

For more information about affordable health insurance plans
or about other state administered health programs, please call the

Wisconsin Commissioner of Insurance

Toll-Free at 1-800-236-8517

For more information about eligibility requirements for
Wisconsin Medicaid (also known as Medical Assistance)
Please call your county human services agency for information

Rock County: (608) 741-3400

Racine County: (262) 638-6353

Kenosha County: (262) 697-4500

Walworth County: (262) 741-3200

Waukesha County: (262) 548-7212

Milwaukee County: (414) 289-6817

Wisconsin Family Care

(608) 266-1865

TTY: 888-701-1251

Wisconsin Senior Care

Toll-Free at 1-800-657-2038

Wisconsin State Badger Care Program

Toll-Free at 1-800-362-3002

Federal Health Insurance Marketplace

For information about eligibility requirements
and enrollment assistance on the **Federal Health Insurance Marketplace**

You can visit: <https://www.healthcare.gov/>

You can also call the **Marketplace**

Toll-Free at **1 (800) 318-2596**

(This phone line is open 24/7 and offers assistance in both English and Spanish).

To find a **licensed Navigator or Certified Application Counselor** in your area who can
provide enrollment information and/or assist with enrollment,

You can visit: <https://localhelp.healthcare.gov/>.

A list of licensed **Wisconsin Navigators** can also be found at:

<http://e4healthwi.org/about-navigators/>.

Additional information can also be found on the
Wisconsin Office of the Commissioner of Insurance's (OCI) web site:

<http://oci.wi.gov/healthcare-reform.htm>.

The **Wisconsin Department of Health Services** has also provided information
regarding healthcare options in Wisconsin, this information is available at:

<http://www.dhs.wisconsin.gov/health-care/index.htm>.

The Library of Congress' Congressional Research Service has identified these additional resources to assist those seeking low or no-cost health care assistance:

- The Health Resources and Services Administration has compiled resources for finding affordable health care:
<http://www.hrsa.gov/gethealthcare/>
- HealthCare.gov: Find Insurance Options
<http://finder.healthcare.gov/>
- The Wisconsin Department of Health Services Consumer Guide to Health Care has resources on various topics including:
Charity Care in Wisconsin Hospitals
<http://www.dhs.wisconsin.gov/guide/spec/freehosp.htm>
- Coping with Medical Bills and Debt
<http://www.dhs.wisconsin.gov/guide/spec/probdebt.htm>
- The Patient Advocate Foundation has compiled a National Financial Resources Guidebook for Patients
<http://www.patientadvocate.org/report.php>
- The advocacy group Families USA has published *Your Medical Bills: A Consumer's Guide to Coping with Medical Debt*:
<http://www.familiesusa.org/resources/resources-for-consumers/coping-with-medical-debt.html>
- Benefits.gov can help constituents check their eligibility for other federal and state benefits. Although these programs would not pay medical expenses directly, they might provide financial relief in other ways:
<http://www.benefits.gov/>

Additional Resources for those coping with a form of Cancer:

- The American Cancer Society has compiled resources on "Finding and Paying for Treatment":
<http://www.cancer.org/Treatment/FindingandPayingforTreatment/index>
- The National Cancer Institute provides information on clinical trials:
<http://www.cancer.gov/clinicaltrials/learningabout>
- The National Cancer Institute also has a hotline: 1-800-4-CANCER (1-800-422-6237)

What is the Hill-Burton Free or Reduced-Cost Care Program?

The Hill-Burton Program, passed into law by Congress in 1946, provides funds to hospitals and other health facilities for building and modernization. In return, funded facilities agree to (1) provide a reasonable amount of free or reduced-cost care to people unable to pay, and (2) make services available to all people living in that local area.

Eligibility rules and procedures may vary by facility.

For more information, call the national toll-free hotline:

1-800-638-0742

For Maryland residents:

1-800-492-0359

The number of Hill-Burton facilities is limited, and some States have no facilities. For an updated list, visit www.hrsa.gov/hillburton/default.htm

The Hill-Burton Community Service Assurance requires that facilities must provide services without discrimination on the basis of race, color, national origin, or creed. They also may not discriminate against Medicare and Medicaid patients. For more information, call the Office for Civil Rights toll free at 1-800-368-1019.

What If I Have a Complaint?

If you believe you have been unfairly denied Hill-Burton free or reduced-cost services, a written complaint may be filed with the U.S. Department of Health and Human Services. To file a complaint, please state the facts and dates concerning the complaint. If you need assistance, call toll free at 1-800-638-0742 or for Maryland residents, 1-800-492-0359.

Complaints should be sent to:

***Director, Division of Facilities Compliance
and Recovery***

***Health Resources and Services
Administration***

***Healthcare Systems Bureau
5600 Fishers Lane, Room 10-105
Rockville, MD 20857***

Free or Reduced-Cost Health Care

***at
Participating Hospitals,
Nursing Homes, and
Other Health Care
Facilities***

Hill-Burton Program

***U.S. Department of Health and
Human Services
Health Resources and Services
Administration***

July 2010



What is Available?

- Free and reduced-cost health care is available to people who cannot afford to pay at Hill-Burton obligated facilities. These facilities must post a sign in their Admissions Office, Business Office, and Emergency Room advising people of their free and reduced-cost care obligation. The sign must read, "**NOTICE—Medical Care for Those Who Cannot Afford to Pay.**"
- Hill-Burton assisted facilities include hospitals, nursing homes, and other health care facilities. You can apply at the facility's Admissions Office or Business Office, before or after care is received and even after bills have been sent for collection.
- Hill-Burton facilities determine which services are provided free of charge or at reduced costs.
- **The program only covers facility costs; it does not cover private physician bills.**
- Hill-Burton facilities must provide a written *Individual Notice* that specifies the types of Hill-Burton free and reduced-cost services available and the income criteria. These services are reflected in the facility's published allocation plan.

Do I Qualify for Free Services?

- To qualify for services, an applicant's income must fall within the annually published Poverty Guidelines of the U.S. Department of Health and Human Services.
- If your income is at or below the current Poverty Guidelines, facility services may be free.
- If your income is more than the current Poverty Guidelines, but is less than double (or in the case of nursing homes less than triple), Hill-Burton facilities may provide services at full charge, reduced charge, or free. The *Individual Notice* will tell you what medical services and income levels qualify for free care.

How Do I Apply?

- Contact the Hill-Burton *Hot Line* for a list of obligated facilities.
- Contact the facility's Admissions Office or Business Office. Ask for an application and a copy of the facility's *Individual Notice*.
 - This notice provides information on qualifying income levels, required documentation, where to apply, and the timeframe for the facility to make the eligibility determination.
- The types of documentation that may be required are proof of income to the

facility, such as a pay stub and, if applying for Medicaid, Medicare, or some other medical assistance program, a letter of approval or denial.

- These documents must be submitted within a reasonable time after applying for Hill-Burton services.
- When you return the completed application, ask for a *Determination of Eligibility*. The facility must notify you in writing of its determination of your eligibility for free or reduced-cost services within the timeframes included on the *Individual Notice*.

Can I Be Denied?

The facility may deny your request if:

- Your income is more than the income levels in the *Allocation Plan* and as specified in the *Individual Notice*.
- The facility has given out the required amount of free care as specified in its *Allocation Plan*.
- The services you request or have received are not covered by the facility's *Allocation Plan* as specified in the *Individual Notice*.
- The services you are requesting are fully covered by Medicare, Medicaid, insurance or another medical assistance program.
- You do not provide the documents the facility requires to verify your eligibility, such as a pay stub.

[HRSA Home](#) > [Get Health Care](#) > [Get Affordable Health Care](#) > [Hill-Burton Program](#)

Hill-Burton Program

[Hill-Burton Obligated Facilities](#)

[Frequently Asked Questions](#)

[Hill-Burton Brochure](#) (PDF - 499 KB)

Compliance & Recovery

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[Waiver & Recovery](#)

[Program Policy Notices](#)

[HHS Poverty Guidelines](#)

Hill-Burton Free and Reduced-Cost Health Care

Share  6

In 1946, Congress passed a law that gave hospitals, nursing homes and other health facilities grants and loans for construction and modernization. In return, they agreed to provide a reasonable volume of services to persons unable to pay and to make their services available to all persons residing in the facility's area. The program stopped providing funds in 1997, but about 170 health care facilities nationwide are still obligated to provide free or reduced-cost care.

Since 1980, more than \$6 billion in uncompensated services have been provided to eligible patients through Hill-Burton

Steps to Apply for Hill-Burton Free or Reduced-Cost Care

1. Find the Hill-Burton obligated facility nearest you from the [list of Hill-Burton obligated facilities](#).
2. Go to the facility's admissions or business office and ask for a copy of the Hill-Burton Individual Notice. The Individual Notice will tell you what income level makes you eligible for free or reduced-cost care, what services might be covered, and exactly where in the facility to apply.
3. Go to the office listed in the Individual Notice and say you want to apply for Hill-Burton free or reduced-cost care. You may need to fill out a form.
4. Gather any other required documents (such as a pay stub to prove income eligibility) and take or send them to the obligated facility.
5. If you are asked to apply for Medicaid, Medicare, or some other financial assistance program, you must do so.
6. When you return the completed application, ask for a Determination of Eligibility. Check the Individual Notice to see how much time the facility has before it must tell you whether or not you will receive free or reduced-cost care.

More about Hill-Burton Free or Reduced-Cost Care

You are eligible to apply for Hill-Burton free care if your income is at or below the current [HHS Poverty Guidelines](#). You may be eligible for Hill-Burton reduced-cost care if your income is as much as two times (triple for nursing home care) the HHS Poverty Guidelines.

Care at a Hill-Burton obligated facility is not automatically free or reduced-cost. You must apply at the admissions or business office at the obligated facility and be found eligible to receive free or reduced-cost care. You may apply before or after you receive care — you may even apply after a bill has been sent to a collection agency.

Hill-Burton Hotline

1-800-638-0742
(1-800-492-0359 in Maryland)

Find a Health Center

ZIP:

FIND CENTERS

Need health insurance?

New! Get updates about the Health Insurance Marketplace.

[Learn more >](#)

HealthCare.gov

HELP CENTER

HealthCare.gov

Some Hill-Burton facilities may use different eligibility standards and procedures.

Hill-Burton facilities must post a sign in their admissions and business offices and emergency room that says NOTICE - Medical Care for Those Who Cannot Afford to Pay, and they must provide you with a written Individual Notice that lists the types of services eligible for Hill-Burton free or reduced-cost care, what income level qualifies for free or reduced-cost care and how long the facility may take in determining an applicant's eligibility.

Only facility costs are covered, not your private doctors' bills. Facilities may require you to provide documentation that verifies your eligibility, such as proof of income.

Hill-Burton facilities must provide a specific amount of free or reduced cost care each year, but can stop once they have given that amount. Obligated facilities publish an Allocation Plan in the local newspaper each year. The Allocation Plan includes the income criteria and the types of services it intends to provide at no cost or below cost. It also specifies the amount of free or reduced cost services it will provide for the year.

When you apply for Hill-Burton care, the obligated facility must provide you with a written statement that tells you what free or reduced-cost care services you will get or why you have been denied.

The facility may deny your request if

- Your income is more than the income specified in the Allocation Plan.
- The facility has given out its required amount of free care as specified in its Allocation Plan
- The services you requested or received are not covered in the facility's Allocation Plan.
- The services you requested or received are to be paid by a governmental program such as Medicare/Medicaid or insurance.
- The facility asked you to apply for Medicare/Medicaid or other governmental program, and you did not.
- You did not give the facility proof of your income, such as a pay stub.

You may file a complaint with the U.S. Department of Health and Human Services if you believe you have been unfairly denied Hill-Burton free or reduced-cost care. Your complaint must be in writing and can be a letter that simply states the facts and dates concerning the complaint. You may call your local legal aid services for help in filing a complaint. Send complaints to:

Director, Division of Poison Control and Healthcare Facilities
5600 Fishers Lane
Room 10-105
Rockville, MD 20857



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Hill-Burton Facilities Obligated to Provide Free or Reduced-Cost Health Care

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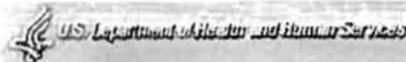
Total Obligated Facilities: 162 (9/13/2013)

No Obligated Facilities: Alaska, Indiana, Maryland, Minnesota, Nebraska, Nevada, North Dakota, Rhode Island, South Dakota, Utah, Vermont, Wyoming and all the territories except Puerto Rico.

ST	Facility Name & Address	Facility Type	ID	REGULATION*
AL	AUTAUGAVILLE FAM HLTH C 203 NORTH TAYLOR ST, BOX 339 AUTAUGAVILLE 36003 334-365-4524	Outpatient Facility	010213	515
AL	WILCOX CO HEALTH CTR 107 UNION STREET, PO BOX 547 CAMDEN 36726 334-682-4515	Public Health Center	010210	PFCA
AL	CHILDRENS & WOMENS HOSP 1700 CENTER STREET MOBILE 36604 251-415-1000	General Hospital	010214	Standard
AL	COLBERT CO HEALTH CTR 1000 SOUTH JACKSON HIGHWAY SHEFFIELD 35660 256-383-1231	Public Health Center	010211	PFCA
AR	SEBASTIAN CO HLTH DEPT 3112 SOUTH 70TH ST FORT SMITH 72901 479-452-8600	Public Health Center	050112	PFCA
AR	PHILLIPS CO HEALTH CTR PO BOX 2627 WEST HELENA 72390 870-572-9028	Public Health Center	050111	PFCA
AZ	MARIPOSA COMM HLTH CTR 1852 NORTH MASTIC WAY NOGALES 85621 520-281-1550	Outpatient Facility	040052	515
AZ	EL RIO SANTA CRUZ HC 839 WEST CONGRESS ST TUCSON 85745 502-792-9890	Outpatient Facility	040038	515
CA	CL DE SALUD DEL PUEBLO 1166 K STREET, BOX 1279 BRAWLEY 92227 760-344-6471	Outpatient Facility	060304	515
CA	FAIRVIEW DEVELPMNTL CTR 2501 HARBOR BLVD COSTA MESA 92626 714-957-5101	Mental Hospital	060298	Standard
CA	SOUTHERN INYO HOSP 501 EAST LOCUST, BOX 890 LONE PINE 93545 760-876-5501	General Hospital	060095	UACA

	SEATTLE 98112 206-322-5300			
WA	ROSEHEDGE 12718 15TH AVENUE, N.E SEATTLE 98125 206-365-6806	Nursing Home	530097	CFCA
WI	ANNA JOHN Nursing Home P O BOX 365 ONEIDA 54155 920-869-2797	Nursing Home	550021	UACA
WI	MILWAUKEE CO MHC 9455 WATERTOWN PLANK RD WAUWATOSA 53226 414-257-7483	Mental Hospital	550123	PFCFA
WV	EGLON CLINIC PO BOX 8 EGLON 26716 304-735-3155	Outpatient Facility	540083	515
WV	MARSHALL UNIV MED CTR 1600 MEDICAL CENTER DRIVE HUNTINGTON 25701 304-691-1600	Outpatient Facility	540084	Standard
WV	ROBERT BYRD HLTH SCIENC 1ST FLOOR, MED CENTER DRIVE MORGANTOWN 26506 304-293-3528	Outpatient Facility	540085	PFCFA

* PFCFA, CFCA, UACA and 515 facilities are certified under a compliance alternative. Their programs may be called either a free care, charity care, discounted services, indigent care, etc, and may have different eligibility and financial criteria. 91-01 facilities include this medical building.



