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Co-Pay Programs for HIV

These programs offer assistance to people with private health insurance for the co-payments required to obtain HIV drugs at the pharmacy. Some companies offer co-pay assistance for all of their drugs, including non-HIV drugs.

ABBVIE (formerly Abbott)
Drugs covered: Kaletra, Norvir
Contact Information: 800-222-6885, or go to the product websites (e.g. www.kaletra.com).
Program Details: The co-pay assistance covers the first $200 per Kaletra prescription per month, and the first $50 per Norvir prescription per month. Currently, a person must reapply for the program each year.

BOEHRINGER INGELHEIM (BI)
Drugs covered: Viramune XR
Contact Information: The BI co-pay card is distributed by health care providers, HIV service providers and pharmacies only.
Program Details: The co-pay assistance starts after the first $25 paid by the consumer, then unlimited co-pay coverage; no cap. The program does not cover Aptivus prescriptions, nor does it cover Viramune IR, which is now available as generic. Previously a person needed to reapply for the program each year, however those who plan to or are currently enrolled in the co-pay program are now covered through December, 2013.

BRISTOL-MYERS SQUIBB (BMS)
Drugs covered: Atripla, Reyataz and Sustiva
Contact Information: 888-281-8981 for Sustiva and Reyataz or 866-784-3431 for Atripla or go to the product websites (e.g. www.sustiva.com).
Program Details: The program covers the first $200 per-month of your co-payment for Reyataz and Sustiva, and the first $400 for Atripla. Currently, a person must reapply for the program each year.

GENENTECH/ROCHE
HIV Drugs covered: None
Contact Information: None
Program Details: No program, might cover co-pays through their patient assistance program (see p.3).

GILEAD SCIENCES
Drugs covered: Atripla, Complera, Emtriva, Stribild, Truvada and Viread
Contact Information: 877-505-6986 or go to product websites (e.g. www.truvada.com)
Program Details: The program covers the first $400 per-month of your co-payment for Atripla, Complera, and Stribild; and the first $200 per-month of your co-payment for Emtriva, Truvada and Viread. The program automatically renews annually for enrolled patients.

JANSSEN THERAPEUTICS (formerly Tibotec Therapeutics)
Drugs covered: Edurant, Intelecten, Prezista
Contact Information: 866-961-7169 or go to product websites (e.g. www.prezista.com). You can also get all of the relevant information or forms including an instant savings card at www.janssenthetherapeutics.com.
Program Details: After paying the first $5 of your co-payment, there is no limit on the amount of the remaining co-pay Janssen will cover. Currently, you must reapply for the program each year.

MERCK & CO.
Drugs covered: Isentress
Contact Information: 855-834-3467 or www.isentress.com
Program Details: The program covers the first $400 per-month of your co-payment for Merck HIV products. Currently, a person must reapply for the program each year.
ViiV HEALTHCARE (formerly GlaxoSmithKline & Pfizer)

Drugs covered: Combivir, Epivir, Epzicom, Lexiva, Rescriptor, Retrovir, Selzentry, Trizivir, Viracept and Ziagen.

Contact Information: Call 1-877-844-8872. Effective February 1, 2013, patients must get a new card and re-enroll for 2013. You can get the card from your provider or print out the card online at www.mysupportcard.com, or call the number above. To activate the new card, call 855-208-3317 or go to www.activatethecard.com/gsk.

Program Details: The program now covers the first $200 per-month of your co-payment on each ViiV prescription. Currently, you must reapply for the program every two years.

Patient Assistance Programs (PAPs), CPAPA, HarborPath and Welvista for HIV

Patient Assistance Programs (PAPs) offer free HIV drugs to people with low-incomes who do not qualify for any other insurance or assistance programs, such as Medicaid, Medicare, or AIDS Drug Assistance Programs (ADAPs). Different company programs have different eligibility criteria based on the Federal Poverty Level (FPL) designation. The 2013 FPL income for one individual is $11,490. It is adjusted based on family or household size. 200% FPL is $22,980 and 300% is $34,470 for individuals. All levels are somewhat higher in Alaska and Hawaii. A complete table is available at http://aspe.hhs.gov/poverty/13poverty.cfm. Unless otherwise stated, companies ask for verification of income, usually in the form of a federal income tax return. Companies also generally consider household income, meaning that a married couple that files joint taxes would be judged on their combined income. People who file individual income tax returns would only have their individual income considered. Always apply for an exception if told you are not eligible.

