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CareLink/Medication Assistance Program (MAP) Frequently Used Terms

Subsidized: CareLink provides aid or financial assistance in acquiring a medication. Generally a nominal co-payment is required.

Subsidized per Criteria: CareLink provides aid or financial assistance in acquiring a medication if previously set criteria are met. Generally a nominal co-payment is required.

Not Subsidized: CareLink does NOT provide financial assistance or aid in acquiring a medication. Patients are responsible for 100% of the cost of the drug. For example, non-formulary medications are not subsidized.

Individual MAP applications: Pharmaceutical manufacturers offer programs that provide medications to eligible patients at no cost or a reduced cost. Many companies participate in MAPs, but eligibility criteria and requirements for enrollment vary:

- Criteria are established by the pharmaceutical manufacturer who sponsors the program.
- Income limitations typically have a range that will be program specific but **most** CareLink members will qualify.
- Many will not accept individuals who have medication coverage (insurance, Medicare, etc), however, some will.
- Many manufacturers require verification of patients' financial statuses by certain documents including tax returns, W-2 forms, social security benefits, bank statements, and other asset reports.
- Once verification is received by the manufacturer it is then evaluated and patient eligibility is determined.
- Prescription for the medication is usually required.
Prescribing physician's signature and other involvement by the physician is required.
- Prescriptions must meet P & T and CareLink subsidy criteria for processing.

Institutional Patient Assistance Programs (BULK MAPs): Under this model, manufacturers enter into a contract with hospitals and agree to ship their free drugs monthly or quarterly to replace hospital inventory that the pharmacy dispenses or administers to MAP-eligible patients prior to the manufacturers processing the relevant MAP requests. This overcomes the problem of a lag time between the time a prescription is written and the time a MAP drug eventually arrives. It also reduces the risk of tracking errors and patient non-compliance that often occurs in connection with the individual form method. (UHS has BULK agreements with the following companies: Alcon, AstraZeneca, Bristol-Myers Squibb, Johnson & Johnson, Merck, Ortho Biotech (Inpatient Procrit® only), Pfizer, and Schering-Plough.

Any prescriber who feels a regimen warrants special consideration, please contact:

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Webform requests available at <http://www.universityhealthsystem.com/carelink/formulary-request.shtml>