Health Resources and Services Administration



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Frequently Asked Questions

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- **What services are covered under the Hill-Burton program?**
Each facility chooses which services it will provide at no or reduced cost. The covered services are specified in a notice which is published by the facility and also in a notice provided to all persons seeking services in the facility. Services fully covered by a third-party insurance or a government program (e.g., Medicare and Medicaid) are not eligible for Hill-Burton coverage. However, Hill-Burton may cover services not covered by the government programs.
- **Can I receive Hill-Burton assistance to cover my Medicare deductible and coinsurance amounts or Medicaid co-pay and spenddown amounts?**
Medicare deductible and coinsurance amounts are not eligible under the program. However, Medicaid co-payment amounts are eligible, except in a long-term care facility. In addition, Medicaid spenddown amounts (the liability a patient must incur before being eligible for Medicaid) are eligible in all Hill-Burton facilities.
- **Where can I get Hill-Burton free or reduced cost care?**
Hill-Burton obligated facilities are obligated to provide a certain amount of free or reduced-cost health care each year. Obligated facilities may be hospitals, nursing homes, clinics or other types of health care facilities. See the [Hill-Burton Obligated Facilities List](#) to find a Hill-Burton obligated facility in your State. You may apply for free or reduced-cost care before or after they are provided at the Admissions Office, Business Office or Patient Accounts Office at the obligated facility.
- **Who can receive free or reduced cost care through the Hill-Burton program?**
Eligibility for Hill-Burton free or reduced cost care is based on a person's family size and income. Income is calculated based on your actual income for the last 12 months or your last 3 month's income times 4, whichever is less. You may qualify if your income falls within the U.S. Department of Health and Human Services poverty guidelines or, at some facilities, if your income is as much as twice (or triple for nursing home services) the poverty guidelines. For complete information on the Hill-Burton program, including the list of facilities obligated to provide it and a link to the poverty guidelines, please see the Hill-Burton Web site.
- **What does "Income" include?**
Gross income (before taxes), interest/dividends earned, and child support payments are examples of income. Assets, food stamps, gifts, loans or one-time insurance payments are examples of items not included as income when considering eligibility. For self-employed people, income is determined after deductions for business expenses. For more specific information, see the revised poverty guidelines.
- **When can I apply for Hill-Burton assistance?**
You may apply for Hill-Burton assistance at any time, before or after you receive care. You may even apply after a bill has been sent to a collection agency. If a hospital obtains a court judgment before you applied for Hill-Burton assistance, the solution must be worked out within the judicial system. However, if you applied for Hill-Burton before a judgment was rendered and are found eligible, you will receive Hill-Burton even if a judgment was rendered while you were waiting for a response to your application.
- **Is United States citizenship required for Hill-Burton eligibility?**
No. However, in order for a person to have a Hill-Burton eligibility determination made, one must have lived in the U.S. for at least 3 months.
- **Can I apply for Hill-Burton assistance on behalf of an uninsured relative or friend?**
Yes. You can apply for Hill-Burton assistance on behalf of any patient for whom you can provide the information required to establish eligibility, (i.e., you must be able to provide information regarding the patient's family size and income.)
- **Do I have to wait until I am sick before I can apply for Hill-Burton assistance?**
Hill-Burton is not health insurance. In order to apply for Hill-Burton assistance you must have already received services or know that you will require a specific service in the near future.
- **What are some reasons I could be denied Hill-Burton care?**
The facility may deny your request if:
for non-nursing homes, your income is more than the current poverty guidelines, or more than twice the guidelines if specified in the facility's allocation plan;
for nursing home services, your income is more than the poverty guidelines, or double or triple the guidelines, if specified in the facility's allocation plan;
the facility has given out its required amount of free care as specified in its allocation plan; the services you requested or received are not covered in the facility's allocation plan.

the services you requested or received are to be paid by Medicare/Medicaid, insurance or other financial assistance program;

the facility asks you to first apply for Medicaid/Medicare or a financial assistance program, and you do not cooperate;

you do not give the facility requested proof of your income, such as a pay stub.

■ **What can I do if I have a complaint against a Hill-Burton facility?**

If you feel you were unfairly denied free care or reduced cost care, a complaint must be filed in writing to the Central Office. You must include: 1) the name and address of the person making the complaint; 2) the name and location of the facility, and 3) a statement of the actions that the complainant considers to violate the requirements of the Hill-Burton program.

Division of Facilities Compliance and Recovery
Parklawn Building
5800 Fishers Lane
Room 18C-17
Rockville, Maryland 20857

■ **What other service obligation does a Hill-Burton facility have?**

Under the community service assurance, Hill-Burton facilities are responsible for providing emergency treatment and for treating all persons residing in the service area, regardless of race, color, national origin, creed or Medicare or Medicaid status. This assurance is in effect for the life of the facility. If you feel you were unfairly denied services or discriminated against you should contact the Office for Civil Rights (OCR) at 1-800-368-1019.

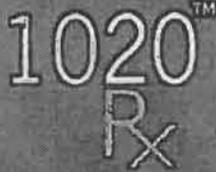
■ **How do I apply for free care?**

You should contact the Admissions, Business or Patient Accounts Office at a Hill-Burton obligated facility to find out if you qualify for assistance and whether or not a facility provides the specific services needed.

■ **How can I find out which facilities in my area are Hill-Burton facilities?**

Check our [Hill-Burton Obligated Facilities List](#) for a facility in your State. Be aware that although a facility may be listed, you still need to call the facility to be certain that it still has funds available and that the service you desire would be covered.

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**Pay a Maximum of \$10 or \$20
for select Generic and Brand
Name Prescription Drugs!***

1.800.7.1020RX

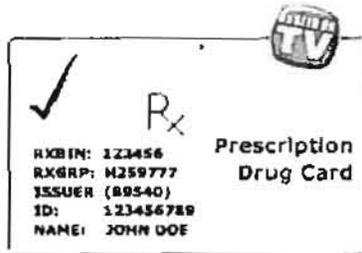
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Individuals
Family

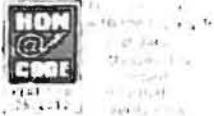
Join Now
and Save \$5.00

Welcome to 1020 RX Prescription Plan

Let us show you how you and your family can access immediate savings that will save you money on virtually every prescription medication you may ever need. Our discount plan offers you the following benefits:



- Pay a Maximum of \$10 or \$20 or \$40 for select Generic and Brand Name Prescription Drugs!*
- No age limits
- No health restrictions
- No limitation of use
- No reimbursement procedures
- No paperwork, you pay the discounted amount at the time of your visit
- No prescription coupons
- Use immediately when you receive your card
- Network of over 60,000 pharmacies
- Savings of 10% to 85% on the rest of the medications
- Member savings on medical and diabetic supplies
- Individual and family options
- Business and group rates available
- 30-Day Money Back Guarantee



The 1020 RX Tiered Pricing Pharmacy Plan saves you money and takes the guess work out of paying for prescription medications. Our discount plan segments brand name and generic drugs into three price classifications making it easy for you to consult with your health care provider to find the most effective medication at the lowest cost. Discounts also apply to drugs not listed in one of the following tiers, as well as, maintenance medications purchased through the mail order pharmacy program.

Our three-tiered drug pricing structure includes:

- Tier I** Preferred brand and generic drugs available for \$10 or less for the scheduled quantity and dose
- Tier II** Preferred brand and generic drugs available for \$20 or less for the scheduled quantity and dose
- Tier III** Preferred brand and generic drugs available for \$40 or less for the scheduled quantity or dose

1020RX offers prescription solutions for real savings program, and is not insurance. The advantages to you, the customer is that is no paperwork, no age limits, no coupons and no

[Submit](#)



limitation of use. You can use our plan as often as you need, for as long as you maintain your membership. The potential savings are limitless!

Simply present your prescription card to your pharmacist and save every time you fill your prescription!

Click Here to Join Now Risk Free 30-day Trial. If not satisfied for any reason - cancel and we will refund 100% of your membership fee. No questions asked.

Disclosures

This is not insurance nor is it intended to replace insurance. This discount card program contains a 30 day cancellation period.

For a full list of disclosures, please [click here](#). | [Terms and Conditions](#) |

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Pay a Maximum of \$10 or \$20 for select Generic and Brand Name Prescription Drugs!*

1.800.7.1020RX

Join Now and Save \$5.00

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- Member Benefits
- Drug Savings
- Drug Search
- Participating Pharmacies
- Member Search Page
- Site Feedback
- Home & Groups
- Member Online Now
- Questions
- Contact Us

Individuals Family

How does the plan work?

You now have 3 separate ways to ensure savings on your prescription bills:

1. Select generic and brand name Tier 1, Tier 2 and Tier 3 drugs are a maximum \$10, \$20 and \$40*. Over 60,000 participating provider pharmacies: Rite Aid, Medicine Shoppe, Walgreens, and most major chains.
2. Virtually all other drugs (Tier 4) are offered to our members at special negotiated rates.
3. Members can opt to use the Mail Order Option for a significant price reduction and the convenience of delivery right to your door.

Bonus: As a 1020Rx Plan member you will receive diabetic supplies, hearing aids and vitamins at the absolute lowest prices available!



ABOUT SSL CERTIFICATES



Our Guarantee to you:

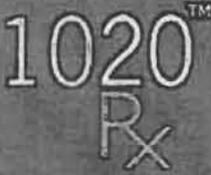
If our plan does not save you more money or you are not satisfied for any reason whatsoever, simply cancel in the first 30 days and we will refund 100% of your member fee. No questions asked.

[Click Here](#) to sign up and start Saving right Now!



enter your email for regular use, updates and offers

Submit





Pay a Maximum of \$10 or \$20
for select Generic and Brand
Name Prescription Drugs!*

1.800.7.1020RX

- How The Plan Works
- Member Benefits
- Drug Savings
- Drug Search
- Participating Pharmacies
- Other Benefit Plans
- Locate Providers
- Business & Groups
- Register Online Now
- Testimonials
- FAQ

Individuals Family

Join Now
and Save \$5.00

Drug Savings Examples

At your neighborhood pharmacy

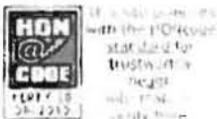
Drug	Strength/Quantity	Retail Price	Discounted Price	Tier	Percentage Savings
Allegra	30 mg, 30 qty	\$35.99	\$23.66	Three	34%
Ambien	5 mg, 30 qty	\$90.89	\$72.56	Five	20%
Premarin Tabs	.9 mg, 30 qty	\$45.89	\$12.21	Two	73%
Prevacid	15 mg, 30 qty	\$147.09	\$129.06	Non-tier	12%
Synthroid	25 mcg, 30 qty	\$15.36	\$13.03	Two	15%
Zithromax Z-Pack	1g, 1 qty	\$61.99	\$29.37	Three	53%

At our mail order pharmacy

Drug	Dosage	Medication Use	Insurance	Retail Pharmacy**	1020Rx Mail-Order Pharmacy
Procrit	5,000 ml	Increase Red Cells	\$45.41 *	\$45.41	\$40.41
Albuterol Proventil/Ventolin	17gm	Breathing	\$15.00	\$20.20	\$13.70
Levothyroxin/Levoxyl	.05mg	Thyroid	\$15.00	\$8.35	\$4.28
Oxybutynin Chlor	5mg	Bladder	\$15.00	\$8.57	\$12.86
Estradiol/ Estrace	.5mg	Estrogen/Hormone Replacement	\$15.00	\$5.90	\$2.98
Hydrocodone	7.5mg	Back Pain	\$15.00	\$6.59	\$6.86
Carisoprodol	350mg	Muscle Spasms	\$15.00	\$27.35	\$10.07
Amitriptyline/Elavil	25mg	Sleeping Pill/Depression	\$15.00	\$10.02	\$6.10
Clopidigrel (Plavix)	75mg	Blood Thinner	\$121.79 *	\$121.79	\$92.74
Niaspan/Niacin	500mg	Lower Triglycerides	\$31.52 *	\$31.52	\$18.88
Lanoxin/ Dixoxin	.125mg	Blood Pressure	\$15.00	\$4.83	\$4.27
Atacand	16mg	Blood Pressure	\$48.16 *	\$48.16	\$35.02
Furosemide (Lasix)	80mg	Water Pill	\$15.00	\$17.03	\$8.13
Zocor	40mg	Lower Cholesterol	\$108.17 *	\$108.17	\$103.66
Carvedilol/ Coreg	12.5mg	Strengthen Heart Muscle	\$87.29 *	\$87.29	\$82.29



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Colchicine	.6mg	Gout	\$15.00	\$6.68	\$3.33
Nitrostat/ Nitrolingual	1/150 .4mg tab	Chest Pain	\$15.00	\$6.87	\$5.08
Ecotrin	325mg	Heart			
Totals			\$607.34	\$564.73	\$450.66

* Medications not covered by Insurance.

**Arlington Plaza Pharmacy 900 W Randol Mill Rd # 100, Arlington, TX 76012

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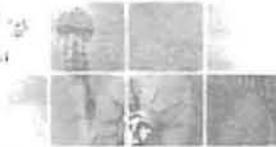
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Dallas, TX 75367-1309
800-800-7616

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This plan is NOT insurance. This plan does not make payments directly to the providers of medical services. The plan member receives services but will receive a discount from those healthcare providers who have contracted with the discount plan organization. Thus, the plan member pays less for healthcare providers for medical services.

This discount card program contains a 30 day cancellation period.

FL, GA, MS, ND, OK, RI, SC, SD and TX residents: Member shall receive a full refund of membership fees, excluding registration fee, within the first 30 days after the effective date. AR and TN residents: A refund of all fees will be issued if membership is cancelled within 30 days of the effective date. Membership fee and one-time registration fee (minus \$5.00) will be refunded if canceled within the first 30 days and upon return of plan card. This plan is not insurance coverage and does not meet the minimum creditable coverage requirements under M.G.L. c. 111M and 956C. Medical or ancillary services provided under the plan will vary depending on the type of provider and medical or ancillary service program makes available. Before purchase and upon request, a list of program providers, including the name, city, state, and special service area of the cardholder's service area.

Regulated discount benefits are not available in the state of Washington, at this time.

WA residents: If a member cancels his or her membership in the discount plan organization within the first thirty days after the date of purchase of the discount plan, the member must receive a reimbursement of all periodic charges upon return of the discount plan card to the discount plan organization.

1. (A) Cancellation occurs when notice of cancellation is given to the discount plan organization. (B) Notice of cancellation is given by mail in a mailbox, properly addressed and postage prepaid to the mailing address of the discount plan organization, or e-mailed to the discount plan organization.
2. (A) discount plan organization shall return in full any periodic charge charged or collected after the member has given the discount plan organization notice of cancellation. (B) If the discount plan organization cancels a membership for any reason other than nonpayment of charges by the member, the discount plan organization shall make a pro rata reimbursement of all periodic charges to the member.

If a resident of the state of Washington remains dissatisfied after completing the organization's complaint process, the plan member may file a complaint with the Washington State Insurance Commissioner at:

Washington Office of the Insurance Commissioner
P.O. Box 40256
Olympia, WA 98504-0256
800-562-6900
www.insurance.wa.gov

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The research-based pharmaceutical industry has had a long standing tradition of providing prescription medications free of charge to physicians whose patients might not otherwise have access to necessary medications.

The list below contains the name and telephone numbers of companies that I have found to have such indigent programs in place.

If anyone knows of any other programs in place, let me know and I will include them on the list.