A special PAP program exists for ADAP waiting list clients. Welvista, a non-profit mail-order pharmacy based in South Carolina, helps people on ADAP waiting lists access their HIV medications from one location rather than having to access multiple PAPs to obtain their medications. Welvista is licensed in 20 states and working with seven HIV drug companies to provide HIV drugs free to individuals on ADAP waiting lists.

Two other recent developments that will potentially ease access to PAPs are the Common PAP Application (CPAPA) and HarborPath. The Department of Health and Human Services (DHHS), along with seven pharmaceutical companies, the National Alliance of State and Territorial AIDS Directors (NASTAD), and community stakeholders developed a common patient assistance program application that can be used by both providers and patients. Before, patients and advocates had to fill out different sets of paperwork for each company PAP—the new application should help simplify this process. Go to http://hab.hrsa.gov/patientassistance to download the form.

HarborPath is a non-profit organization that helps uninsured individuals living with HIV/AIDS gain access to brand-name prescription medicines at no cost, by providing case managers with a single “one-stop shop” online portal for PAP applications and medication fulfillment through a mail-order pharmacy. Currently in its pilot phase in six states with two pharmaceutical companies on board, there are plans for expansion in 2013, including adding medicines for hepatitis C. Go to www.harborpath.org for more information.

The FPC has listed information on the major HIV drug company PAPs below. Please note:

- Most companies are using Welvista for ADAP waiting list patients.
- Some companies are covering ADAP waiting list patients through their own PAPs.
- Some companies are covering ADAP waiting list patients through both Welvista and their own PAPs.
- Some companies are also covering ADAP dis-enrolled clients through their own PAP programs and some are not.
- If an ADAP patient has been dis-enrolled because the state has lowered FPL eligibility, the drug company FPL may also be too low to
cover them. Check the individual company PAP criteria; and always apply for an exception if you are told you are not eligible.

Listings below indicate which companies are participating in the HarborPath and Welvista programs.

ABBVIE

Drugs covered: Kaletra, Norvir
Contact Information: 800-222-6885 or go to product specific websites (e.g. www.kaletra.com).
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels (FPL). Abbott’s program covers people with incomes up to 500 percent of the FPL. Abbott does not request income verification and they only consider the income of the individual. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down. People initially denied coverage through the PAP should apply a second time and ask for a relevant exception. Abbott currently participates in the Welvista ADAP waiting list program.

BOEHRINGER INGELHEIM (BI)

Drugs covered: Aptivus, Viramune XR
Contact Information: 800-556-8317 or www.rxhope.com or www.pparx.org
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels. BI’s program covers people with incomes up to 500 percent of the FPL. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down. People initially denied coverage through the PAP should apply a second time and ask for a relevant exception. BI currently participates in the Welvista ADAP waiting list program.

BRISTOL-MYERS SQUIBB (BMS)

Drugs covered: Atripla, Reyataz and Sustiva
Contact Information: 888-281-8981 or www.bms.com or go to product websites (e.g. www.sustiva.com). The Atripla PAP is handled separately at 866-290-4767 or go to www.atrila.com.
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels. The BMS program covers people with incomes up to 500 percent of the FPL. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down. People initially denied coverage through the PAP should apply a second time and ask for a relevant exception. BMS currently participates in the Welvista ADAP waiting list program.

GENENTECH/ROCHE

Drugs covered: Fuzeon
Contact Information: 877-757-6243
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels (FPL). Genentech’s program covers people with incomes up to 950 percent of the FPL. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down. People initially denied coverage through the PAP should apply a second time and ask for a relevant exception. Genentech does not currently participate in the Welvista ADAP waiting list program.

