Patient Assistance Program

(800) 577-3788

Products: BiCitra, Concerta, Ditropan, Elmiron, Mycelex, Neutro-Phos, PolyCitra, Testoderm, Ocusert, Progestasert

The physician must request an Indigent Patient Application Kit.

**Amarin
Pharmaceuticals**

Indigent Patient Program

(908) 580-5535

Products: Bontril, Capital and Codein oral suspension, Exgest, Hydrocet, Motofen, Nolahist, Nolahist, Phrenilin, Phrenilin Forte, Salflex

The physician must call and complete the application. The patient's income must be below the federal poverty guidelines and the patient may not have any other assistance.

Amgen, Inc.

Safety Net Programs for Epogen

(800) 272-9376

Products: Epogen

For dialysis patients only. Providers apply on behalf of their patients.

Safety Net Program for Infergen

(888) 508-8088

Products: Infergen

For Chronic Hepatitis C patients only. Providers apply on their patients' behalf.

Safety Net Program for Neupogen

(800) 272-9376

Products: Neupogen

Providers should call for an application.

AstraZeneca

AstraZeneca LP Patient Assistance Program

(800)-355-6044

Products: Atacand, Emla, Lexxel, Plendil, Prilosec, Tonocard, Toprol

The physician must apply on behalf of the patient.

Foscavir Assistance and Information on Reimbursement

State and Federal Associates

(800) 488-FAIR (3247)

Product: Foscavir

The physician must make referral.

AstraZeneca Foundation Patient Assistance Program

(800) 424-3727

Products: Many AstraZeneca products

The patient may call for application information. Eligibility is determined on a case-by-case basis.

Aventis Pasteur

Indigent Patient Program

(800) VACCINE, (800) 822-2463

Products: Imovax and Imogam rabies vaccine

Eligibility is determined on a case-by-case basis.

**Aventis
Pharmaceuticals**

Aventis Pharmaceuticals Patient Assistance Program

(800) 221-4025

Product: Many Aventis products

Patients must have income below the federal poverty guidelines and not have any other coverage. The patient or physician may contact the company.

**Bayer Corporation
Pharmaceutical
Division**

Bayer Indigent Patient Program

(800) 468-0894, Ext. 2765; (800) 998-9180

Products: Most Bayer prescription products

The physician or patient can call to determine eligibility. Patients who are eligible for government programs or covered by insurance are not eligible for this program.

Berlex Laboratories Berlex Laboratories

(800) 423-7539

Products: Betapace, Quinaglute Dura-Tabs

The enrollment form must be completed by the physician.

Oncology CamCare

(800) 473-5832

Product: Campath Fludara

A short qualification form must be completed by the physician.

Biogen, Inc.

Avonex Access Program

(800) 456-2255

Product: Avonex

Eligibility is determined based on insurance status and income. The physician should call for information.

**Boehringer
Ingleheim
Pharmaceuticals**

Patient Assistance Program

(800) 556-8317

Products: Aggrenox, Atrovent, Cafcit, Catapres, Combivent, Flomax, Micardis, Mobic, and Viramune

Eligibility is determined on a case-by-case basis. Patients who qualify for Medicaid or have other drug coverage are not eligible.

**Bristol-Myers Squibb
Company**

Patient Assistance Program
(800) 332-2056

Products: Many Bristol-Myers Squibb pharmaceutical products

Physicians or other providers should call the toll-free number above to request an application form.

Centocor, Inc.

Remicade Patient Assistance Program
(800) 964-8345

Product: Remicade

The patient or physician may submit an application. The patient must meet financial qualifications.

Centocor Solutions Program for Retavase
(800) 331-5773

Product: Retavase

The patient must meet financial criteria. The provider should contact the company and complete an application.

**Ciba
Pharmaceuticals**

See Novartis Pharmaceuticals

**DuPont
Pharmaceuticals
Company**

Patient Assistance Program
(800) 474-2762

Products: Most non-controlled prescription products

The physician should contact the company for application information. Eligibility is based on income and insurance status.

Eisai Inc.

Aricept Patient Assistance Program
(800) 226-2072

Product: Aricept

The patient may not have insurance coverage for medications and must also meet income criteria.

Aciphex Patient Assistance Program
(800) 523-5870

Product: Aciphex

The patient must meet certain financial criteria. Physicians should call for information.