Company	Program Name	For More Information Call
Abbott Laboratories	Patient Assistance Program	(800) 222-6885
Agouron Pharmaceuticals	Agouron Patient Assistance Program	(888) 777-6637
Alza Pharmaceuticals	Indigent Patient Assistance Program	(800) 577-3788
Amgen	Safety Net	(800) 272-9376 (866)546-3738 for Kineret
AstraZeneca	Patient Assistance Program	800-424-3727 (800) 488-3247 for Foscavir
Aventis Psteur	Indigent Patient Program	(800) 822-2463
Aventis Pharmaceuticals	Aventis Pharmaceuticals Patient Assistance Program	(800) 221-4025 (888) 632-8607 for Lovenox
Bayer - Pharmaceutical	Bayer Indigent Patient Program	(800) 998-9180
Berlex Laboratories	Berlex Patient Assistance Program	(888) 237-5394, option 6, option 1 (800) 948-5777 for Betaseron
Biogen	Avonex Access Program	(800) 456-2255
Boehringer Ingelheim	Boehringer Ingelheim Cares Foundation	(800) 556-8317
Bristol-Myers Squibb	Bristol-Myers Squibb Patient Assistance Program	(800) 332-2056
Centocor	Remicade Patient Assistance Program	(866) 489-5957 (800) 331-5773 for Retavase
Ciba Pharmaceuticals	see Novartis	see Novartis
Dupont Pharmaceuticals Company	see Bristol Myers Squibb	see Bristol Myers Squibb
Eisai	Aricept Patient Assistance Program	(800) 226-2072 (800) 523-5870 for Aciphex
Elan Pharmaceuticals	Elan Pharmaceuticals Patient Assistance Program	(866)347-3185

Fujisawa Healthcare	Patient Assistance Program	(800) 477-6472
Genentech, Inc.	Genentech Patient Assistance Program	(800)879-4747 (800) 297-5557 for Cystic Fibrosis Patients (800) 530-3083 for Herceptin or Rituxan
Genetics Institute, Inc.	Benefix Reimbursement and Information Program	(888)999-2349 (888) 638-6342 for Neumega
Genzyme Corp.	CAP Program	(800)745-4447
Gilead Sciences, Inc.	Gilead Sciences Reimbursement Support and Assistance Program	(800) 226-2056
GlaxoSmithKline	Glaxo Wellcome Patient Assistance Program	(800) 722-9294 (800) 546-0420 for SmithKlein Beecham Foundation Access to Care (800) 699-3806 for Oncology products (888) 825-5249 for Orange Card for seniors
Hoechst Marion Roussel, Inc.	see Aventis	see Aventis
Immunex Corp.	Immunex Patient Assistance Program	(800)321-4669
Janssen Pharmaceutica	Janssen Patient Assistance Program	(800) 652-6227 (800) 523-5870 for Aciphex (866) 736-4695 for Reminyl (800) 652-6227 for Risperdal
Lederle Laboratories	see Wyeth	see Wyeth
Eli Lilly and Company	Lilly Cares	(800) 545-6962 (877) 795-4559 for LillyAnswers (888) 443-6927 for Gemzar
The Liposome Company	see Elan	see Elan
Merck and Co.	The Merck Patient Assistance Program	(800) 994-2111 (877) 810-0597 for Aggrastat (800)850-3430 for Crixivan
Novartis	Novartis Patient Assistance Program	1-800-277-2254 (866) 974-2273 for Novartis Card Card
Organon Inc.	Remeron Indigent Patient Program	call local sales rep.
Ortho-Biotech Inc.	Procrit Line	(800) 553-3851 (800) 609-1083 for Doxil
Ortho Dermatological	Ortho Dermatological Patient Assistance Program	(800) 797-7737
Ortho-McNeil Pharmaceutical Corp.	Ortho-McNeil Patient Assistance Program	(800) 797-7737

Otsuka America Pharmaceutical Inc.	RxMAP Prescription Medication Assistance Program	(800) 242-7014
Parke-Davis	see Pfizer	see Pfizer
Pfizer Inc.	Pfizer Prescription Assistance	(800) 646-4455 (908) 725-1247 for Parke-Davis Patient Assistance Program (800) 984-1500 for Sharing the Care (800) 869-9979 for Diflucan and Zithromax (866) 443-6366 for Geodon Patient Assistance (800) 717-6005 for Pfizer for Living Share Card Program for Aricept see Eisai Inc. In Arkansas call The Arkansas Health Care Access Foundation at (800) 950-8233 In Kentucky call Kentucky Health Care Access Foundation at (800) 633-8100 In S. Carolina call Commun-I-Care at (800) 763-0059
Pharmacia Corp.	Pharmacia Patients in Need (PIN) Foundation	(800) 242-7014 (877) 744-5675 for TeamFirst (800) 645-1280 for Genotropin
Procter and Gamble Pharmaceuticals Inc.	Procter and Gamble Pharmaceuticals Patient Assistance Program	(800) 830-9049
Rhône-Poulenc Rorer, Inc.	see Avantis	see Avantis
Roche Laboratories	Roche Medical Needs Program	(800) 285-4484 (800) 772-5790 for CellCept and Cytovene (800) 282-7780 for HIV Assistance (800) 443-6676 press 2 or 3 for Oncoline / Hepline (800) 260-7785 for Xenical
Sandoz Pharmaceuticals Corp.	see Novartis	see Novartis
Sankyo Pharma	Sankyo Pharma Open Care Program	(866) 268-7327
Sanofi Winthrop Pharmaceuticals	Needy Patient Program	(800) 446-6267
Schering Labs / Key	Commitment to Care	(800) 521-7157 for Intron A/Eulexin

Pharmaceuticals		(800) 656-9485 for other products
Searle	see Pharmacia	see Pharmacia
Serono Laboratories, Inc.	Serono Connections for Growth	(800) 582-7989 (800) 714-2437 for Serostrim for treatment of AIDS Wasting
Sigma-Tau Pharmaceuticals	NORD/Sigma-Tau Carnitor Drug Assistance Program	(800) 999-NORD
SmithKline Beecham Pharmaceuticals	see GlaxoSmithKline	see GlaxoSmithKline
Solvay Pharmaceuticals, Inc.	Patient Assistance Program	(800) 256-8918
3M Pharmaceuticals	Ingident Patient Pharmaceutical Program	(800) 328-0255
Takeda Pharmaceuticals America	Patient Assistance Program	(877) 825-3327
Unimed Pharmaceuticals Inc.	see Solvay	see Solvay
Wyeth Pharmaceuticals	Norplant Foundation	(703) 706-5933 (888) 436-2735 for Enbrel

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The National Institutes of Health (NIH), a part of the U.S. Department of Health and Human Services, is the nation's medical research agency making important discoveries that improve health and save lives.

Thanks in large part to NIH funded medical research, Americans today are living longer and healthier. Life expectancy in the United States has jumped from 47 years in 1900 to 78 years as reported in 2009, and disability in people over age 65 has dropped dramatically in the past 3 decades. In recent years, nationwide rates of new diagnoses and deaths from all cancers combined have fallen significantly.

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NIH is the largest source of funding for medical research in the world, creating hundreds of thousands of high-quality jobs by funding thousands of scientists in universities and research institutions in every state across America and around the globe.

NIH is made up of 27 Institutes and Centers, each with a specific research agenda, often focusing on particular diseases or body systems. NIH leadership plays an active role in shaping the agency's research planning, activities, and outlook.

The Office of the Director is the central office at NIH, responsible for setting policy for NIH and for planning, managing, and coordinating the programs and activities of all the NIH components. The NIH Director, with a unique and critical perspective on the entire agency, is responsible for providing leadership to the Institutes and for constantly identifying needs and opportunities, especially for efforts that involve multiple Institutes. The NIH Director is assisted by the NIH Deputy Directors, including the Principal Deputy Director, who shares in the overall direction of the agency's activities.

NIH is responsive to Congressional legislation that adjusts NIH's programs to meet changing research needs. As a result of the NIH reauthorization process, NIH is able to respond strategically in an era when medical research requires constant innovation and increased interdisciplinary efforts.

More than 80% of the NIH's budget goes to more than 300,000 research personnel at over 3,000 universities and research institutions. In addition, about 6,000 scientists work in NIH's own Intramural Research Laboratories, most of which are on the NIH main campus in Bethesda, Maryland. The main campus is also home to the NIH Clinical Center, the largest hospital in the world totally dedicated to clinical research.

NIH Facts
Common Questions
Mission & Goals

NIH Director
Francis S. Collins, M.D., Ph.D.

Headquarters
Bethesda, Maryland, USA

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Revolutionary ideas often come from unexpected directions. Here are some of the main research areas that NIH supports:

- Chronic Diseases
- Infectious Diseases
- Personalized Medicine & New Technologies
- Health at All Ages

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Successful biomedical research depends on the talent and dedication of the scientific workforce. NIH supports many innovative training programs and funding mechanisms that foster scientific creativity and exploration. The goal is to strengthen our nation's research capacity, broaden our research base, and inspire a passion for science in current and future generations of researchers.

NIH encourages and depends on public involvement in federally supported research and activities. NIH's wide-ranging public efforts include outreach and education, nationwide events, requests for public input on NIH projects, and special programs designed specifically to involve public representatives in clinical research.

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For over a century, NIH scientists have paved the way for important discoveries that improve health and save lives. In fact, more than 130 Nobel Prize winners have received support from NIH. Their studies have led to the development of MRI, understanding of how viruses can cause cancer, insights into cholesterol control, and knowledge of how our brain processes visual information, among dozens of other advances. [Read more about NIH history](#)

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The Basics

1. What are clinical trials and why do people participate?
2. What is clinical research?
3. Who participates in clinical trials?
4. What do I need to know if I am thinking about participating?
5. What questions should I ask if offered a clinical trial?
6. How am I protected?
7. What happens after a clinical trial is completed?
8. How does the outcome of clinical research make a difference?



1. WHAT ARE CLINICAL TRIALS AND WHY DO PEOPLE PARTICIPATE?

Clinical trials are part of clinical research and at the heart of all medical advances. Clinical trials look at new ways to prevent, detect, or treat disease. Treatments might be new drugs or new combinations of drugs, new surgical procedures or devices, or new ways to use existing treatments. The goal of clinical trials is to determine if a new test or treatment works and is safe. Clinical trials can also look at other aspects of care, such as improving the quality of life for people with chronic illnesses.

People participate in clinical trials for a variety of reasons. Healthy volunteers say they participate to help others and to contribute to moving science forward. Participants with an illness or disease also participate to help others, but also to possibly receive the newest treatment and to have the additional care and attention from the clinical trial staff. Clinical trials offer hope for many people and an opportunity to help researchers find better treatments for others in the future.

2. WHAT IS CLINICAL RESEARCH?

Clinical research is medical research that involves people like you. People volunteer to participate in carefully conducted investigations that ultimately uncover better ways to treat, prevent, diagnose, and understand human disease. Clinical research includes trials that test new treatments and therapies as well as long-term natural history studies, which provide valuable information about how disease and health progress.

The idea

The idea for a clinical research study—also known as a clinical trial—often originates in the laboratory. After researchers test new therapies or procedures in the laboratory and in animal studies, the most promising experimental treatments are moved into clinical trials, which are conducted in phases. During a trial, more information is gained about an experimental treatment, its risks, and its effectiveness.

The protocol

Clinical research is conducted according to a plan known as a protocol. The protocol is carefully designed to safeguard the participants' health and answer specific research questions. A protocol describes the following:

- Who is eligible to participate in the trial
- Details about tests, procedures, medications, and dosages
- The length of the study and what information will be gathered

A clinical study is led by a principal investigator (PI), who is often a doctor. Members of the research team regularly monitor the participants' health to determine the study's safety and effectiveness.

Protocol review

Each clinical trial in the United States must be approved and monitored by an Institutional Review Board (IRB) to ensure that the risks are minimal and are worth any potential benefits. An IRB is an independent committee that consists of physicians, statisticians, and members of the community who ensure that clinical trials are ethical and that the rights of participants are protected. Federal regulation requires all institutions in the United States that conduct or support biomedical research involving people to have an IRB initially approve and periodically review the research.

Sponsors

Clinical trials are sponsored or funded by various organizations or individuals, including physicians, foundations, medical institutions, voluntary groups, and pharmaceutical companies, as well as federal agencies such as the National Institutes of Health and the Department of Veterans Affairs.

Informed consent

Informed consent is the process of providing potential participants with the key facts about a clinical trial before they decide whether to participate. The process of informed consent (providing additional information) continues throughout the study. To help someone decide whether or not to participate, members of the research team explain the details of the study. Translation or interpretive assistance can be provided for participants with limited English proficiency. The research team provides an informed consent document that includes details about the study, such as its purpose, duration, required procedures, and who to contact for further information. The informed consent document also explains risks and potential benefits. The participant then decides whether to sign the document. Informed consent is not a contract. Volunteers are free to withdraw from the study completely or to refuse particular treatments or tests at any time. Sometimes, however, this will make them ineligible to continue the study.

Types of clinical trials

There are different types of clinical trials.

- **Natural history studies** provide valuable information about how disease and health progress.
- **Prevention trials** look for better ways to prevent a disease in people who have never had the disease or to prevent the disease from returning. Better approaches may include medicines, vaccines, or lifestyle changes, among other things.
- **Screening trials** test the best way to detect certain diseases or health conditions.
- **Diagnostic trials** determine better tests or procedures for diagnosing a particular disease or condition.
- **Treatment trials** test new treatments, new combinations of drugs, or new approaches to surgery or radiation therapy.
- **Quality of life trials** (or supportive care trials) explore and measure ways to improve the comfort and quality of life of people with a chronic illness.

Phases of clinical trials

Clinical trials are conducted in "phases." Each phase has a different purpose and helps researchers answer different questions.

- **Phase I trials:** Researchers test an experimental drug or treatment in a small group of people (20-80) for the first time. The purpose is to evaluate its safety and identify side effects.
- **Phase II trials:** The experimental drug or treatment is administered to a larger group of people (100-300) to determine its effectiveness and to further evaluate its safety.
- **Phase III trials:** The experimental drug or treatment is administered to large groups of people (1,000-3,000) to confirm its effectiveness, monitor side effects, compare it with standard or equivalent treatments, and collect information that will allow the experimental drug or treatment to be used safely.
- **Phase IV trials:** After a drug is approved by the FDA and made available to the public, researchers track its safety, seeking more information about a drug or treatment's risks, benefits, and optimal use.

Some concepts to understand

Typically, clinical trials compare a new product or therapy with another that already exists to determine if the new one is as successful as, or better than, the existing one. In some studies, participants may be assigned to receive a placebo (an inactive product that resembles the test product, but without its treatment value).

Comparing a new product with a placebo can be the fastest and most reliable way to demonstrate the new product's therapeutic effectiveness. However, placebos are not used if a patient would be put at risk—particularly in the study of treatments for serious illnesses—by not having effective therapy. Most of these studies compare new products with an approved therapy. Potential participants are told if placebos will be used in the study before they enter a trial.

Randomization is the process by which two or more alternative treatments are assigned to volunteers by chance rather than by choice. This is done to avoid any bias with investigators assigning volunteers to one group or another. The results of each treatment are compared at specific points during a trial, which may last for years. When one treatment is found superior, the trial is stopped so that the fewest volunteers receive the less beneficial treatment.

In *single-or-double-blind studies*, also called single- or double-masked studies, the participants do not know which medicine is being used, so they can describe what happens without bias. "Blind" (or "masked") studies are designed to prevent members of the research team or study participants from influencing the results. This allows scientifically accurate conclusions. In single-blind ("single-masked") studies, only the patient is not told what is being administered. In a double-blind study, only the pharmacist knows; members of the research team are not told which patients are getting which medication, so that their observations will not be biased. If medically necessary, however, it is always possible to find out what the patient is taking.

3. WHO PARTICIPATES IN CLINICAL TRIALS?

Many different types of people participate in clinical trials. Some are healthy, while others may have illnesses. A **healthy volunteer** is a person with no known significant health problems who participates in clinical research to test a new drug, device, or intervention. Research procedures with healthy volunteers are designed to develop new knowledge, not to provide direct benefit to study participants. Healthy volunteers have always played an important role in research.

Healthy volunteers are needed for several reasons. When developing a new technique, such as a blood test or imaging device, healthy volunteers (formerly called "normal volunteers") help define the limits of "normal." These volunteers serve as controls for patient groups and are often matched to patients on characteristics such as age, gender, or family relationship. They receive the same test, procedure, or drug the patient group receives. Investigators learn about the disease process by comparing the patient group to the healthy volunteers.

Factors like how much of your time is needed, discomfort you may feel, or risk involved depends on the trial. While some require minimal amounts of time and effort, other studies may require a major commitment in time and effort on behalf of the volunteer, and may involve some discomfort. The research procedure may also carry some risk. The consent process for healthy volunteers includes a detailed discussion of the study's procedures and tests.

A **patient volunteer** has a known health problem and participates in research to better understand, diagnose, treat, or cure that disease or condition. Research procedures with a patient volunteer help develop new knowledge. These procedures may or may not benefit the study participants.

Patient volunteers may be involved in studies similar to those in which healthy volunteers participate. These studies involve drugs, devices, or interventions designed to prevent, treat, or cure disease. Although these studies may provide direct benefit to patient volunteers, the main aim is to prove, by scientific means, the effects and limitations of the experimental treatment. Consequently, some patients serve as controls by not taking the test drug, or by receiving test doses of the drug large enough only to show that it is present, but not at a level that can treat the condition. A study's benefits may be indirect for the volunteers but may help others.

All clinical trials have guidelines about who can participate, called **Inclusion/Exclusion Criteria**. Factors that allow someone to participate in a clinical trial are "inclusion criteria." Those that exclude or not allow participation are "exclusion criteria." These criteria are based on factors such as age, gender, the type and stage of a disease, previous treatment history, and other medical conditions. Before joining a clinical trial, a participant must qualify for the study. Some research studies seek participants with illnesses or conditions to be studied in the clinical trial, while others need healthy volunteers.