GILEAD SCIENCES

Drugs covered: Atripla, Complera, Emtriva, Stribild, Truvada, Viread
Contact Information: 800-226-2056 or go to www.gilead.com/us_advancing_access. The Atripla PAP is handled separately at 866-290-4767 or go to www.atrila.com.
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels (FPL). Gilead’s program covers people with incomes up to 500 percent of FPL. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down. People initially denied coverage through the PAP should apply a second time and ask for a relevant exception. Medicare Part D clients, as well as underinsured who have co-insurance, caps or co-pays they cannot afford, are covered 100% by the PAP if they fall within the FPL% eligibility requirement. Gilead currently participates in the Welvista ADAP waiting list program.

JANSSEN THERAPEUTICS (formerly Tibotec Therapeutics)
Drugs covered: Edurant, Intelence, Prezista
Contact Information: 800-652-6227; www.jjpfaf.org or product-specific website (e.g. www.prezista.com)
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels (FPL). Janssen’s program puts no limit on income. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down. People initially denied coverage through the PAP should apply a second time and ask for a relevant exception. Additionally, people who are already on a Janssen Therapeutics product who may find themselves suddenly cut off from insurance or dis-enrolled from an ADAP but who are over income limits will also qualify for exceptions, and should clearly note that they are already on drug where asked in the application. Medicare Part D clients, as well as underinsured who have co-insurance, caps or co-pays they cannot afford, are covered 100% by the PAP if they fall within the FPL% eligibility requirement. Janssen currently participates in the Welvista ADAP waiting list program.

MERCK & CO.
Drugs covered: Crixivan, Isentress
Contact Information: 800-850-3430 or www.merckhelps.com
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels (FPL). Merck’s program covers people with incomes up to 500 percent of the FPL. If someone does not meet the Merck PAP criteria under this program and there are special circumstances of financial and medical hardship that apply, a person may request an exception, provided their income does not exceed 500 percent of the FPL. Medicare Part D clients, as well as underinsured who have co-insurance, caps or co-pays they cannot afford, are covered 100% by the PAP if they fall within the FPL% eligibility requirement. Merck currently participates in the HarborPath and Welvista ADAP waiting list programs.

ViiV HEALTHCARE
Drugs covered: Combivir, Epivir, Epzicom, Lexiva, Retrovir, Selzentry, Trizivir, Viracept and Ziagen.
Contact Information: 877-784-4842 or www.ViiVhealthcareforyou.com
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels (FPL). ViiV’s program covers people with incomes up to 500 percent of the FPL. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down. People initially denied coverage through the PAP should apply a second time and ask for a relevant exception. ViiV currently participates in the HarborPath and Welvista ADAP waiting list programs.

Co-Pay Programs for Viral Hepatitis

These programs offer assistance to people with private insurance for the co-payments required to
obtain hepatitis drugs at the pharmacy. Some companies offer co-pay assistance for all of their drugs, including non-hepatitis drugs.

**CO-PAY PROGRAMS FOR HEPATITIS B VIRUS (HBV)**

**BRISTOL-MYERS SQUIBB**

**Drugs covered:** Baraclude

**Contact Information:** 855-898-0267. Ask the operator to speak to someone about the Baraclude Co-pay Discount Benefits Program and ask for a card to be mailed to you.

**Program Details:** The program covers the first $200 per month of co-pays. For people who pay for their prescriptions in full, the program will also cover the first $200 per month. Currently the program runs through December 31, 2014.

**GILEAD SCIENCES**

**Drugs covered:** Viread

**Contact Information:** 877-627-0415

**Program Details:** The program starts after the first $50 and covers up to $200 per month co-payment for Viread for HBV treatment for patients who are uninsured or pay their prescription costs in full. The program renews automatically for enrolled patients.

**GLAXOSMITHKLINE**

**Drugs covered:** Epivir

**Contact Information:** 877-844-8872 or www.mysupportcard.com

**Program Details:** The program covers up to $200 dollars per prescription per month and includes non-HBV drugs.

**CO-PAY PROGRAMS FOR HEPATITIS C VIRUS (HCV)**

**MERCK & CO.**

**Drugs covered:** PegIntron and Victrelis

**PegIntron Contact Information:** 866-939-4372 or www.pegintron.com

**PegIntron Program Details:** People can print out a card at pegintron.com and at merck-cares.com, which offers eligible patients up to $200 savings on their copayment for each Pegintron prescription, on up to 12 prescriptions.