Elan**Pharmaceuticals**Elan Pharmaceuticals Prescription Assistance Program

(800) 528-4362 (Patients)

(800) 621-4835 (Physicians and staff only)

Products: Permax, Zanaflex, Diastat, Mysoline, Zonegran

Patients must meet income criteria and have no third-party coverage.

Fujisawa Healthcare Prograf Patient Assistance Program

(800) 4-PROGRAF, (800) 477-6472

Product: Prograf

Patients must have no insurance coverage for medications and must meet financial eligibility criteria. Physicians should call for information.

Genentech, Inc.Genentech Assistance Program

(800) 879-4747

Products: Activase, Herceptin, Protropin, Nutropin, Rituxin, and TNKase

The physician should contact the program. A completed application form including medical, financial, and insurance information must be submitted for consideration. The patient cannot be eligible for other assistance.

Genentech Endowment for Cystic Fibrosis

(704) 357-0036

Product: Pulmozyme

Three programs can help patients who are uninsured, or can help with the out-of-pocket costs for patients who do have insurance. Assistance is based on a sliding scale. Physicians should contact the company for more information.

Genetics InstituteThe Benefix Reimbursement and Information Program

(888) 999-2349

Product: Benefix Coagulation Factor IX

The patient must meet certain financial criteria. An application must be completed by the physician and patient.

Neumega Access Program

(888) NEUMEGA (888-638-6342)

Product: Neumega

This program is for patients who meet financial eligibility criteria and are uninsured or underinsured. The physician or patient may call for information.

Genzyme Corporation

Ceredase/Cerezyme Access Program

(800) 745-4447, Ext. 17808

Products: Ceredase, Cerezyme

Eligibility is based on financial need. The patient cannot have other coverage.

Gilead Sciences, Inc. Gilead Sciences Reimbursement Support and Assistance Program

(800) 226-2056

Products: Daunoxome, Vistide

The program can assist both uninsured and insured patients with reimbursement.

GlaxoSmithKline

Glaxo Wellcome Patient Assistance Program

(800) 722-9294

Products: All current Glaxo Wellcome products for outpatient use.

Eligibility is based on information provided by a physician or advocate regarding the patient's prescription drug coverage and financial resources.

SmithKline Beecham Foundation Access to Care

(800) 546-0420, (800) 729-4544

Products: Amoxil, Augmentin, Avandia, Bactroban, Compazine, Coreg, Dyazide, Famvir, Paxil, Relafen, Requip, and Tagamet

The patient must meet financial criteria. Assistance may also be available for co-payments for insured patients. The patient and physician must complete the application.

Oncology Access to Care Program

(800) 699-3806

Product: Hycamtin

The patient or physician should call for more information about this program.

Hoechst Marion Roussel

See Aventis Pharmaceuticals

Immunex Corporation

Patient Assistance Program

(800) 321-4669

Products: Leukine, Novantrone, Amicar, Thioplex

The physician should apply on the patient's behalf. Eligibility is based on the patient's income and insurance status. The patient cannot be eligible for other assistance.

**Janssen
Pharmaceutica**

Patient Assistance Program
(800) 652-6227
(800) 523-5870 for Aciphex
Products: All Janssen prescription products

Patients must meet certain medical and financial criteria.

Aciphex Patient Assistance Program
See Eisai, Inc.

The Risperdal Patient Assistance Program and the Risperdal Reimbursement Support Program
(800) 652-6227

Eligibility is determined by financial criteria. The program also provides support obtaining insurance reimbursement.

**Knoll Pharmaceutical
Company**

Indigent Patient Program
(800) 240-3820
Products: Mavik, Rythmol, Synthroid, Tarka

Physicians should call the toll-free number above and request an evaluation form. Decisions are made on a case-by-case basis.

**Lederle
Laboratories**

See Wyeth-Ayerst Laboratories

**Eli Lilly and
Company**

Lilly Cares
(800) 545-6962
Products: Almost all prescription products; no controlled substances

Patient eligibility is determined on a case-by-case basis in consultation with the prescribing physician. Applications are given to physicians.

Gemzar Patient Assistance Program
(888) 4-GEMZAR (888-443-6927)
Product: Gemzar

Patients must meet financial criteria and have exhausted all other sources of assistance.