Some studies need both types. Inclusion and exclusion criteria are not used to reject people personally; rather, the criteria are used to identify appropriate participants and keep them safe, and to help ensure that researchers can find new information they need.

4. WHAT DO I NEED TO KNOW IF I AM THINKING ABOUT PARTICIPATING?

Risks and benefits

Clinical trials involve risks, just as routine medical care and the activities of daily living. When weighing the risks of research, you can consider two important factors:

1. the degree of harm that could result from participating in the study, and
2. the chance of any harm occurring.

Most clinical studies pose the risk of minor discomfort, which lasts only a short time. However, some study participants experience complications that require medical attention. In rare cases, participants have been seriously injured or have died of complications resulting from their participation in trials of experimental therapies. The specific risks associated with a research protocol are described in detail in the informed consent document, which participants are asked to sign before participating in research. Also, a member of the research team explains the major risks of participating in a study and will answer any questions you have about the study. Before deciding to participate, carefully consider possible risks and benefits.

Potential benefits

Well-designed and well-executed clinical trials provide the best approach for participants to:



- Play an active role in their health care.
- Gain access to new research treatments before they are widely available.
- Receive regular and careful medical attention from a research team that includes doctors and other health professionals.
- Help others by contributing to medical research.

Potential risks

Risks to participating in clinical trials include the following:

- There may be unpleasant, serious, or even life-threatening side effects to experimental treatment.
- The study may require more time and attention than standard treatment would, including visits to the study site, more blood tests, more treatments, hospital stays, or complex dosage requirements.

5. WHAT QUESTIONS SHOULD I ASK IF OFFERED A CLINICAL TRIAL?

If you are offered a clinical trial, feel free to ask any questions or bring up any issues concerning the trial at any time. The following suggestions may give you some ideas as you think about your own questions.

The study

- What is the purpose of the study?
- Why do researchers think the approach may be effective?
- Who will fund the study?
- Who has reviewed and approved the study?
- How are study results and safety of participants being checked?
How long will the study last?
- What will my responsibilities be if I participate?

Possible risks and benefits

- What are my possible short-term benefits?
- What are my possible long-term benefits?
- What are my short-term risks, such as side effects?
- What are my possible long-term risks?
- What other options do people with my disease have?
- How do the possible risks and benefits of this trial compare with those options?

Participation and care

- What kinds of therapies, procedures and /or tests will I have during the trial?
- Will they hurt, and if so, for how long?
- How do the tests in the study compare with those I would have outside of the trial?
- Will I be able to take my regular medications while in the clinical trial?
- Where will I have my medical care?
- Who will be in charge of my care?

Personal issues

- How could being in this study affect my daily life?
- Can I talk to other people in the study?

Cost issues

- Will I have to pay for any part of the trial such as tests or the study drug?

- If so, what will the charges likely be?
- What is my health insurance likely to cover?
- Who can help answer any questions from my insurance company or health plan?
- Will there be any travel or child care costs that I need to consider while I am in the trial?

Tips for asking your doctor about trials

- Consider taking a family member or friend along, for support and for help in asking questions or recording answers.
- Plan ahead what to ask – but don't hesitate to ask any new questions you think of while you're there.
- Write down your questions in advance, to make sure you remember to ask them all.
- Write down the answers, so that you can review them whenever you want.
- Ask about bringing a tape recorder to make a taped record of what's said (even if you write down answers).

This information courtesy of Cancer.gov.

6. HOW AM I PROTECTED?

Ethical guidelines

The goal of clinical research is to develop knowledge that improves human health or increases understanding of human biology. People who participate in clinical research make it possible for this to occur. The path to finding out if a new drug is safe or effective is to test it on patient volunteers. By placing some people at risk of harm for the good of others, clinical research has the potential to exploit patient volunteers. The purpose of ethical guidelines is both to protect patient volunteers and to preserve the integrity of the science. Ethical guidelines in place today were primarily a response to past research abuses.



Informed consent

Informed consent is the process of learning the key facts about a clinical trial before deciding whether to participate. The process of providing information to participants continues throughout the study. To help someone decide whether to participate, members of the research team explain details of the study. The research team provides an informed consent document, which includes such details about the study as its purpose, duration, required procedures, and who to contact for various purposes. The informed consent document also explains risks and potential benefits.

If the participant decides to enroll in the trial, the informed consent document will be signed. Informed consent is not a contract. Volunteers are free to withdraw from the study at any time.

IRB review

Each clinical trial in the United States must be approved and monitored by an Institutional Review Board (IRB) to ensure that the risks are minimal and are worth any potential benefits. An IRB is an independent committee that consists of physicians, statisticians, and members of the community who ensure that clinical trials are ethical and that the rights of participants are protected. Federal regulation requires all institutions in the United States that conduct or support biomedical research involving people to have an IRB initially approve and periodically review the research.

Further reading

For more information about research protections, see:

- Office of Human Research Protection
- Children's Assent to Clinical Trial Participation

For more information on participants' privacy and confidentiality, see:

- National Institutes of Health, HIPAA Privacy Rule

The Food and Drug Administration, FDA's Drug Review Process:

- Ensuring Drugs Are Safe and Effective
- National Cancer Institute, Monitoring the Safety of Clinical Trials

7. WHAT HAPPENS AFTER A CLINICAL TRIAL IS COMPLETED?

After a clinical trial is completed, the researchers carefully examine information collected during the study before making decisions about the meaning of the findings and about further testing. After a phase I or II trial, the researchers decide whether to move on to the next phase or to stop testing the agent or intervention because it was unsafe or ineffective. When a phase III trial is completed, the researchers examine the data and decide whether the results have medical importance.

Results from clinical trials are often published in peer-reviewed scientific journals. Peer review is a process by which experts review the report before it is published to ensure that the analysis and conclusions are sound. If the results are particularly important, they may be featured in news media and discussed at scientific meetings and by patient advocacy groups before they are published. Once a new approach has been proven safe and effective in a clinical trial, it may become the standard of medical practice.

Ask the research team members if the study results have been or will be published. Published study results are also available by searching for the study's official name or Protocol ID number in the National Library of Medicine's PubMed® database.

8. HOW DOES THE OUTCOME OF CLINICAL RESEARCH MAKE A DIFFERENCE?

Only through clinical research can we gain insights and answers about the safety and effectiveness of drugs and therapies. Groundbreaking scientific advances in the present and the past were possible only because of participation of volunteers, both healthy and those diagnosed with an illness, in clinical research. Clinical research requires complex and rigorous testing in collaboration with communities that are affected by the disease. As clinical research opens new doors to finding ways to diagnose, prevent, treat, or cure disease and disability, clinical trial participation of volunteers is essential to help us find the answers.



This page last reviewed on October 15, 2012

National Institutes of Health (NIH), 9000 Rockville Pike, Bethesda, Maryland 20892

NIH...Turning Discovery Into Health®

What's New in ClinicalTrials.gov

Recently Added Studies

ClinicalTrials.gov contains thousands of studies conducted around the world to test the effect of experimental drugs, devices and procedures for many diseases and conditions. New studies are received daily.

- View studies first received in the [last 14 days](#)
- View studies first received in the [last 60 days](#)

You can search for studies first received within a range of dates with [Advanced Search](#).

Recently Modified Studies

Studies are updated to fix errors and reflect changing circumstances. A common update is to change Recruitment status from "Not Yet Recruiting" to "Recruiting" to "No Longer Recruiting".

- View studies last updated (includes received) in the [last 14 days](#)
- View studies last updated (includes received) in the [last 60 days](#)

You can search for studies last updated within a range of dates with [Advanced Search](#).

ClinicalTrials.gov Archive Site

Historical views of all records are now available via the ClinicalTrials.gov [archive](#) site. You will need to supply the NCT number of the record whose history you wish to view. The NCT number can be found at the bottom of every study record

Information on Selected ClinicalTrials.gov Studies

ClinicalTrials.gov [records with published results](#) listed via the PubMed medical literature search service.

- Commonly Used Three-drug Regimen for Idiopathic Pulmonary Fibrosis Found Harmful NIH Stops One Treatment Arm of Trial; Other Two Treatments to Continue
 - [Clinical Alert](#)
 - [Related trial record](#)
- Secondary Prevention of Small Subcortical Strokes Trial: NINDS Stops Treatment with Combination Antiplatelet Therapy (Clopidogrel plus Aspirin) Due to Higher Risk of Major Hemorrhage and Death
 - [Clinical Alert](#)
 - [Related trial record](#)
- Angioplasty Combined with Stenting Plus Aggressive Medical Therapy vs. Aggressive Medical Therapy Alone for Intracranial Arterial Stenosis: NINDS Stops Trial Enrollment Due to a Higher Risk of Stroke and Death in the Stented Group
 - [Clinical Alert](#)
 - [Related trial record](#)

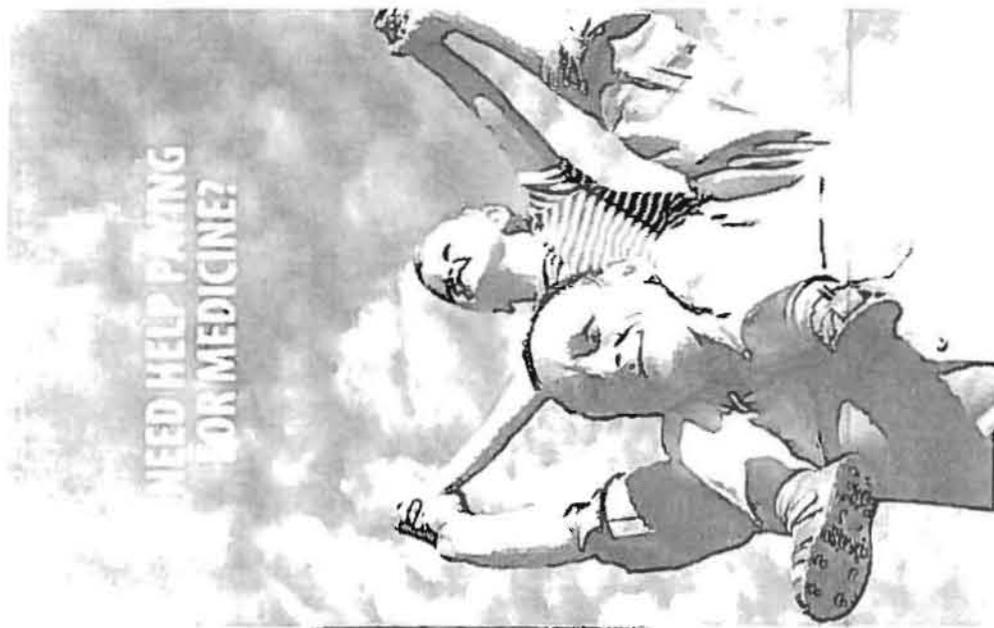
- Immunizations Are Discontinued in Two HIV Vaccine Trials
 - [Clinical Alert](#)
 - [Related trial record](#)
 - [Related trial record](#)
- The National Institute of Allergy and Infectious Diseases (NIAID), International HIV/AIDS Trial Finds Continuous Antiretroviral Therapy Superior to Episodic Therapy
 - [Press Release](#)
 - [Clinical Alert](#)
 - [Related trial record](#)
- NCI Announcement: Preferred Method of Treatment for Advanced Ovarian Cancer
 - [Press Release](#)
 - [Clinical Advisory](#)
 - [Related trial record](#)
- Archives of Previous Items on "What's New"
 - [2005](#)
 - [2004](#)
 - [2003](#)
 - [2002](#)

Background Information

Last Updated: October 26th, 2011

[Contact Help Desk](#)
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U.S. National Institutes of Health, U.S. Department of Health & Human Services,
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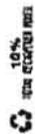
NEED HELP PAYING
FOR MEDICINE?



The Partnership for Prescription Assistance
is America's pharmaceutical companies
working together with the health care
community to help people in need.



America's Pharmaceutical Companies



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PPA-FORM
Printed in USA 2011

Since the launch of the Partnership for Prescription Assistance in April 2006, millions of Americans have



*Kendall DePaeral
San Diego, CA
Saves more than
\$1,000/month*

found programs that can help them pay for their medicines. Thousands more find help every single day.

If you don't have prescription coverage and can't afford your medicines, call

, or go to

. More than 2,500

brand-name and generic medicines are covered. You could get them **FREE** or **NEARLY FREE**.

Finding out if you may qualify is quick and easy. Here's all you have to do:

Know the names of the medicines you take.

Call toll-free 1-888-4PPA-NOW (1-888-477-2669).

A trained specialist will answer your questions and help you apply.



Hablamos Español

I didn't feel any pressure...they were more than willing to help me out.

*Scott Wal Jensen
Nampa, ID*



I get all my medicines and there's no cost. Not to me.

*Lois Jenlars
Melbourne, FL*



I've always heard where there's a will, there's a way. And I think this was our way.

*John and Nancy Jones
Tacoma, WA*



1-888-4PPA-NOW (1-888-477-2669) | [Patient FAQs](#) | [English](#) | [Español](#)

WELCOME TO THE PPA!

The Partnership for Prescription Assistance helps qualifying patients without prescription drug coverage get the medicines they need through the program that is right for them - free of charge. Many patients will get their medications **at no cost or at discounted prices.**

HERE'S HOW IT WORKS:

Step 1: Tell us what medicines you take

Select your medicines from the list.

Step 2: Tell us about yourself

Provide basic information about yourself and the type of drug coverage (if any) you currently have.

Step 3: Get your results

See which prescription assistance programs you may be eligible for and select the ones you would like to apply to.

Step 4: Complete the application process

Print, complete and mail your applications to each program you are applying to.

NOT LOOKING FOR PATIENT ASSISTANCE PROGRAMS?

FOR ADDITIONAL ASSISTANCE:

1-888-4PPA-NOW or 1-888-477-2669
Call Hours: Mon-Fri, 9am-5pm (EST)

Or check out our

2017 PARTNERSHIP FOR PRESCRIPTION ASSISTANCE PROGRAM DATABASE (LAST UPDATED ON MARCH 21, 2017)

[PRIVACY POLICY](#) | [TERMS OF USE](#)

1-888-4PPA-NOW (1-888-477-2669) | [Patient FAQs](#)

[English](#) | [Español](#)

[Home](#) | [About Us](#)

[What We Offer](#)

[Facts About PPA](#)

[PPA Impact](#)

[Our Partners](#)

[Patient Advocates](#)

[Contact Us](#)

ABOUT US

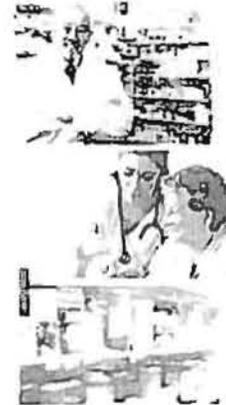
Who We Are

The Partnership for Prescription Assistance helps qualifying patients without prescription drug coverage get the medicines they need for free or nearly free.

Our mission is to increase awareness of patient assistance programs and boost enrollment of those who are eligible. We offer a single point of access to more than 475 public and private programs, including nearly 200 offered by pharmaceutical companies. We have already helped millions of Americans get free or reduced cost prescription medicines.

[Now let us help you.](#)

To learn more, [click here](#) about the Partnership for Prescription Assistance or [read our frequently asked questions](#)



There is Only One PPA

There are other companies that offer to connect consumers to these same programs for a fee - some of which use our name without our permission. The Partnership for Prescription Assistance will help you find the program that's right for you, **free of charge**. Remember, **you will never be asked for money** by a PPA Call Center representative, or on this Web site. **Have recent natural disasters affected your ability to get access to your prescription medicines?**

2012 PARTNERSHIP FOR PRESCRIPTION ASSISTANCE
PROGRAM DATABASE LAST UPDATED ON MARCH 23, 2012

[PRIVACY POLICY](#) | [TERMS OF USE](#)

[Home](#) | [Prescription Assistance Programs](#)

[Medicare Drug Coverage](#)

[Medicaid/CHIP Programs](#)

[Patient Assistance Programs](#)

[Co-Payment Programs](#)

[Free / Low-Cost Clinic Finder](#)

[Savings Cards](#)

[Additional Resources](#)



PRESCRIPTION ASSISTANCE PROGRAMS

Prescription Help is Here

The Partnership for Prescription Assistance brings together America's pharmaceutical companies, doctors, other health care providers, patient advocacy organizations and community groups to help qualifying patients without prescription drug coverage get free or low-cost medicines through the public or private program that's right for them.

