

#9905  
April 1999

## **State Pharmacy Assistance Programs**

by  
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## **Acknowledgments**

The following individuals provided valuable information about the pharmacy assistance programs in their states: Mike Brennan, New York; Chet Briggs, Vermont; Robert Carroll, Maine; Dennis Costa, Rhode Island; Pat Duka, Delaware; Chris Farrel, Michigan; Elizabeth Geary, Connecticut; Samantha Hailey, Vermont; Roxanne Homar, Wyoming; Sandy Kramer, Michigan; Shelia Martin, Massachusetts; Kathleen Mason, New Jersey; Roderick Nunn, Illinois; Paul Roeger, Maryland; Brian Rossman, Massachusetts; Thomas Snedden, Pennsylvania; and Carl Tepper, New Jersey.

In addition, the following individuals provided useful comments on this report: Dick Cauchi and Wendy Fox-Grage, National Conference of State Legislatures; Mike Brennan, State of New York Elderly Pharmaceutical Insurance; Stephen Soumerai, Harvard Medical School; John Luehrs, AARP's State Legislation Department and Amanda McCloskey, AARP's Office of Legislative Counsel.

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## **INTRODUCTION**

The cost of prescription drugs can create financial burdens for many older Americans, particularly those with low incomes. Almost all Americans age 65 and over are enrolled in Medicare, but Medicare does not pay for outpatient prescription drugs, and many Medicare beneficiaries have little or no supplemental coverage for their prescriptions. While state Medicaid programs provide drug coverage for some persons with low incomes, stringent eligibility standards leave many of them without access to Medicaid benefits. To ease the financial burden of the cost of prescription drugs for the non-Medicaid low-income population, a number of states have implemented pharmacy assistance programs that are designed to help those persons obtain the medications they need but cannot afford.

### **Purpose and Methodology**

This document provides basic information on the structure, enrollment, and administration of state pharmacy assistance programs. The information was obtained from telephone interviews with representatives of state Offices on Aging, state pharmacy assistance programs administrators and pharmacists, Medicaid administrators, and health care services ombudsmen in each of the 50 states and the District of Columbia. For those states with pharmacy assistance programs, we also obtained written information on the program from the state agency responsible for its administration, and summarized information obtained from telephone interviews with program officials. Our information was gathered and verified between July and December, 1998.

### **Principal Findings**

We identified pharmacy assistance programs in 14 states. Together, these programs assisted about 700,000 people in 1997 (the most recent year for which comparable enrollment data are available). Most of the programs are targeted toward persons age 65 and over, although about half of those programs also offer coverage to other selected populations (such as persons with disabilities). In most programs, coverage is fairly comprehensive, but some limit their coverage to a small set of drug products or to individuals with one of several specified medical conditions. Each program requires some cost-sharing by enrollees—typically a copayment of a few dollars per prescription, although in some programs the copayment can be substantially higher. Most programs do not require enrollees to pay a deductible before receiving benefits. Funding sources for state pharmacy assistance programs include general revenues, state lottery proceeds (Pennsylvania), and casino fund revenues (New Jersey).

### **Organization of the report**

The next section provides a detailed description of the key elements in each of the 14 state pharmacy assistance programs, including:

- year program enacted
- minimum eligibility age
- other eligible groups (e.g., persons with disabilities)
- maximum income for eligibility <sup>1</sup>
- covered drugs/restrictions
- deductible
- copayment
- ingredient cost reimbursement to pharmacy
- pharmacy dispensing fees
- administrative agency
- telephone number for further information
- number of people enrolled

Following the description of the 14 state programs, the document briefly describes additional programs that offer sources of free or discounted drugs for persons with low incomes, such as local- or community-based assistance programs; programs administered on a national basis by private entities; and state-based programs that are designed to assist with a wide range of medical services for persons with specified medical conditions (i.e., are not limited to pharmaceutical assistance). Finally, the appendix contains application forms for those state pharmacy assistance programs for which applications could be obtained. <sup>2</sup>

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<sup>1</sup> The maximum eligible income level for each program was applicable for the year indicated. Please contact the appropriate program for the current eligibility requirements.

<sup>2</sup> These forms are provided for informational purposes only. Please contact the appropriate program for current application forms and procedures.