**The Liposome
Company**

Financial Assistance Program for Abelcet
(800) 335-5476
Product: Abelcet

The physician should call to enroll the patient. The patient must meet financial eligibility criteria and have no other source of reimbursement.

Merck and Co., Inc. Patient Assistance Program

(800) 994-2111
Products: Most Merck products

The physician should call the toll-free number above for an enrollment form. The application must be completed by the physician and patient. Eligibility is determined on a case-by-case basis.

Patient Assistance Program for Aggrastat
877-810-0595
Product: Aggrastat

Patients must meet financial eligibility criteria and have no other source of reimbursement. The program can also assist in gaining reimbursement from insurance. The physician or patient may call for information.

The Support Program for Crixivan
(800) 850-3430
Product: Crixivan

The program can assist patients in finding a payment source and may provide medication for those who meet financial criteria. The physician or patient may call for more information.

**Novartis
Pharmaceuticals**

Patient Assistance Program
(800) 257-3273
Product: Certain single-source or life-sustaining products; no controlled substances

The physician and patient must complete an application. Eligibility is determined on a case-by-case basis.

Organon, Inc. Remeron Indigent Patient Program
Product: Remeron

The physician should direct a request for assistance to a local sales representative.

Gold Star Fertility Assistance Program
Product: Follistim

Eligibility is determined on a case-by-case basis. The physician should direct a request to a local sales representative.

Ortho Biotech Inc. Procritline
(800) 553-3851
Products: Procrit (for non-dialysis use), Leustatin Injection

Call the toll-free number above; this call can help determine if a patient meets medical and financial criteria.

Ortho Dermatological Patient Assistance Program
Products: Prescription products

Patients can have no insurance coverage for medications and must have incomes below the federal poverty guidelines. The physician should request an application form.

**Ortho-McNeil
Pharmaceutical, Inc.** Patient Assistance program
(800) 797-7737
Product: Most prescription products

The physician should request an application. The patient can have no other source of reimbursement and must have income below the federal poverty guidelines.

**Otsuka America
Pharmaceutical, Inc.** RxMAP Prescription Medication Assistance Program
(800) 242-7014
Product: Pletal

Eligibility is based on the federal poverty guidelines and lack of other coverage. The physician should call for more information.

Parke-Davis See Pfizer

Pfizer Inc.Pfizer Prescription Assistance

(800) 646-4455

Products: Most outpatient products

While special application forms are not required, the physician must write a letter on the patient's behalf.

Parke-Davis Patient Assistance Program

(908) 725-1247

Products: Accupril, Accuretic, Dilantin, Estrostep, FemHRT, Lipitor, Loestrin, Neurontin, Zarontin

The physician should request an application from a local sales representative. The patient must have no other source of reimbursement.

Sharing the Care

(800) 984-1500

Products: Certain single-source products

The program operates through community, migrant, and homeless health centers. Only patients at these clinics are eligible.

Diflucan and Zithromax Patient Assistance Program

(800) 869-9979

Products: Diflucan and Zithromax

The physician should call for enrollment information. The patient must meet income eligibility criteria and may not have insurance or other assistance.

Pharmacia CorporationPatient Assistance Program

(800) 242-7014

Products: Many products

The patient or physician may initiate a request for assistance by calling the toll-free number above. An application form must be completed by the physician and patient.

Patients in Need

(800) 542-2526

Products: Aldactazide, Aldactone, Calan SR, Kerlone, Calan, Covera-HS, Norpace, Norpace CR, Arthrotec, Celebrex, Cytotec

The physician determines patient eligibility based on medical and financial guidelines. The physician should contact a local Searle representative or call on the patient's behalf.

**Proctor & Gamble
Pharmaceuticals,
Inc.**

Customer Services

(800) 830-9049

Products: Actonel, Asacol, Dantrium capsules, Didronel, Macrochantin, Macrobid

The physician and patient must complete an application form. Eligibility is determined on a case-by-case basis.

**Rhone-Poulenc
Rorer, Inc.**

See Aventis Pharmaceuticals

Roche Laboratories Medical Needs Program

(800) 285-4484

Products: Most products

The physician must request an application form. The patient may not have insurance coverage or other assistance.