Other Prescription Resources

- [Medicare Prescription Drug Coverage](#)
- [Medicaid/CHIP Programs](#)
- [Co-Payment Programs](#)
- [Participating Patient Assistance Programs](#)
- [Free / Low-Cost Health Clinic Finder](#)
- [Savings Cards](#)
- [Additional Resources](#)

There is Only One PPA

There are other companies that offer to connect consumers to these same programs for a fee - some of which use our name without our permission. The Partnership for Prescription Assistance will help you find the program that's right for you, free of charge. Remember, you will never be asked for money by a PPA Call Center representative, or on this Web site. Have recent natural disasters affected your ability to get access to your prescription medicines?

1-888-4PPA-NOW (1-888-477-2669) | [Patient FAQs](#) [English](#) | [Español](#)[Home](#) [Prescription Assistance Programs](#) [Co-Payment Programs](#)

Medicare Drug Coverage	CO-PAYMENT PROGRAMS
Medicaid/CHIP Programs	Co-pay programs provide financial assistance for certain health care costs to patients who qualify financially and medically.
Patient Assistance Programs	AIDS Patient Assistance and Co-Payment Programs
	American Kidney Fund
Co-Payment Programs	American Pain Foundation
	The Assistance Fund, Inc.
Free / Low-Cost Clinic Finder	Avon Foundation Breast Care Fund
	BenefitsCheckUp
Savings Cards	BRILYSTA Co-pay Assistance Program
Additional Resources	CancerCare
	Candlelighters Childhood Cancer Foundation
	Caring Voice Coalition, Inc.
	The Center for Medicare Advocacy
	Chau Lifeline
	Chemocare.com
	Chronic Disease Fund, Inc. (CDF)
	Compassionate Allowances
	Diabetes Prescription Assistance
	Financial Aid for Eye Care
	Financial Help for Diabetes Care
	Financial Help for Treatment of Kidney Failure
	Genetic Services of America
	HealthWell Foundation
	Hill Burton Free and Reduced-Cost Health Care
	Key to Life Program
	Leukemia and Lymphoma Society
	MEDBANK of Maryland, Inc.
	National Children's Cancer Society
	National Organization for Rare Disorders
	Needy Meds
	NORD's Patient Assistance Programs
	Patient Access Network Foundation (PAN)
	The Patient Advocate Foundation (PAF)
	Patient Advocate Foundation Co-Pay Relief
	Patient Services Incorporated
	Patient Travel and Lodging
	Resources for Financial Assistance for Cancer Patients and Their Families
	RxHope: Patient Assistance Information
	Transplant Living
	Understanding, Planning and Paying for Long-Term Care
	Understanding Prescription Assistance Programs (PAPs)
	UnitedHealthcare Children's Foundation

[AIDS Patient Assistance and Co-Payment Programs](#)**[AIDS Treatment Data Network](#)**

Accessing medications that you need can be difficult, but there are often programs such as Patient Assistance Programs, or

AIDS Treatment Data Network
Call 1-800-734-7104 In New York City
Email: accessrequest@atdn.org

Assistance: National, Patient Support

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American Kidney Fund

With help from AKF, dialysis patients are able to maintain their health insurance coverage. AKF also provides assistance with expenses that insurance will not cover, such as transportation to dialysis, dications, special diet, kidney donor expenses and other treatment essentials. AKF's specialty programs help patients afford treatment during emergency travel and recover from natural disasters.

Email: patientservices@kidneyfund.org
Address: 6110 Executive Blvd., Suite 1010 Rockville, MD 20852
Phone: 1-800-638-8299

Assistance: National, Medicare Prescription Drug Assistance, Insurance Premium Assistance, Other Patient Support

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American Pain Foundation

Chronic pain can affect all areas of your life including your finances. Practical financial tips are listed to help cope with the financial issues that often go hand-in-hand with a chronic illness.

American Pain Foundation
201 North Charles Street, Suite 710
Baltimore, Maryland 21201-4111
Pain Information Center: 1-888-615-PAIN (7246)

Assistance: National, Patient Support

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The Assistance Fund, Inc.

The Assistance Fund is a leading 501(c)3 nonprofit organization created to make advanced biotech therapies available to the underserved.

Email: patientadvocates@assistancefund.org
Address: 5323 Millenia Lakes Boulevard, Suite 200, Orlando, Florida 32839
Phone: 877.245.4412
Fax: 866.254.9411

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Avon Foundation Breast Care Fund

The mission of the Avon Foundation for Women Breast Health Outreach Program (BHOP) is to link medically underserved women to breast health education and screening services. Low-income, underinsured, and other marginalized populations often need targeted, customized approaches to help them obtain regular mammograms and clinical breast exams.

Avon Breast Health Outreach Program (BHOP)
505 Eighth Avenue, Suite 1601
New York, NY 10018
1 212-244-5368
Email: admin@avonbhop.org

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[Benefit Checklist](#)

National Council on Aging
1901 L Street, NW, 4th Floor
Washington, D.C. 20036
1-202-479-1200

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BENLYSTA Co-pay Assistance Program

This is the co-pay assistance program for BENLYSTA.

Phone: 877-4-BENLYSTA

Assistance: Co-pay assistance

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CancerCare

CancerCare is a national nonprofit organization that provides free professional support services to anyone affected by cancer: people with cancer, caregivers, children, loved ones, and the bereaved. CancerCare programs – including counseling, education, financial assistance and practical help – are provided by trained oncology social workers and are completely free of charge.

Email: info@cancercares.org
Address: 275 Seventh Ave., Floor 22, New York, NY, 10001
Phone: 800-813-4673
Fax: 212-712-8495

Assistance: National, Prescription Assistance, Other Patient Support

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Candlelighters Childhood Cancer Foundation

Our mission is to provide information and awareness for children and adolescents with cancer and their families, to advocate for their needs, and to support research so every child survives and leads a long and healthy life.

Email: staff@candlelighters.org
Address: P.O. Box 498 Kensington MD 20895-0498
Phone: 800-365-2223 or 301-962-3520

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Caring Voice Coalition, Inc.

Comprehensive help for the needs of patients with serious, chronic illnesses.

Email: CVCInfo@caringvoice.org
Address: Caring Voice Coalition, Inc., 8249 Meadowbridge Road, Mechanicsville, VA 23116
Phone: (888) 267-1440

Assistance: National, Medicare Prescription Drug Assistance, Insurance Copayment Assistance, Insurance Premium Assistance, Insurance Counseling and Advocacy, Other Patient Support

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The Center for Medicare Advocacy

The Center for Medicare Advocacy, Inc. is a national non-profit, non-partisan organization that provides education, advocacy, and legal assistance to help elders and people with disabilities obtain Medicare and necessary health care. The Center was established in 1986. We focus on the needs of Medicare beneficiaries, people with chronic conditions, and those in need of long-term care. The organization is involved in writing, education, and advocacy activities of importance to Medicare beneficiaries nationwide. The Center's central office is in Connecticut, with offices in Washington, DC and throughout the

Assistance: Medicare Prescription Drug Assistance

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Chai Lifeline

Chai Lifeline is a not for profit organization dedicated to helping children suffering from serious illness as well as their family members. We offer a comprehensive range of services to address the multiple needs of patients, parents and siblings.

Email: info@chailifeline.org

Address: International Office 151 West 30th Street New York, NY 10001

Phone: (877) CHAI-LIFE

Fax: (212) 465-0949

Assistance: National, Insurance Copayment Assistance, Insurance Premium Assistance, Other Patient Support

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Chemocare.com

This organization provides links to other resources for prescription assistance.

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Chronic Disease Fund, Inc. (CDF)

CDF's focus is to provide assistance to those under insured patients who are diagnosed with chronic or life altering diseases that require the use of expensive, specialty therapeutics.

Email: info@cdfund.org

Address: 6900 N. Dallas Parkway, Suite 200, Plano, TX 75074

Phone: (877) YOUR-CDF

Assistance: National, Prescription Assistance

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Compassionate Allowances

Social Security

Social Security has an obligation to provide benefits quickly to applicants whose medical conditions are so serious that their conditions obviously meet disability standards. Compassionate allowances are a way of quickly identifying diseases and other medical conditions that invariably qualify under the Listing of Impairments based on minimal objective medical information. Compassionate allowances allow Social Security to quickly target the most obviously disabled individuals for allowances.

Social Security Administration

Office of Public Inquiries

Windsor Park Building

6401 Security Blvd

Baltimore, MD 21235

1-800-772-1213

Assistance: National, Patient Support

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Diabetes Prescription Assistance

American Diabetes Association

Most pharmaceutical companies offer financial assistance programs to persons who are uninsured. This assistance is available to help cover the cost of medications and supplies when they cannot be paid for out of pocket. Each pharmaceutical company has specific criteria that needs to be satisfied in order for an individual to be considered eligible for a financial assistance program. Here you will find phone numbers and information on pharmaceutical companies who manufacture diabetes medications and supplies and may be able to help with your needs.

1-800-DIABETES

Assistance: National

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Financial Aid for Eye Care

National Eye Institute

Many state and national resources regularly provide aid to people with vision problems. The National Eye Institute, which supports eye research, does not help individuals pay for eye care. However, if you are in need of financial aid to assess or treat an eye problem, you might contact one or more of the following programs listed.

National Eye Institute
2020 Vision Place
Bethesda, MD 20892 3655
(301) 496-5246

Assistance: National, Patient Support

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Financial Help for Diabetes Care

National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)
NIDDK provides a list of programs to contact for diabetes care assistance.

National Diabetes Information Clearinghouse
1 Information Way
Bethesda, MD 20892-3560
Phone: 1-800-860-8747
Email: ndic@info.niddk.nih.gov

Assistance: National, Patient Support

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Financial Help for Treatment of Kidney Failure

National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)
NIDDK provides a list of programs to contact for kidney failure assistance.

National Kidney and Urologic Diseases Information Clearinghouse
3 Information Way
Bethesda, MD 20892-3580
Phone: 1-800-891-5390
Email: nkiduc@info.niddk.nih.gov

Assistance: National, Patient Support

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Geriatric Services of America

Help Chronic Respiratory Disease Patients by providing Education, Support, Equipment, and life saving Medications quickly and directly to the Patients home.

Address: Geriatric Services of America, Inc., 5030 S. Mill Ave, D-23, Tempe, AZ 85282
Phone: 1-800-307-8048
Assistance: National

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HealthWell Foundation

Email: info@healthwellfoundation.org
 Address: P.O. Box 4133 Gaithersburg, MD 20878
 Phone: 1-800-675-8416
 Fax: (800) 787-7692

Assistance: National, Insurance Copayment Assistance, Insurance Premium Assistance, Prescription Assistance, Other Patient Support

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Hill-Burton Free and Reduced-Cost Health Care

About 200 health care facilities nationwide provide free or reduced-cost care due to Hill-Burton obligations. You are eligible to apply for Hill-Burton free care if your income is at or below the current HHS Poverty Guidelines.

Hill-Burton
 5600 Fishers Lane, Room 10-105
 Rockville, MD 20857
 1-800-638-0742
 (1-800-492-0359 in Maryland)

Assistance: National, Patient Support

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Key to Life Program

American Breast Cancer Foundation

The American Breast Cancer Foundation provides direct financial assistance to uninsured and underserved women and men of all ages for breast cancer screening and diagnostic tests through the Key to Life Program. This includes annual screenings for women over 40, as well as support services for breast cancer patients.

American Breast Cancer Foundation
 1220 B East Joppa Rd, Suite 332
 Baltimore, MD 21286
 Phone: 1-877-323-ICAN (1-877-323-4226)
 Enrollment Hotline: 1-877-KEY-2-LIFE (1-877-539-2543)
 Email: contactABCF@abcf.org

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Leukemia and Lymphoma Society

The Leukemia & Lymphoma Society is the world's largest voluntary health organization dedicated to funding blood cancer research, education and patient services. The Society's mission: Cure leukemia, lymphoma, Hodgkin's disease and myeloma, and improve the quality of life of patients and their families. Since its founding in 1949, the Society has invested more than \$550.8 million for research specifically targeting blood cancers.

Phone: (800) 955-4572

Assistance: National, Insurance Copayment Assistance, Insurance Premium Assistance, List Organizations that Provide Insurance Counseling and Advocacy, Lists Organizations that provide Prescription Assistance

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MEDBANK of Maryland, Inc.

MEDBANK is a non-profit organization dedicated to accessing free prescription drugs for low-income, chronically ill Marylanders.

Email: mnicewan@medbankmd.org
 Address: P.O. Box 42678 Baltimore, MD 21284
 Phone: 1-877-435-7755
 Fax: 410-821-9265

Assistance: Prescription Assistance

National Children's Cancer Society

The mission of The National Children's Cancer Society is to improve the quality of life for children with cancer and their families by providing financial and in kind assistance, advocacy, support services and education.

Email: survivorship@children-cancer.org

Address: One South Memorial Drive, Suite 800, St. Louis, MO 63102

Phone: (800) 5-FAMILY

Fax: (314) 241-1996

Assistance: National

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National Organization for Rare Disorders

The National Organization for Rare Disorders (NORD), a 501(c)3 organization, is a unique federation of voluntary health organizations dedicated to helping people with rare "orphan" diseases and assisting the organizations that serve them. NORD is committed to the identification, treatment, and cure of rare disorders through programs of education, advocacy, research, and service.

Email: orphan@rare-diseases.org

Address: 55 Kenosia Avenue PO Box 1968 Danbury, CT 06813-1968

Phone: (203) 744-0100

Fax: (203) 798-2291

Assistance: National, Insurance Copayment Assistance, Insurance Premium Assistance
Prescription Assistance

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NeedyMeds

NeedyMeds is a 501(3)(c) non-profit with the mission of helping people who cannot afford medicine or healthcare costs. The information at NeedyMeds is available anonymously and free of charge.

Email: info@needymeds.com

Address: NeedyMeds, Inc, P.O. Box 219, Gloucester, MA 01931

Phone: (978) 855-4115

Fax: (419) 858-7221

Assistance: National, Medicare Prescription Drug Assistance, Insurance Copayment Assistance, Prescription Assistance

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NORD's Patient Assistance Programs**National Organization for Rare Disorders**

NORD administers Patient Assistance Programs to help patients obtain life-saving or life-sustaining medication they could not otherwise afford. These programs are provided in partnership with quality and caring pharmaceutical and biotechnology companies. If you are seeking financial assistance for a variety of needs, NORD has a broad directory of external resources that may be helpful to you.

National Organization for Rare Disorders

55 Kenosia Avenue

Danbury, CT 06813 1968

(203) 744-0100

Assistance: National, Patient Support

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www.nord.org

Email: contact@patientaccessnetwork.org
 Address: PO Box 221858 Charlotte NC 28222-1858
 Phone: 1-866-316-PANF (7263)

Assistance: National, Prescription Assistance

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The Patient Advocate Foundation (PAF)

The Patient Advocate Foundation Co-Pay Relief Program (CPR) currently provides direct financial support to insured patients, including Medicare Part D beneficiaries, who must financially and medically qualify to access pharmaceutical co-payment assistance. The program offers personal service to all patients through the use of call counselors, personally guiding patients through the enrollment process.

Co-Pay Relief
 421 Butler Farm Road
 Hampton, Virginia 23666
 1-866-512-3861

Assistance: National

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Patient Advocate Foundation Co-Pay Relief

Patient Advocate Foundation's Co-Pay Relief (CPR) Program provides direct co-payment assistance for pharmaceutical products to insured Americans who financially and medically qualify.

Email: help@patientadvocate.org
 Address: 700 Thimble Shoals Blvd Suite 700 Newport News, VA 23606
 Phone: (800) 532-5274
 Fax: (757) 873-8999

Assistance: National, Medicare Prescription Drug Assistance, Prescription Assistance

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Patient Services Incorporated

Patient Services Incorporated (PSI) is a non-profit organization primarily dedicated to providing health insurance premium assistance, pharmacy co-payment assistance and co-payment waiver assistance for persons with specific expensive chronic illnesses.

Email: uncomp@uncomp.org
 Address: P.O. Box 1602 Midlothian, VA 23113
 Phone: 800-366-7741
 Fax: 804-744-5407

Assistance: National, Medicare Prescription Drug Assistance, Insurance Copayment Assistance, Insurance Premium Assistance, Insurance Counseling and Advocacy, Prescription Assistance

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Patient Travel and Lodging

Office of Rare Diseases, NIH

Links to charitable or special fare flights to research and treatment sites, hospitality houses for patients and families, and for-service ambulance services.

