

# What if I cannot afford my Medicare drug plan's copays (with or without Extra Help)?

 **Ask for help! Do not go without your medications.**

## Talk to your doctor

It is very important to tell your doctor if you cannot afford your medications with your Medicare private drug plan (Part D). Your doctor may be able to help by

- prescribing a less-costly **generic** drug instead of a brand name; **or**
- giving you a **free sample** of your medication temporarily until a less expensive covered drug that might work for you can be found.

## Talk to your plan

Your doctor **may** be able to request that your plan cover your drug (ask for an “exception”) if

- your plan drops a drug from its list of covered drugs (formulary) for any reason other than safety (including if it replaces a brand-name with a generic and only the brand-name drug will work for you);
- your plan places restrictions on the drugs you need (for example, limiting the number of pills you can get); or
- your doctor prescribes a high-copay drug on your plan's formulary (list of covered drugs) and no lower-cost drugs will work for you.

## Talk to your pharmacist

If you have **Medicare and Medicaid**, ask your pharmacist to waive the copay because you cannot afford it. Pharmacists are not allowed to do this routinely for all customers but they may do so on a case-by-case basis. If your pharmacy will not, ask friends if they know of a pharmacy in your drug plan's network that will.

 **Get your drugs by mail if you have Extra Help.**

## A 90-day supply may cost the same as a one-month supply.

If you have **Extra Help** (federal assistance) you may be able to use mail order to get a 90-day supply of your prescription for the same amount you would normally pay for a one-month supply. **Check with your plan.**

**Flip over for more money-saving suggestions** 

## Find out about assistance programs.

For information on programs in your area, call your State Pharmaceutical Insurance Assistance Program (SHIP). For your SHIP number, call **800-MEDICARE**.

### State Pharmaceutical Assistance Programs (SPAP)

Some states have programs designed to help people with low incomes pay for prescription drugs. Some SPAPs help members pay Medicare drug plan out-of-pocket costs. SPAP payments may count towards your catastrophic coverage limits.

### Charities

Some charities help with copay costs. Each program has different eligibility requirements and helps with the cost of different drugs. What these charities pay will count towards helping you reach your plan's catastrophic coverage limit. You can find a list of charities online at [www.medicarerights.org/Copay\\_Charities.pdf](http://www.medicarerights.org/Copay_Charities.pdf).

### Hospitals

Some hospitals may have a **Charity Care Policy** that can reduce your drug copays on a sliding scale (based on your income). Ask the hospital pharmacist if you qualify for help. You will then need a prescription written by a doctor in the hospital that you fill at the hospital's pharmacy. **Note:** Make sure your hospital pharmacy is in your drug plan's network so that Charity Care payments count towards your catastrophic coverage limits.

### Patient Assistance Programs (PAP)

Some drug makers provide free or low-cost medications through PAPs. Drugs you get from a PAP will not count towards your plan's catastrophic coverage limits. Each PAP has its own eligibility rules and list of covered drugs. For a list of PAPs go to: [www.needymeds.com/indices/pap.html](http://www.needymeds.com/indices/pap.html). Only some PAPs accept people who are eligible for Part D.

## Understand Catastrophic Coverage.

Once your drug costs reach a certain amount, your copays will go down significantly (catastrophic coverage). You will reach this limit faster if you take more expensive, name-brand drugs.

- **Without** Extra Help: Once you spend \$4,050 in 2008, you pay no more than **5% coinsurance**.
- **With** Extra Help: Once **total drug costs** reach \$5,726.25 in 2008:
  - **Full** Extra Help: no copays.
  - **Partial** Extra Help: you pay either \$2.25 generic/\$5.360 name-brand or 5 percent of the cost of the drugs, **whichever is greater**, in 2008.