Medical Needs Program for CellCept, Cytovene, and Cytovene-IV

(800) 772-5790

Products: CellCept, Cytovene, Cytovene-IV

The physician should call for information.

Medical Needs Program for Fortovase, Invirase, Cytovene, Cytovene-IV, and Hivid

(800) 282-7780

Products: Fortovase, Invirase, Cytovene, Cytovene-IV, Hivid

For HIV patients. The physician should call for more information.

Medical Needs Program for Kytril, Roferon-A, Vesanoïd, Xeloda, and Fluorouracil Injection

(800) 443-6676 (press 2 or 3)

Products: Kytril, Roferon-A, Vesanoïd, Xeloda, Fluorouracil Injection

The physician should call for information.

**Roxane Laboratories,
Inc.**

Patient Assistance Program

(800) 556-8317

Products: Oramorph SR, Roxanol, Roxanol 100, Roxicodone

Physicians must call the program to discuss their patients' eligibility. If the patient appears to meet insurance and financial eligibility, an application form will be mailed to the physician.

**Sandoz
Pharmaceutical
Corporation**

See Novartis Pharmaceuticals

Sankyo Pharma

Open Care Program
(866) 268-7327
Product: WelChol

The physician must apply on a patient's behalf. Patients must have no source of reimbursement. The program can help obtain insurance reimbursement for insured patients.

**Sanofi-Synthelabo,
Inc.**

Needy Patient Program
(800) 446-6267

Products: Several products, including Aralen, Danocrine, Primaquine

The physician should call the toll-free number or the local Sanofi Winthrop representative. Eligibility is determined on a case-by-case basis.

**Schering
Laboratories/**

Key Pharmaceuticals Commitment to Care

For Intron A/Eulexin: (800) 521-7157

For other products: (800) 656-9485

Products: Most prescription products

Patient eligibility is determined on a case-by-case basis. An application form must be completed by the physician and patient.

Searle

See Pharmacia

Serono, Inc.

Connections for Growth
(800) 582-7989
Product: Saizen

A referral must be made by the physician.

SeroCare
(800) 714-2437
Product: Serostim

The physician should call for more information.

**Sigma-Tau
Pharmaceuticals,
Inc.**

NORD/Sigma-Tau Carnitor Drug Assistance Program
(800) 999-NORD
Product: Carnitor

The patient must demonstrate financial need beyond any available reimbursement. The patient may call and submit an application.

NORD/Sigma-Tau Matulane Patient Assistance Program
(800) 999-NORD
Product: Carnitor

The patient must show financial need and the physician must feel a treatment response is possible. The patient may call for information.

**SmithKline Beecham
Pharmaceuticals** See GlaxoSmithKline

**Solvay Pharmaceuticals/
Unimed**

Pharmaceuticals Patient Assistance Program
(800) 256-8918

Products: Aceon, Creon Minimicrospheres, Estratab, Estratest, Estratest HS, Lithobid, Rowasa, Anadrol, Marinol, Teveten

The patient must meet financial eligibility criteria. The physician must call for an application form.

3M Pharmaceuticals Indigent Patient Pharmaceutical Program
(800) 328-0255
Products: Most products

Patients are considered on a case-by-case basis, based on financial need and insurance status. The physician should call for more information.

**Takeda
Pharmaceuticals
America**

Patient Assistance Program
(877) TAKEDA or 877-825-3327
Product: Actos

The patient must meet financial eligibility criteria and have no other source of reimbursement. An application is sent to the physician.

**Unimed
Pharmaceuticals** See Solvay Pharmaceuticals

**Wyeth-Ayerst
Laboratories**

Norplant Foundation

(703) 706-5933

Product: Norplant five-year contraceptive system

Eligibility is determined on a case-by-case basis. The physician should call for more information.

Rheumatoid Arthritis Assistance Foundation

(800) 282-7704

Product: Enbrel

The patient or physician should call to determine eligibility.

Patient Assistance Program

Write to:

John E. James

Professional Services IPP

555 E. Lancaster Avenue

St. Davids, PA 19087

Products: Various products

The physician must identify a patient as indigent, defined as having low or no income and not covered by any third party. A limited supply of the requested medication is provided to the physician for dispensing to the patient.

**Zeneca
Pharmaceuticals**

See AstraZeneca