Genetic and Rare Diseases Information Center
 P.O. Box 6126
 Gaithersburg, MD 20888-8126
 1-888-205-2311

Assistance: National Patient Support

Resources for Financial Assistance for Cancer Patients and Their Families**National Cancer Institute**

Cancer can impose heavy economic burdens on both patients and their families. Government-sponsored programs as well as services supported by nonprofit, national organizations are available for people who do not have health insurance and for those who have insurance but still need financial assistance to cover health care costs. This database includes Government agencies and national organizations that provide financial assistance to cancer patients and their families, or provide information about patient assistance programs.

NCI Office of Communications and Education

Public Inquiries Office

6116 Executive Boulevard, Suite 300

Bethesda, MD 20892-8322

1-800-4-CANCER (1-800-422-6737)

Assistance: National, Patient Support

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RxHope: Patient Assistance Information

A list of current Patient Assistance Programs, online resources and medication search.

RxHope

P.O. Box 42886

Cincinnati, OH 45242

1-877-267-0517

Email: CustomerService@RxHope.com

Assistance: National, Patient Support

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Transplant Living**United Network for Organ Sharing**

Financing a transplant raises many questions and concerns for patients and their families. Common funding sources to help with the costs of transplants are listed.

United Network for Organ Sharing

1-888-894-6361

Assistance: National, Patient Support

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Understanding, Planning and Paying for Long-Term Care**Administration on Aging**

The National Clearinghouse for Long Term Care Information. This web site was developed by the U.S. Department of Health and Human Services to provide information and resources to help you and your family plan for future long term care (LTC) needs.

Administration on Aging

One Massachusetts Avenue, Suite 4100

Washington, DC 20201

1-202-619-0724

Assistance: National Resources

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Understanding Prescription Assistance Programs (PAPs)

Medicaid, Medicare, and Prescription Assistance Programs (PAPs)

200-A Monroe Street, Suite 212
Rockville, MD 20850-4448
1-801-340-3940
email: ncpic@ncpic.info

Assistance: National Resources

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UnitedHealthcare Children's Foundation

Grants to provide financial relief for families who have children with medical needs not covered or not fully covered by their commercial health benefit plan. The Foundation aims to fill the gap between what medical services/items your child needs and what your commercial health benefit plan will pay for

UnitedHealthcare Children's Foundation
MN012-5286
PO BOX 41
Minneapolis, MN 55440-0041
(952) 992-4459

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QUESTIONS ABOUT THE PARTNERSHIP FOR PRESCRIPTION ASSISTANCE

[How does this program work?](#)

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[What role do doctors and other health care providers play in the PPARx prescription assistance program?](#)

[How long can patients get free or nearly free medication from programs available through the PPARx prescription assistance program?](#)

How does this program work?

The PPARx prescription assistance program was created to make it easier for low-income uninsured patients to get free or nearly free prescription medicines through existing patient assistance programs, while providing the highest level of service. Once you provide the Web site with some basic information related to prescription medicines, income, and current prescription medicine coverage, PPARx will be able to tell you what patient assistance programs you may be eligible for.

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Who is involved in the PPARx prescription assistance program?

The PPARx prescription assistance program brings together America's pharmaceutical companies, doctors, patient advocacy organizations and civic groups to help low-income, uninsured patients get free or nearly free brand name medicines. Its mission is to increase awareness of and enrollment in existing patient assistance programs for those who may be eligible.

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How does this fit within the existing health care system?

Patient assistance programs have been a part of the health care system for a long time, providing millions of people with free or nearly free medicines. The mission of the PPARx prescription assistance program is to increase awareness of and enrollment in existing patient assistance programs for those who may be eligible. While these programs are an important safety net for low-income, uninsured people, they are not the only solution. It is critical that all partners in health care work to develop more long-term options to increase the access to and affordability of health care for all Americans.

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What role do doctors and other health care providers play in the PPARx prescription assistance program?

Healthcare providers play a crucial role in spreading the word that patients in need can get free or nearly free prescription medicines. Doctors, nurses, and other health care providers can also log on to PPARx to get information on patient assistance programs. Doctors will also be responsible for signing patient application forms, adding prescription information or an actual prescription and, depending on the program, potentially mailing or faxing the application on behalf of the patient.

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How long can patients get free or nearly free medication from programs available through the PPARx prescription assistance program?

Each program available through the PPARx prescription assistance program has its own enrollment and renewal requirements. Many programs require patients to reapply periodically. The specifics of each program will be included in the information packet sent to the patient in the mail.

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1-888-4PPA-NOW (1-888-477-2669) | [Patient FAQs](#) [English](#) | [Español](#)

[Home](#) [Prescription Assistance Programs](#) [Patient Assistance Programs](#)

Medicare Drug Coverage

PARTICIPATING PATIENT ASSISTANCE PROGRAMS

Medicaid/CHIP Programs

Many state and corporate prescription assistance programs help patients obtain free or low-cost medications.

Patient Assistance Programs

To learn more about the patient assistance programs (PAPs) that are offered by pharmaceutical companies and states, you can [type in your search term](#), [download the full list of participating programs](#), or [select a letter of the company name below](#).

Co-Payment Programs

If you are ready to see if you qualify for these programs, go to our [patient assistance search tool](#) and enter in some basic information and we will match you with the programs you may qualify for. This tool will provide you with the applications you need to apply.

Free / Low-Cost Clinic Finder

Savings Cards

Additional Resources

1. **Type in your search term**
Use the radio button to search by drug name, pharmaceutical company/state name, or program name. Then type your search term and click "Search". Our database will display the results below.

Search By: Drug Name Company Name Program Name

Search Term:

(Enter brand, company name or at least two letters of the drug name you would like to search for)

2. [Download the list of participating programs in PDF format](#)

3. **Select a letter from the full list below:**
Click on a company or state program below to find out what patient assistance programs are offered.

Jump to: [A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [K](#) [L](#) [M](#) [N](#) [O](#) [P](#) [Q](#) [R](#) [S](#) [T](#) [U](#) [V](#) [W](#) [X](#) [Y](#) [Z](#)

A

Abbott

- [Abbott Patient Assistance Foundation](#)
- [Abbott Patient Assistance Foundation \(HUMIRA\)](#)
- [Abbott Patient Assistance Foundation \(Lupron Depot\)](#)
- [Abbott Patient Assistance Foundation \(Medical Nutrition Product\)](#)
- [Abbott Patient Assistance Foundation \(Virology Program\)](#)
- [Abbott Patient Assistance Foundation \(Zemolar\)](#)
- [Abbott Patient Assistance Foundation for AndroGel, Prometrium and Creon](#)

Alabama

[Alabama AIDS Drug Assistance Program](#)
This program helps people buy their HIV medicines.

ADAP is a federally funded program through Ryan White Part B funding, and must assure that funds are used as payer of last resort. If you are eligible for Medicaid or Medicare drug benefits you are considered ineligible for enrollment in ADAP.

[Alabama Child-Caring Program](#)

Thousands of Alabama children still do not receive the healthcare they need because their parents cannot afford medical insurance. These working parents earn too much money to qualify for government-assisted medical care, yet not enough to pay for medical coverage. The Caring Program makes it possible for parents to continue to work and gives them peace of mind of knowing that their children's healthcare needs will be met.

FOR A DETAILED LIST OF PARTICIPANTS

VISIT:



https://www.pparx.org/en/prescription_assistance_programs/list_of_participating_programs 4/13/2012

Assistance Programs

Most pharmaceutical companies have established programs to help people who do not have health insurance or drug coverage pay for their prescription medicines, or, in some cases, get them free. Such programs are a valuable resource for millions of Americans. But they also put costly brand name medicines in the hands of people who may continue taking (and paying for) the medicines when they are no longer eligible for assistance. Less expensive generic drugs may work just as well.

Even so, if you need medicines (especially for a chronic condition) and have no health insurance, limited insurance, or lack drug coverage under your current health insurance policy, read this brief to find out about what are called PAPs—short for “prescription assistance programs” or “patient assistance programs.”

ELIGIBILITY

Patient assistance programs are aimed primarily at people whose household incomes are below around \$20,000 for an individual, \$26,000 for a couple, \$34,000 for a family of three, and \$40,000 for a family of four. But some programs extend to people with higher incomes if they have no health insurance or drug coverage, and are not eligible for either private or public insurance.

There are asset tests as well—money you have other than income from a job. Essentially, the programs will be trying to find out if you have money in the bank, or assets (such as stock holdings, mutual funds, or retirement savings) that you can draw on. Hard and fast rules often give way to a case-by-case evaluation. But, generally, if your assets exceed \$15,000 to \$20,000 and you could pay for your medicines on your own by tapping these resources, you'll be out of luck qualifying for a PAP.

Most PAPs also require you to be a US citizen or a resident with a green card.

If you are a Medicare beneficiary who has not yet enrolled in the new Part D drug benefit, and you qualify under the income criteria, you *won't* be eligible for a PAP. Instead, you'll be urged to enroll in Part D since the program permits enrollment at any time for low-income people. We'd concur with that advice since Part D also substantially subsidizes drug coverage for low-income people.

If, however, you are a Medicare beneficiary who has not enrolled in Part D and you do not meet the income criteria, you may be able to get some temporary assistance from a PAP while waiting for the next open enrollment period (which begins November 15). You can not have any other coverage for your drug expenses, however.

In addition, some PAPs will help if you are enrolled in Medicare Part D, meet certain income and asset criteria, and fall into the “doughnut hole.” That's the gap in coverage that occurs after your drug expenses total about \$2,400 and before they reach \$5,450 during one year. However, a fair number of PAPs do not offer such help. In addition, if help is offered, the subsidy does *not* count towards your drug bills. That is, you will delay the point at which Part D coverage starts again, which is when you reach the \$5,450 point of total expenses.



If you are enrolled in Medicaid, you will not be eligible for a PAP. Also, if you apply for a PAP program and it determines that you may be eligible for Medicaid, you likely will be urged to apply for Medicaid. You may get some help with your drug expenses while you are waiting for a Medicaid eligibility determination.

If you have private health insurance which has limited drug coverage, and you meet the income eligibility cut-offs, you may still qualify for a PAP. This will especially be true if you take multiple medicines and your drug expenses are quite high.

The eligibility criteria we have discussed here are the most important ones. But others may apply. To their credit, most of the PAPs have some flexibility and will take your individual circumstances into account.

HOW TO GET STARTED

You can find out about specific PAPs through various sources:

Doctors

Pharmacists

The staff at a health or community clinic

Searching the Internet

Drug companies

Many doctors are familiar with PAPs and can refer you to one or more that is specific to your medical needs or the medicines you take. Since you are going to need your doctor's signature anyway to get the medicine from a PAP, this is a good place to start.

Beware though, some doctors and their staffs may be reluctant to spend time helping you apply for a PAP. That's because a substantial amount of paperwork is involved (as discussed later).

Most pharmacists are at liberty to tell you about PAPs, but some are not. The reason some can not is that they work for drug store chains or large stores that sell medicines. So telling you where to get the drugs for free is not considered good for business. (Many of the free drugs will bypass the pharmacy chain stores and come to you by mail.)

Health and community clinics that serve people without health insurance are very good places to find out about PAPs. Many can help you get started on the process, too.

If you know which company makes the drug or drugs you take, you can contact them directly, either via the Internet or toll-free numbers. Virtually all the corporate Web sites of the major pharmaceutical companies provide a link to their PAP program, with a list of drugs that are available for free or reduced cost if you qualify.

But we'd recommend that you start elsewhere on the Internet. Three Web sites in particular serve as major portals to multiple PAPs, and can help you find one that meets your needs. The largest of these are RxAssist

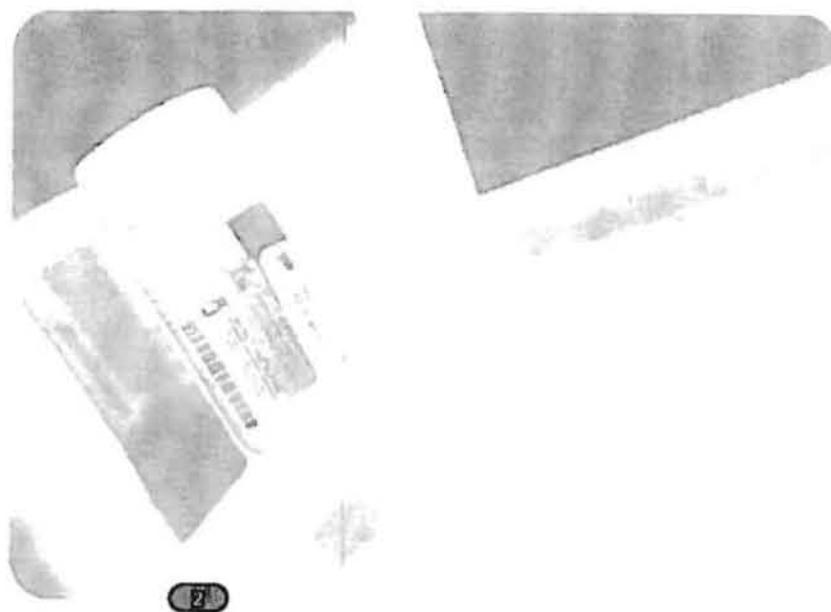
[rxassist.org], the Partnership for Prescription Assistance (pparx.org), and NeedyMeds (needymeds.com). While these three sites are similar in focus, they offer different features.

RxAssist

RxAssist was created by Volunteers in Health Care, a resource center affiliated with the Brown University Center for Primary Care and Prevention. The site offers a comprehensive list of PAPs, searchable by both drug name (generic or brand) and company name.

The site is user-friendly. For each medicine, there is contact information for the company, information about eligibility criteria, guidance that can be used to complete the application, other relevant information (such as the delivery time required to receive the medication and refill policies), and an interactive application that can be filled out online or printed out and mailed.

The site also has a resource section with information on Part D, Veteran's benefits, PAPs for generic drugs, and state drug assistance programs.



see Partnership for Prescription Assistance (see www.pparx.org)

The Partnership for Prescription Assistance is an industry-sponsored organization and Web site, led in part by the Pharmaceutical Research and Manufacturers Association, the drug industry's primary trade group. The site also claims to be affiliated with 1,300 national and local organizations that help spread the word about the program and get people who qualify enrolled.

The site boasts links to 475 public and private PAPs, including 180 sponsored by drug companies. We didn't check that claim, but there's no question that the site is quite comprehensive.

You can search its database by drug name. That prompts an initial simple eligibility screening questionnaire (which takes just a couple of minutes to fill out). This search then brings up a list of possible PAPs which fit your needs.

Caution: Discount card program are among those listed. Some discount programs are set up to be PAPs, but many are cards that are not much different than those available to anyone who applies. Such cards aim, in part, to get people to take expensive brand-name medicines, and you may only save 10 to 20 percent off the cost of your medicines at a participating pharmacy. In many cases, you may be able to save that much just by shopping around or buying your medicines at a large discount store.

The pparx.org site includes useful links to the forms you'll need for full screening of your eligibility. It also includes a very useful listing of low-cost community health clinics, searchable by state and city.

The NeedyMeds site is sponsored by a non-profit company of the same name. It's a ".dot com" instead of a ".dot org"

because the site is supported by advertisements. All the ads are commercial, including links to some discount cards. One ad promised discounts on medicines as high as 80 percent, as a lure. We advise ignoring the ads.

The site is less glitzy than pparx.org or rxassist.org. But it's actually organized quite simply – with links to drug names, companies, and programs by alphabetical letter.

The site claims to be a portal for 386 PAP programs, which are also listed. It lists about 3,000 drugs, both brand and generic. It also provides a listing of some 200 state programs and disease-specific PAP programs.

Another very useful feature is a clickable map of the country with the names of national and local programs that help people apply for PAPs, either for free or for a nominal fee.

There is substantial duplication among these three PAP portal sites. If you need help obtaining and paying for multiple medicines – three or more – it's worth spending time on all three to compare their offerings, and to see which appeals to you most.

The pparx.org site has both the advantage and disadvantage of being most closely linked to the drug companies. The advantage of that is the site is more likely to have up-to-date information and downloadable forms. The disadvantage is that you are unlikely to read or see anything on pparx.org which judges one PAP against the other. But then, the other two sites seem to avoid that as well.

