

In a continuing effort to provide valuable service and convenience to our clients, we have established a web site on the Internet. You can visit us on the World Wide Web at: <http://www.themedicineprogram.com>. We invite medical professionals, social workers and others in the healthcare field to contact us for a supply of brochures.



The Medicine Program salutes the many pharmaceutical manufacturers who provide their products at no cost to those in need. Such significant acts of benevolence and compassion by these industry giants serve to encourage and strengthen this great nation.

Patient Comments

To The Medicine Program:

"A letter of thanks is hardly enough to show my appreciation for this wonderful program. My medication is essential, but so are my doctor visits. Your program enables me to have both. My diabetes medicine started at \$48.00 a month, but inside of four months it went up to \$52.00 a month. I hope your program goes on forever and helps many people in the same situation I'm in. Keep up the good work."

Thanking you, Alice S.

To The Medicine Program:

"I think this is a wonderful idea! I will be mailing in my application ASAP. I am an expecting mother who has been on Prozac successfully for four years. I work 35 hours a week, but my job offers no benefits. There should be more people and programs like this! It is really filling a need."

Jane K.

To The Medicine Program:

"The help I got from your company really paid off for getting my medications, and I don't know how to say Thank You. My doctors were glad to help. The cost of my medicine went from \$194.36 a month to \$6.00 a month. Thanks so very much. Take care, and may God bless you all."

John G.

To The Medicine Program:

"I am a social worker writing to request that you send me 25 more applications/brochures for The Medicine program. Your resource has been invaluable for my clients. Thanks."

Diane L., MSW, CCM

**When
You
Can't
Afford
Your
Medicine...**

Welcome to **The Medicine Program**. This organization was established by volunteers dedicated to assisting individuals of all ages who are regularly required to take prescription medication but lack adequate income to fill their prescriptions each month.

The Medicine Program seeks to aid those who have exhausted all other sources for help with medication. Since our inception we've assisted many families who could not afford the cost of their prescription drugs. The majority of our applicants are individuals living on retirement income, welfare checks, disability or are among the working low to middle income. Most of our clients have too much income to qualify for government prescription assistance, but not enough to purchase private prescription drug insurance coverage.

Many financially challenged individuals are choosing daily between buying food or prescription medications. Several generous **drug manufacturers** are now sponsoring **patient assistance programs** that provide **free medicine** to qualified individuals who cannot afford to purchase expensive prescriptions. Enrollment in a patient assistance program eases the drain on family funds, resulting in increased cash available for life's basic necessities.

Your doctor is concerned about the rising cost of your prescription drugs. Healthcare and social workers across the nation are exploring new opportunities to help patients obtain their medication.

These drug manufacturer sponsored patient assistance programs are available **nationwide** to people of



**Free
Prescription
Medicine
Is Available
To Those
Who Qualify**



"The Patient's Advocate"

all ages. However, we believe the procedures required to actually be approved, enrolled and receive medication are sometimes so involved that many qualified persons never accomplish this objective. In fact, the vast majority of those qualified are **not aware** of these programs and therefore have never considered applying.

The **Medicine Program** helps people to apply for enrollment in one or more of the many patient assistance programs now available. This process is accomplished with the cooperation of the applicant's physician. The majority of these programs provide prescription medication free-of-charge to individuals in need, regardless of age, if they meet the sponsor's criteria.

Some of the primary requirements for an applicant to be enrolled are:

- ✓ The applicant does not have insurance coverage for outpatient prescription drugs.
- ✓ The applicant's income is at a level which causes a hardship when the patient is required to purchase the medication at retail.
- ✓ The applicant does not qualify for a government or third party program which provides for prescription medication.

The objectives of The Medicine Program are to:

1. **Inform** the potentially qualified applicant.
2. **Simplify** the application procedural problems.
3. **Provide** general guidance in the application process.

*ific steps we take to assist an
t are as follows:*

vide a **simple form** (see Medication
m-Form) upon which the applicant records
me, address, phone number, a list of
is needed and the name/address of the
doctor(s). This information should then be
The Medicine Program

receipt of the four items requested on the
Information Form, we will
ly process the information and respond to
nt by return mail. **Each applicant will**
customized packet designed to assist in
the appropriate manufacturer for help
er particular medication(s).

ket will also contain a letter to the
doctor asking for the participation of the
office in the application process. The
n and favorable recommendation of the
physician has a significant bearing on the
approval and enrollment into a patient
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omized packet provided by **The**
Program describes the specific steps to be
e patient and doctor to proceed with the
process. When these steps have been
ed, the completed application(s) are sent
opriate manufacturer to be considered. If
is approved, within 2-3 weeks the
s are normally sent to the physician's office
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oted into a patient assistance program, the
income must fall within the limits
by his particular sponsor(s). The
income limit requirement varies with each



**These
Programs
Are Designed
To Help
People Of
All Ages**

manufacturer. Decisions concerning which
medications are provided free-of-charge and which
individuals are accepted into the programs are made
solely by the various program sponsors. Each
manufacturer has established specific criteria to
determine an applicant's eligibility.

Examples listed in a recent report outlining sponsor's
criteria for approval and enrollment relate that
individuals with family incomes ranging from below the
national poverty level up to \$50,000 annually can qualify.
Those qualifying at the highest income levels are
generally AIDS patients requiring very expensive drugs.

The Medicine Program's services are currently offered
nationwide through a variety of private healthcare and
government social service offices.

The Medicine Program's brochure/processing
forms are also available from many physicians. Some
members of the United States Congress and state
legislatures also have brochures available for their
constituents.

The funds necessary to support **The Medicine Program**
and distribute these informational materials are provided
by the \$5.00 processing fees contributed by the
applicants.

**If you wish to begin your application process at this
time, simply mail to us the required items
numbered one (1) through four (4) listed on
The Medication Information Form.**

Guarantee Policy

The Medicine Program guarantees a full processing fee
refund upon written request, to any applicant who
receives no medication and is determined to be ineligible
for assistance by all applicable manufacturers. All refund
requests must include a copy of each manufacturer's
letter indicating the applicant has been determined
ineligible for assistance. Refund requests must be made
within 120 days after original application is made to
The Medicine Program

Although we cannot guarantee your approval, if you
believe you may qualify to participate, we will be diligent
in our efforts to assist you. Past results have proven our
program successful. If you have family or friends who may
benefit from this program, please ask them to read this
information or make a copy for them. If you have further
questions, please feel free to contact us.

Medication Information Form

Complete this form & mail along with your processing fee of \$5.00 for EACH medication requested to:
The Medicine Program • P.O. Box 520, Doniphan, MO 63935-0520 • Phone: 1-573-996-7300
 Internet! <http://www.themedicineprogram.com> • e-mail: help@themedicineprogram.com

To begin the application process, complete the **Medication Information Form** and mail to us the following items:

1. The name, address and phone number of the person taking the medication(s).
2. The name of the medication(s).
3. The name and address of the doctor who prescribes the medication(s).
4. **The Medicine Program** requires a \$5.00 processing fee for EACH medication requested. It is payable to "The Medicine Program" and should be mailed to us along with the completed Medication Information Form.



Please Print Clearly

Patients Name

Address

City State Zip

Phone Date of Birth

NAME OF MEDICATION

NAME & ADDRESS OF DOCTOR

	NAME OF MEDICATION	NAME & ADDRESS OF DOCTOR
1		
2		
3		
4		
5		
6		
7		
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10		

Please Make Copies of This Form if Needed.
 Available in Spanish.

Number of medications x \$5 ea = Amount due \$
 Application can not be processed without the correct fee enclosed.

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Policy

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