**Victrelis Contact Information:** 866-939-4372 or www.victrelis.com

**Victrelis Program Details:** People can print out a card at www.victrelis.com and at merck-cares.com which offers eligible patients savings of up to 20 percent of the total cost of each Victrelis prescription, on up to 12 prescriptions (which would be a full 44 weeks of treatment for those who need it for that duration).

**VERTEX PHARMACEUTICALS**

**Drugs covered:** Incivek

**Contact Information:** 855-837-8394 or www.incivek.com

**Program Details:** Vertex will cover co-pay costs up to $10,000 for people who have private insurance plans that cover Incivek, regardless of their household income.

**Patient Assistance Programs (PAPs) for Viral Hepatitis**

These programs offer free HBV drugs to people with low-incomes who do not qualify for any other insurance or assistance programs, such as Medicaid or Medicare. Different company programs have different eligibility criteria based on the Federal Poverty Level (FPL). The 2013 FPL income for one individual is $11,490. It is adjusted based on family or household size. 200% FPL is $22,980 and 300% is $34,470 for individuals. All levels are somewhat higher in Alaska and Hawaii. A complete table is available at http://aspe.hhs.gov/poverty/13poverty.cfm. Unless otherwise stated, companies ask for verification of income, usually in the form of a federal income tax return. Companies also generally consider household income, meaning that a married couple that files joint taxes would be judged on their combined income. People who file individual income tax returns would only have their individual income considered. Always apply for an exception if told you are not eligible.
**PAP PROGRAMS FOR HEPATITIS B VIRUS (HBV)**

**BRISTOL-MYERS SQUIBB**

Drugs covered: Baraclude  
Contact Information: 855-898-0267 or visit www.bmspaf.org.  
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and covers people with incomes up to 300 per cent of the FPL. Most programs have limits based on the total household income compared to established FPL percentages. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down.

**GILEAD SCIENCES**

Drugs covered: Hepsera and Viread  
Contact Information: 800-226-2056 or visit www.gilead.com/us_advancing_access  
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established FPL percentages. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down.

**GLAXOSMITHKLINE**

Drugs covered: Epivir  
Contact Information: 866-475-3678 or www.gskforyou.com  
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established FPL percentages. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down.

**PAP PROGRAMS FOR HEPATITIS C VIRUS (HCV) AND OTHER RELATED CONDITIONS**

**JOHNSON & JOHNSON**

Drugs covered: Pegasys and Copegus  
Contact Information: 888-941-3331 or www.pegasysaccesssolutions.com.  
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down.  
*Note: Procrit is not a treatment for HCV, but it is a treatment for anemia, which is a side effect commonly caused by HCV treatment.*

**GENENTECH/ROCHE**

Drugs covered: Pegasys and Copegus  
Contact Information: 800-652-6227 or www.jjpaf.org  
Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down.

**MERCK & CO.**

Drugs covered: Pegintron and Victrelis  
Contact Information: 866-363-6379 or www.merckhelps.com  
Program Details: The ACT Program can help you answer questions related to insurance coverage and reimbursement. Program Specialists can also help you apply for the PAP. The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels. Generally the program will accept appeals for special circumstances if a person does not initially qualify and is turned down, provided they fall within the 500% FPL income eligibility requirement.

**VERTEX PHARMACEUTICALS**
Drugs covered: Incivek

Contact Information: 855-837-8394 or www.incivek.com

Program Details: The PAP is for people who do not qualify for other assistance or health insurance programs and is limited by income. Most programs have limits based on the total household income compared to established federal poverty levels. The Incivek PAP helps people whose household income is less than $100,000 per year. Generally, programs will accept appeals for special circumstances if a person does not initially qualify and is turned down.

For more up-to-date information visit our website at www.fairpricingcoalition.org

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