FILLING OUT THE FORMS

Once you get past the preliminaries and locate a program that may provide assistance, you will enter into the unpleasant world of application forms.



All PAPs require you to complete an application, which includes detailed questions about your employment, family, finances, citizen status, and medical conditions. Pulling this information together can be a challenge.

You may be asked, for example, to provide documentation of all non-income assets (e.g. including bank accounts and personal property, such as house ownership). You'll also have to provide proof of income, such as tax returns, a W-2 form, or a recent pay stub, and quite possibly credit card payment statements.

You'll probably have to provide verification that you are not insured – such as a statement of loss or denial of Medicaid benefits and/or a statement or letter from any private insurer that has denied you benefits. Lacking these (or even if you have them) a PAP can check your insurance history and credit history.

A spouse and/or family members may be required to produce some documentation as well. You will be asked to provide a doctor's prescription for the medication, too. Some applications may even require certifications from a doctor about your medical condition.

Finally, you may have to fill out different forms for each drug you are taking, especially if you are trying to get your



medicines for free or near-free and from different companies. If, perchance, the same company makes two or more of the drugs you take, you may need only to send them one application.

A dozen or so drug companies offer a consolidated discount card – called the Together Rx Access card (www.togetherrxaccess.com). One application covers about 300 widely used medicines. To be eligible, an individual must have annual income under \$30,000 and a family of four less than \$60,000. Qualifying people save 25 to 40 percent off the cost of their medicines. Again, you may do better shopping around or asking your doctor if a less expensive generic drug is available.

Another program The Medicine Program (www.freemedicineprogram.org or 646-205-8000) helps people process PAP paperwork. There's a fee though, of \$5 per drug. If you are turned down, the program will refund your fee upon request. You may also want to check out www.medicarerights.org and www.freemedicinefoundation.com.

HOW WILL I GET MY DRUGS IF I QUALIFY?

PAPs operate differently in this regard. Through some, you'll be able to pick up your medicine at your regular pharmacy. Through other PAPs, you'll get the drugs by mail. And still others may only deliver your free or subsidized medicines to a doctor's office.

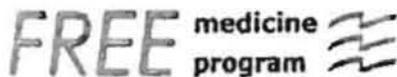
Most PAPs also limit the quantity of drugs they'll dispense to you. In most cases, you'll be able to get a refill over a specified period of time as long as your doctor renews the prescription. But some programs require periodic updates as to your employment and income status before they will authorize a refill prescription.

THE SHOPPER'S GUIDE TO PRESCRIPTION DRUGS SERIES

This series is produced by Consumers Union and *Consumer Reports Best Buy Drugs*, a public information project supported by grants from the Engelberg Foundation and the National Library of Medicine of the National Institutes of Health. The project's free Web site is www.CRBESTBUYDRUGS.ORG.

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About Us

Most drug manufacturers sponsor what's called Patient Assistance Programs. These programs are intended to help those who can't afford their prescription drugs obtain them absolutely FREE!

The ever-changing requirements and the application process to qualify for patient assistance programs are tedious, confusing and very time-consuming. You may contact the drug manufacturer(s) directly to find out more about specific patient assistance program(s). The information is available free of charge. The one-time processing fee of \$1.00 fee billed by the Free Medicine Program, is not a charge for the PAP application forms. We, at Free Medicine Program found that some people might have difficulty navigating the application process and need help - the fee partly covers the administrative expenses of researching the right program(s) for them, maintaining a database of the most recent PAP forms, processing and mailing the paperwork. The fee is refunded if we are unable to find you the assistance in obtaining prescription medicines free of charge, or at a significantly reduced cost, as per our guarantee. In addition, a large number of people, including qualified doctors, nurses, social workers, and other health professionals, are not aware that these programs even exist - Free Medicine Program promotes the program, as well as prints and distributes program brochures nationwide.

We, at Free Medicine Program, cut through the red tape by actually assisting you in applying for enrollment in patient assistance programs, and with the cooperation of your physician you may be able obtain prescription medicine free of charge.

According to PhRMA, in 2004 alone, **6.2 million people received 18 million prescriptions with an estimated value of more than \$3.3 billion**, thanks to manufacturer's patient assistance programs!



"The application process was simple and fast"...

Michael D., New Jersey

Enter your email for regular Updates and Discounts



FREE medicine program 

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Prescription Drugs

Requirements

Most drug manufacturers help people in financial need, regardless of their age. However, in order to qualify you need to meet the following three basic requirements:

1. You do not currently have insurance coverage for outpatient prescription medicines
2. Your income is at a level that causes hardship when prescription medicines are purchased at retail price
3. You do not qualify for a government or third party program that provides for prescription medicine coverage

Keep in mind that sponsor's individual's income criteria vary with family incomes ranging from below the poverty level to up to **\$60,000!**

Those applicants normally qualifying at the highest income limits are generally MS, AIDS, transplant or cancer patients in need of very expensive drugs.



"Words cannot express my many thanks, now that my mother can be assisted through the efforts of your program..."

Mary L., Florida

Enter your email for regular Updates and Discounts



ALPHABETICALLY 

Prescription Drug List

Volunteers Needed

In the Media

FREE medicine program

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verizon

Check Availability

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Prescription Drugs

How It Works

Once you feel that you have met the basic requirements, you're ready to apply for the Free Medicine Program. Start by simply filling out a short Online Medication form (Click Here now).

As soon as we receive this information, we get right to work for you!

- 1. We will immediately process the information you have sent us, and send you a customized information package, prepared specifically to your individual needs.
2. In your personalized package, you will find a letter to your physician. (Because the assistance of your doctor will have significant bearing on your acceptance in the program, we strongly suggest you talk with your physician about the patient assistance program right away). Also in your personalized package, you will find a few quick, easy-to-follow steps to be taken by you and your physician in order to proceed with the application process.
3. Upon completion of these steps, the application(s) are sent to the appropriate drug manufacturer(s), and considered for approval.

The good news is that once approved, your FREE medicines are generally sent to you directly by applicable drug manufacturers in just two to three weeks!

Because of our extensive work in this area, physicians nationwide are currently distributing Free Medicine Program brochures to their patients. In fact, even the U.S. government offices have brochures available for their constituents.

While the funds necessary to distribute this information and support the Free Medicine Program are obtained through a one-time processing fee of \$1.00, contributed by each applicant, the money is refunded if we are unable to find you assistance in obtaining your prescription medicines free, or at a significantly reduced cost.

To begin the application process, simply Click here now.



Words cannot express my many thanks, now that my mother can be assisted through the efforts of your program...

Mary L., Florida

Enter your email for regular updates and discounts



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Request Brochures

If you or someone you now would like to receive Free Medicine Program brochure(s) you can:

- E-Mail us a **request form**.
- Download and print a copy of a brochure right NOW in PDF format

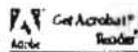
Free Medicine Program encourage physicians, nurses, social workers and other healthcare professionals to help distribute our brochures to the patients that are burdened by high costs of their medications.

To download Free Medicine Brochure In PDF version you must have Adobe Reader installed.



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To get Adobe Reader - "Click"



There is no fee to install this on your computer. This is a Free application.



"Thank you for a wonderful program. I am an older person on fixed income and could not afford to pay for my many medications before I found you."

Bill S., Texas

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For Parents (and
Parents-To-Be)

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For Seniors

Understanding your bill

Legal Help and
Forms

Review your medical bills carefully to check for any mistakes. Even if you are covered by insurance, the cost of billing errors may come out of your pocket in the form of higher co-payments and drug costs.

Para Informacion
en Español

Here is a resource to help you make sense of your medical bills.

Prevention and
Immunizations

- [Understanding your Medical Bills](#): Information from the [American Academy of Family Physicians](#) patient education web site to help you understand billing statements from your doctor and explanation of benefits (EOB) reports sent by your health insurance company.

Disputing your bill

If you are unable to resolve a billing dispute with a hospital, clinic, or doctor's office, contact the Wisconsin Department of Agriculture, Trade and Consumer Protection at (608) 224-4960 or 1-800-422-7128 (in Wisconsin only).

Paying off your debt and protecting your credit

Unless you have successfully challenged your bill, you are responsible for paying all of your medical bills. If you cannot pay, here are some things to consider.

1. Try to negotiate a payment plan. Your hospital or provider may be willing to accept smaller monthly payments. Keep in mind that your payments generally need to be reasonable and you must keep up with your payments. In its [advice to parents of chronically ill](#)

children, the American Academy of Family Physicians recommends the following:

- Notify the appropriate offices quickly.
 - Keep in touch with your creditors.
 - Record the names and phone numbers of the people you are dealing with.
 - Document the date, time, and results of your phone calls.
 - Pay something - even a small amount - on each bill each month as a gesture of good faith.
2. Get information on charity care in Wisconsin hospitals.
 3. Apply for Wisconsin Medicaid or BadgerCare Plus. If you are eligible, Medicaid may pay for some of your existing medical bills. Wisconsin Medicaid coverage can begin as early as the first day of the month, three months before the month you apply, if you would have been eligible in those months, so apply as soon as possible.
 4. Go for credit counseling. Be aware, though, that some services charge high fees and do nothing to really help reduce your debt. Make sure you are working with a credit counseling service (also known as an adjustment service agency) that is licensed by the Wisconsin Department of Financial Institutions.
 - A list of licensed credit counselors can be found at the Department of Financial Institution's website. If you have questions or complaints about a particular agency, call their Licensed Financial Services Section at (608)-261-7578.
 - Money and credit information is available from the Federal Trade Commission.
 - The National Foundation for Credit Counseling (NFCC) accredits credit counseling agencies that provide free or low-cost services. You can search for an NFCC member credit counseling agency from the NFCC website or by calling 1-800-388-2227.
 5. Be creative about finding help from outside sources. Charitable foundations, civic organizations and churches and community groups might be able to help. The Patient Pal (PDF, 197 KB) from the Patient Advocate Foundation includes some fundraising ideas for those with high medical bills.
 6. Don't ignore bills. Though tempting, this is not a good strategy. Hospitals and providers are more likely to negotiate with you if you contact them immediately.
 7. Don't transfer debt to a credit card. Most experts warn that this is a poor choice for paying off medical debt for two reasons:
 - The interest rates on your credit card will add significantly to your total payment.
 - Transferring medical debt to a credit card may affect your eligibility for Medicaid. Some medical costs can be deducted from gross income to determine your Medicaid eligibility. Medical debt on a credit card may no longer qualify as medical debt.

Dealing with collection agencies

If your hospital or other health care provider has turned your bill over to a collection agency, you are protected against harassment by the Fair Debt Collection Practices Act (FDCPA).

- [Disputing a Debt](#), from the Wisconsin Department of Financial Institutions, provides information on how to deal with collection agencies.
- [Debt Collection](#), also from the Wisconsin Department of Financial Institutions, provides information on your rights.

If you have questions about your rights or the conduct of a collection agency, contact the Department of Financial Institutions at (608) 264-7969, or 1-800-452-3328 (in Wisconsin only).

Bankruptcy

The decision to file for bankruptcy should be last resort. More [information on how bankruptcy works and the different types](#) is available from the Wisconsin Department of Agriculture, Trade and Consumer Protection.

Legal help

If you find that you need legal help to deal with your medical debt, the Wisconsin State Bar Association's website provides [general information on finding a lawyer](#) and information on [finding a lawyer if you have a low income](#).

The [Legal Services Corporation](#), a private, non-profit corporation established by Congress, provides a list of Wisconsin [local legal aid programs](#) from its website.

PDF: The free *Adobe Reader*[®] software is needed to view and print portable document format (PDF) files. [Learn more](#).

Last Revised: September 04, 2013

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Protecting and promoting the health and safety of the people of Wisconsin

The Official Internet site of the Wisconsin Department of Health Services



What's New!

General Information

Aging and Disability Resource Centers

Consumer Information

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Program Operations

WI Functional Screen

State and Fed Requirements

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History of LTC Redesign

FAMILY CARE

Options for Long-Term Care

Quick Links:

- [Family Care Partnership Program](#)
- [Wisconsin Council on Long-Term Care](#)
- [Other Links](#)

General Information	Program Monitoring and Evaluation	Program Operations	State and Federal Requirements	History of Long-Term Care Redesign
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Family Care is a comprehensive and flexible long-term care service system, which strives to foster people's independence and quality of life, while recognizing the need for interdependence and support.

Important information for NorthernBridges members and providers:

[Transition to New Managed Care Organization for 11 Northern Counties in Wisconsin](#)

Goals of the Family Care Initiative:

CHOICE – Give people better choices about the services and supports available to meet their needs.

ACCESS – Improve people's access to services.

QUALITY – Improve the overall quality of the long-term care system by focusing on achieving people's health and social outcomes.

COST-EFFECTIVENESS – Create a cost-effective long-term care system for the future.

Where to find updated information:

We will continue to update and add to the information about Family Care on these web pages, so check back frequently. If you need information that is not published here, please contact:

Division of Long Term Care
Office of Family Care Expansion
1 West Wilson Street, Room 518
P.O. Box 7851
Madison WI 53707-7851
Phone: 608/267-7286
Fax: 608/266-5629
DHSFCWebmail@wisconsin.gov

Last Revised: September 12, 2013

Medicare Savings Programs (Also called "Medicare Premium Assistance")

Wisconsin's Medicaid program may be able to help pay for certain Medicare costs if you can enroll in a Medicare Savings Program. These programs are for those who receive Medicare benefits and who have limited countable income and assets. See the tables for these limits.

If you can enroll in a Medicare Savings Program, Medicaid may pay your required premiums, co-insurance and deductibles for both Part A (hospital-related costs) and B (physician-related costs), depending on the program.

Medicare Savings Programs

1. Qualified Medicare Beneficiary (QMB)

The first day of the month after your application is approved, Medicaid pays Medicare Part A and B premiums, deductibles and co-insurance, if you:

- Are entitled to Medicare Part A,
- Have countable assets at or below the program limit, and
- Have countable monthly income at or below 100% of the Federal Poverty Level (FPL), after certain credits are applied.

2. Specified Low Income Medicare Beneficiary (SLMB)

Up to three months before your application date, Medicaid pays Medicare Part B premiums, if you:

- Are entitled to Medicare Part A,
- Have countable assets at or below the program limit, and
- Have countable monthly income between 100% and 120% of the FPL, after certain credits are applied.

3. Specified Low Income Medicare Beneficiary Plus (SLMB+)

Up to three months before your application date, Medicaid pays Medicare Part B premiums, if you:

- Are entitled to Medicare Part A,
- Have countable assets at or below the program limit

- Have countable monthly income between 120% and 135% of the FPL, after certain credits are applied, and
- Are not enrolled in full-benefit Medicaid.

4. Qualified Disabled and Working Individual (QDWI)

Up to three months before your application date, Medicaid pays Part A premiums, if you:

- You are disabled and employed
- Are entitled to Medicare Part A,
- Have countable assets at or below the program limit,
- Have countable monthly income less than 200% of the FPL, after certain credits are applied, and
- Are not enrolled in full-benefit Medicaid.

*Effective 2012 Net Monthly Income Limits

Group Size	100% FPL	120% FPL	135% FPL	200% FPL
1	\$930.83	\$1,117.00	\$1,256.63	\$1,861.67
2	\$1,260.83	\$1,513.00	\$1,702.13	\$2,521.67

Effective January 2011 Asset Limits

QMB, SLMB, SLMB+

Group Size	Asset Limit
1	\$6,940
2	\$10,410

QDWI

Group Size	Asset Limit
1	\$4,000
2	\$6,000

*Not all of your income and assets will be counted in determining if you can enroll in a Medicare Savings Program. Income and asset limits may change each year. For current income amounts, call 1-800-362-3002 or go to dhs.wis.gov/medicaid/fpl.html.

You May Already be Getting Medicare Savings Program Benefits

Medicaid should already be paying your Medicare Part A and B costs (meaning you need not apply for Medicare Savings Program benefits) if you receive Medicare and Medicaid and either of the following apply to you:

1. You are enrolled in the Supplemental Security Income (SSI) program, or
2. You were enrolled in SSI but lost it:
 - While you were getting Old Age Survivors Disability Insurance (OASDI), or
 - Because you are the disabled adult child of parents who died or became disabled, causing you to get an increased or initial Social Security payment that made you unable to get SSI, or
 - Because you are the disabled or elderly spouse of a person who died, causing you to get a Social Security benefit that made you unable to get SSI.

