



# Prescription Assistance Program



## Can't Afford Your Prescription Medication?

Let Us Help.

### Mission Statement

Prescription Assistance Program's mission is to promote healthier living through advocacy, comprehensive resources and managed care by helping individuals of need obtain prescription medication.

If you would like more information or help with the application process, please call toll free 1-800-472-0031 or visit [www.prescriptionassist.org](http://www.prescriptionassist.org).



Valley City Office:  
139 2nd Ave. SE  
Valley City, ND 58072  
(701) 845-4300



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Dakota Medical Foundation

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Helping Individuals Access Affordable Prescriptions Since 2001

[www.prescriptionassist.org](http://www.prescriptionassist.org)

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## What is Prescription Assistance Program?

Prescription Assistance Program is a free service of comprehensive resources for patients needing assistance with prescription medications. Our trained staff of professionals consult with pharmacies and drug manufacturing companies on your behalf.



## Do I Qualify for Patient Assistance?

Patient Assistance Programs are offered directly through the pharmaceutical companies. These drug manufacturers' have requirements that allow individuals to receive medication at a reduced rate or free of charge. To meet the requirements that allow individuals to receive medication at a reduced rate or free of charge. To meet the requirements a patient must be in financial hardship or 250% below the federal poverty guideline with no prescription insurance and must be a citizen or resident of the United States of America. Requirements may vary from company to company.

## Patient Advocacy

Let our trained staff collect and assemble the proper forms and applications to submit on your behalf. We handle all the paper work, the filing and the overall friendly correspondence between the doctor's office and the pharmaceutical companies. Our goal is to guide you through the finish line and get you approved! Upon your approval, the medication will be dispensed with a 90 day supply and shipped to your home or healthcare provider.

## Refills

We're here for refills too! When you need us... After your first 90 day supply of medication you will need to contact our program a month before your last cycle of medication to establish a refill. Don't worry. We locate and fill out the necessary information for refills too!



## What Do I Need to Apply?

You can start the application process immediately online by downloading an application from our website at [www.prescriptionassist.org](http://www.prescriptionassist.org) or you select an office nearest you to have an application mailed to your door. (Office locations provided on backside of brochure).

## What We Need From You

The following information is required to process your application:

1. List of medications from your Healthcare Provider
2. Copy of most recent tax return 1040 form (first two pages only) or 4506-T form if you do not file. Other forms of income include ex. Social Security Benefit Statement, Unemployment Statement.
3. Copy of photo ID, social security card or green card.
4. Copy of health insurance cards.
5. Printout showing current year medication expenses. (Medicare Part D Clients only).

Check our website for downloadable applications, drug coupons and other resources to help patients get access to the medications while you wait for approval.