If you think Medicaid should be paying your Medicare Part A and B costs, but Medicaid is not, contact one of the agencies listed under the "Questions?" section.

When Will Payments Begin?

If you can enroll in a Medicare Savings Program, please allow at least two months for payments to begin. This is the time that is needed for payments to be adjusted by Wisconsin Medicaid, Medicare and the Social Security Administration.

When Medicaid starts paying your Medicare costs, your Social Security check will increase and you will get a notice from the Social Security Administration. The Social Security Administration will give you a refund for any payment you made after the date you were enrolled in a Medicare Savings Program.

How To Apply

You can apply online at www.wisconsin.gov, over the telephone, by mail or in person with your local agency to find the address or phone number for

your agency, go to www.wisconsin.gov for assistance help or call Member Services at 1-800-362-3442. They can also send you an application and answer any questions you may have about the application or these programs.

Questions

Information provided in this document is general. For more detailed information or to get help to apply contact:

- Age 60 or older: You may contact the Elderly Benefit Specialist in your county. Elderly Benefit Specialists are located in County Aging Units or the Aging and Disability Resource Center*. If you have access to the internet, go to www.aging.wisconsin.gov to find the Elderly Benefit Specialists serving your county.
- Age 18 to 59: You may be able to get help from a Disability Benefit Specialist. Disability Benefit Specialist services are available only in counties served by an Aging and Disability Resource Center*. If you have access to the internet, go to www.adrc.wisconsin.gov to find the Disability Benefit Specialists serving your county.

*The phone number and/or address of your county agencies will be listed in the phone book under County or Tribal Government, Aging and Disability Resource Center, or Human Services.

If you have a disability and need to access this information in an alternate format, or need it translated to another language, please contact (608) 266-3356 or 1-888-701-1251 TTY. All translation services are free of charge. For civil rights questions, call (608) 266-9372, or 1-888-701-1251 TTY.



State of Wisconsin
Department of Health Services
Division of Health Care Access and Accountability

Free Clinics	12/8/2011	Last Updated		Email David Hipps (dhipps@consortia.org) for updates			
Organization Name	Contact Person	Street Address	Phone #	Fax #	Special Info	E-Mail Address	Website
Albrecht Free Clinic (site #1)	Lynn Pasbrig, Jennifer Zaskowald	1110 Oak Street Sullie 1200 West Bend, WI 53095	262-334-9339 (Leave Message) 808-957-3000	262-306-7717	General Business Hours: Monday - Thursday, 9a.m. - 5p.m. Hours of Clinic Operation Tuesdays: morning appointments only; walk in from 6:00p.m. - 7:30p.m. Wednesdays: morning appointments only Thursdays: afternoon appointments only; walk in from 6:00p.m. - 8:00p.m.		http://www.albrechtfreeclinic.org/
American Community Medical Center, Inc.	Mahmud Satari	1421 S. Park St. Madison, WI 53703	608-441-6898 (Leave Message) 608-446-3344		Tue - Sat By Appointment Sun: Closed If it is an emergency, please call 811 immediately.		http://www.ammedicalcenter.org/
Asthma Clinic	Lynna Edeboha	4633 D Verona Rd (in Madison Plaza) Madison, WI 53711	608-827-2308	608-827-2344	Call for hours.		www.foundationofwiscare.com
Benevolent Specialized Project-Free Clinic	Kathy Williams	2711 Allen Blvd, Lower Level Middleton, WI 53592	608-827-2308	608-827-2344	Call for hours.	kathleen.williams@seanusa.com	
Bread of Healing at Cross Lutheran Church	Rick Cesar	1821 N. 16th Street Milwaukee, WI 53205	414-877-0001	414-755-9971	Call for hours.	bread_of_healing@yahoo.com	
Bread of Healing (BOH) Agape Community Center		8100 N 42nd Street Milwaukee, WI			Call for hours.	www.breadofhealing.org	
Bread of Healing Clinic (at Cross Lutheran Church) City on a Hill Clinic	Kerrol Miranda, RN	1821 N. 16th St. Milwaukee, WI 53205 2224 W. Kibbourn Ave Milwaukee, WI 53233	(414) 877-0001 414-831-8670	Fax (414) 755-8971 414-931-1804	Call for hours. Second Saturday of each month from 12:00 - 3:30. Offering monthly BP and BS screenings, foot care and health education topics and limited physician visits to the uninsured. Cholesterol Screening 2-3 times per year. Vision screening every other month starting with January. Physical Therapy every other month starting with February. Lunch and food pantry available to participants in health screenings.	www.breadofhealing.org kerrolm@aol.com	
Chippewa Valley Free Clinic	Jenny Regalia	421 Graham Ave PO Box 231 Eau Claire, WI 54702	715-839-6477	715-839-8521	Open Tuesdays and Thursdays only, offering walk-in services, mental health, diabetic, ophthalmologic, and foot clinics Patient Application Process and patients are seen by appointment only		www.chippewaclinic.org
Church Health Services, Inc. Beaver Dam	Diana Molne, RN Clinic Coordinator	308 Oneida St. Beaver Dam, WI 53918	920-887-1706	920-887-2322		info@churchclinic.org Disability@churchclinic.org	
Church Health Services, Inc. Mayville	Hedi Waiss, RN	16 S. Main St., Mayville, WI 53050	920-387-2965	920-887-2322		info@churchclinic.org HediW@churchclinic.org	

Organization Name	Contact Person	Street Address	Phone #	Fax #	Special Info	E-Mail Address	Website
Community Clinic of Door County	Laura Moeller, PHD, MA Executive Director	1823 Rhode Island St, POB 3 Sturgeon Bay, WI 54235	920-746-8989	920-746-8980	Call for hours.	lmoeller@communityclinicofdoorcounty.org	
Community Connections Free Clinic	Aaron A. Darr, MD, Theresa Hiss Director	101 E. Fountain Street P. O. Box 184 Dodgeville, WI 53533	608-930-2232	608-935-5188	Hours are 5:30 to 8:00 p.m. every Tuesday and Thursday, except holidays. email address will change March 1, 2011 to: info@focododge.org	CCFC@charterinternet.com	
Community Chronic Disease Management Clinic (CCDM) Puerita	Heather	205 E. Concordia Milwaukee 53212	414-586-9178	414-270-4806	CCDM screens and manages the care of hypertension and non-insulin dependent diabetes	hbourne@calumville-almare.org	
Community Outreach Health Clinic	Linda Smith, NP	W180N8085 Town Hall Rd Menomonee Falls, WI 53051	262-257-3394	262-253-7162	Call for hours.	linda.smith@rocodesthealth.org	
Dental Clinic: - Waukeasha	Teri Terrill	10585 Lindvud Dr. Cedarburg, WI 53012	262-846-0813		Call for hours.	tterrill@midpointno.com	
Free Clinic of the Greatest Menomonee Area, Inc.	Mary Blanchard, Dennis Ciesielski	2321 Stout Rd. Menomonie, WI 54751	715-308-3808/ 715-231-2710	715-233-7860	Red Cedar Medical Center, Level A. Clinic hours are Tuesday only, registration between 6:00 and 7:00 PM.	blanchard.mar@maria.org dennis@small.com	
Free Clinic of Pierce St Croix Counties	Linda Robertson, Mary Sletten, Mary Conroy- Johnson	1887 E. Division St. P.O. Box 746 River Falls, WI 54022	715-307-3948 715-307-3949 715-426-4603		Open on Tuesdays only	heather.robertson@pierce.org linda.robertson@pierce.org mary.sletten@pierce.org mconroy@pierce.org	
Good Neighbor Clinic	Joan March, RN	1808 North Street Prairie du Sac, WI 53578	808-843-1748 808-844-0504		Call for hours.	joanm@small.com	www.goodneighborclinic.org
Granville Neighborhood Health Center	Melissa Wolgram, Rebekah Carey	9550 W Brown Deer Road Milwaukee, WI 53224	262-365-5136		Call for hours.	mel.wolgram@hcmh.com	
Greater Milwaukee Free Clinic	Kathleen Schneider	9330 W. Lincoln Ave West Allis, WI 53227	414-546-3733 414-546-3746		Call for hours.	acthomas@greaterfree.org	
Health Care Network, Inc.	Barb Tyler	904 State St. Racine, WI 53404	262-832-2400	262-832-7968	Call for hours.	barbtyler@hcnwi.com	
HealthNet of Rock County Inc.	Jean Randless	23 W. Milwaukee St. Janesville, WI 53548	808-756-4638	808-756-4828	Call for hours.	jeanr@healthnet.com	healthnet-rock.com
Huane Ozaukee Community Health Clinic	Sharon Steff, Chris Deora, Mary	13111 N. Port Washington Rd Mequon, WI 53097	262-243-7533	262-243-7318	Call for hours.	sharon.steff@hucmail.com	
In-Health Community Wellness Clinic	Robin Tranzo	109 East Bluff Street Boscobel, Wisconsin 53805	808-375-4324		Serving Grant and Crawford Counties Call for hours.	tranzo@inhealth.com	
La Clinica Family Health and Dental	Nancy Pulver	400 S. Town Lane Rd Wautoma, WI 54982	820-787-5514		Call for hours.	narpulver@familyhealth.com	
Lake Area Free Clinic	Paul Baumgartner	858 B Armour Rd Oconomowoc, WI 53068	262-589-4960	262-589-1712	Call for hours.	baumgartner@lakeareafreeclinic.org	
Living Healthy Community Clinic	Linda Booher	510 Doctors Court Oakbrook, WI 59801	820-424-1242	820-424-2045	Call for hours.	lbooher@lwhc.org	

Organization Name	Contact Person	Street Address	Phone #	Fax #	Special Info	E-Mail Address	Website
Marrek Clinic of Chiropractic	Cheryl Marrek, Brian Lee Marrek, D.C.	6425 Odiana Road Suite 14 Madison, WI 53719-1127		608-819-8960	Clinic hours: Monday-Friday 10:00 a.m. - 1:00 p.m. and 6:00 p.m. - 7:00 p.m. and Saturday 12:00 p.m.-3:00 p.m.	MarrekClinic@gmail.com	http://www.MarrekClinic.com
Marquette Clinic for Women & Children	Uinda Booker	1821 N 16 th St. Milwaukee, WI 53205	414-755-8970	414-755-8970	Call for hours.	marveta.boyce@marquette.edu	
MW-Jessie Coggs Saturday Clinic	Adam Rorah, Co-Director	2770 North 5 th St Milwaukee, WI 53212			Call for hours.	adamrora@earthlink.net	
MEDIC	Sharon Yountsh	2202 S. Park St. Madison, WI 53713	608-285-4972		Open Saturdays only. Doors open at 8 am, first come first served. First appt. at 9 am	medic@med.wisc.edu	
Middleton Teen Clinic	Bonnie Kuhn	2711 Allen Blvd, Suite 300, Middleton, WI 53552	(608) 827-2300	(608) 827-2599	Call for hours.	teencommunity@earthlink.net	
NEW Community Clinic	Georgio Sels	622 Bobert St. Green Bay, WI 54301	920-437-9773	920-437-0984	Call for hours.	newcommunity@earthlink.net	
Open Door Free Clinic-Unity Church		1025 E. Oklahoma Ave Milwaukee, WI 53207	414-481-1778	414-481-1778	Call for hours. Meetings: 3965 S. Lake Dr. St. Francis, WI 53235. c/o Georgia Sels	open@open-door.org	
Our Lady of Hope Clinic	Dr. Michael Kobern	6425 Odiana Road, Madison, WI 53719	608-819-8544	608-819-8547	Call for hours.		See http://ourladyofhopeclinic.org/ for more information
Pickard Avenue Community Clinic	Ed Wrench	3654 S. Pickard Ave Cudahy, WI 53110	414-786-2239 ext. 308	414-786-2281	Call for hours.	wrench@pickardavenue.org	
Repairers of the Breach	Melita Blase, Mary Ann Radowski	1345 W. Vliet St Milwaukee 53205	414-342-9323		Hours vary week to week. Call first.	melblase@earthlink.net	
Richard Community Free Clinic	Gloria Bassett	301 E. 2nd St. Richard Center, WI 53581	608-847-8161		Open Tuesdays 8 - noon for those without insurance.		http://www.rcfrcclinic.com/
Rice Lake Area Free Clinic	Butte Coville	1035 N. Main Street, Suite 602 Rice Lake, WI 54986	715-736-3733 (736-FREE)	715-738-3734	We are open for patient care on the 2nd and 4th Tuesdays of each month. Our doors open at 5 PM, providers start patient visits at 8 PM and we close at 9 PM.	butte@riceareafreeclinic.org	http://ricecf.org/
Rock River Free Clinic	Gail Scott, RN	1641 Annex Road Jefferson, WI 53549	920-874-7275	920-874-7477	Call for hours.	gail@rockrivercommunity.org	
Salvation Army Clinic	Nancy Szuzsik	1730 N. 7 th St Milwaukee, WI 53205	414-285-6380	414-285-8151	Call for hours.	nsuzsik@salvationarmy.org	
Red Shield Free Clinic	Pam Sender	710 Pennsylvania Ave Sheboygan, WI 53082	920-458-3723	920-894-0035	Call for hours.	sender@redshield.org	
Sarbanian Health Clinic- Fond du Lac		430 E. Division Fond du Lac, WI 54935	920-928-4841 or 928-4805	920-928-8874	Call for hours.	searbanian@searbanian.org	
Samaritan Health Clinic- Waupun	Lt Hoffman	620 W. Brown St Waupun, WI 53983	920-324-8540		Call for hours.	samaritan@searbanian.org	
Saturday Clinic for the Uninsured	Jim Sanders, MD	1121 E. North Ave Milwaukee, WI	414-598-2985		Call for hours.		
Seton Dental Clinic	Lt Nelson	1730 S. 13th Street, Milwaukee 414-383-3220	414-383-3220	414-383-3363	Urgent Care is available to people on a walk-in basis according to eligibility criteria. Call for criteria.	setonseton@setonmbsa.org	
St. Clare Health Mission	Sandy Brekke	916 Ferry St. LeCrosse, WI 54601	608-791-9544	608-791-8570	Call for hours.	brekke.sandy@mcny.edu	
St. Clare Health Mission of Sparta	Patricia Ruffery, DO	310 W. Main St. Sparta, WI 54656	608-289-1770	608-289-1017	Call for hours.	ruffery.patricia@mcny.edu	
St. Francis Community Clinic		1985 Oakhosh Ave Oakhosh, WI 54902	920-230-2273	920-231-2502	Call for hours.		

Organization Name	Contact Person	Street Address	Phone #	Fax #	Special Info	E-Mail Address	Website
St. Joseph's Medical & Dental Clinic	Kathy Ploper, Jennifer Evans	828 N. East Ave Waukesha, WI 53185	262-544-8777	262-544-8687	Call for hours.	Kploper@stjmed.org jlevans@stjmed.org	
St. Vincent de Paul Free Clinic	Christy O'Dea	1004 E. Main St. Merrill, WI 54452	715-535-8568	715-535-9608	Call for hours.	fred@stvinc.org	
The Good Neighbor Clinic of Sauk Prairie	H.P. Carlson, MD, Stefani Moreno	1908 North St. Prairie du Sac, WI 53576	608-643-4749 ext 14	608-644-0504	Call for hours.	hp@goodneighborclinic.org smoreno@goodneighborclinic.org	www.goodneighborclinic.org
The Open Door Clinic, Inc.	Dr Tom Chisholm, MD, Deb Seeger	Site: 130 West Central Street Chippewa Falls, WI	715-720-1443	715-720-4650	Open Tuesdays 4 - 8 pm	deh@chippewasoundboard.org	
Two Courtes Free Clinic	Candice Sheridan	1301 Chert Boulevard Suite 118 Marinette, WI 54143	715-732-1349	715-732-1386	Mailing address: PO Box 271 Chippewa Falls 54728	cd@twocourtes.org	
Walker's Point Community Clinic	Steve Only	811 W. National Ave. #400 Milwaukee, WI 53204	(414) 384-1400	414-972-7012	Call for hours.	steve.ohy@autora.org	
Watertown Area Cares Clinic	Roberta Marney, Carol Merfins, John Sasenich	415 S. 8 th St Watertown, WI 53094	920-208-7787		Call for hours.		
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