## **GLOSSARY OF TERMS USED IN THIS DOCUMENT**

**Average Wholesale Price**—The published, suggested wholesale price of a drug, based on a sample of prices paid by wholesalers to the pharmaceutical manufacturer.

**DESI drug**—From “Drug Efficacy Study Implementation,” a drug registered before 1962 which has not received a final determination of effectiveness from the Food and Drug Administration.

**Dispensing fee**—An amount paid to the pharmacy for each prescription (in addition to the ingredient cost reimbursement).

**Formulary**—A list of preferred medications. If the formulary is an “open formulary,” then the pharmacist is allowed to dispense medications not on the formulary list without receiving prior approval from the payer.

**Ingredient Cost Reimbursement**—A calculation used to determine the payment to a pharmacy for each prescription dispensed, usually expressed as a reduction from or an addition to the Average Wholesale Price or Wholesale Acquisition Cost.

**Legend drug**—A drug that cannot be purchased without a prescription; non-legend drugs are available over-the-counter.

**Wholesale Acquisition Cost**—The payment made by a pharmacist to purchase a drug from a wholesaler.

## DESCRIPTION OF STATE PHARMACY ASSISTANCE PROGRAMS

# Connecticut

ConnPACE	
Year program enacted	1986
Minimum eligibility age	65
Other eligible groups	Disabled persons under 18 years of age in Social Security Disability Program or Supplemental Security Income Program
Maximum eligible income (1998)	Single: \$14,500 Married: \$17,500
Covered drugs/restrictions	Most prescriptions are covered, along with insulin, insulin syringes, and needles, if produced by manufacturers who enter into a rebate program. Excluded are: antihistamines, contraceptives, cough preparations, diet pills, experimental drugs, “less than effective drugs” as determined by the FDA, multivitamins, cosmetics, and smoking cessation gum.
Deductible	None
Copayment (per prescription)	\$12
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 12%
Dispensing fee to pharmacy	\$4.10 per prescription
Administrative agency	Connecticut Department of Social Services
Information telephone number	(860) 832-9265
Enrollment (1997)	37,676
Other	
◆ Annual enrollment fee	\$25

An application form is available in the [appendix](#). Some drugs may not be covered if the manufacturer does not participate in the rebate program.

# Delaware

The Nemours Foundation	
Year program enacted	1981
Minimum eligibility age	65
Other eligible groups	None
Maximum eligible income (1998)	Single: \$12,500 Married: \$17,125
Covered drugs/restrictions	Open formulary. Does not cover injectible drugs or non-prescription drugs.
Deductible	None
Copayment (per prescription)	20% of retail prescription cost
Ingredient cost reimbursement to pharmacy	None*
Dispensing fee to pharmacy	None*
Administrative agency	The Nemours Foundation (private)
Information telephone number	(302) 651-4405
Enrollment (1997)	9,600
Other	
◆ Additional services	Dental care, eye examinations, eyeglasses, hearing tests, and hearing aids

An application form is not included in this report.

\*Because the Nemours Foundation administers its own pharmacies, there are no ingredient cost reimbursement or pharmacy dispensing fees.

# Illinois

Circuit Breaker Pharmaceutical Assistance Program	
Year program enacted	1985
Minimum eligibility age	65 16, if disabled
Other eligible groups	Widow or widower who turned 63 before deceased claimant's death
Maximum eligible income (1998)	Single: \$7,890 Married: \$10,610; OR Household: \$14,000
Covered drugs/restrictions	Coverage limited to: (1) drugs for the treatment of heart disease, diabetes, and arthritis; and (2) insulin, syringes, and needles.
Deductible	\$15 monthly if single or married, or \$25 monthly per household
Copayment (per prescription)	After enrollee receives \$800 in annual benefits, he/she is responsible for 20% of retail drug cost
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 10%
Dispensing fee to pharmacy	\$3.60 per prescription
Administrative agency	Illinois Department of Revenue
Information telephone number	1(800) 624-2459 (In Illinois)
Enrollment (1997)	Not Available
Other	
◆ Two annual enrollment fees	Single or married, \$40 Household, \$80

An application form is available in the [appendix](#).

# Maine

Elderly Low-Cost Drug Program	
Year program enacted	1975
Minimum eligibility age	62 55, if disabled
Other eligible groups	If more than 40% of annual household income is spent on medications, then a single person with income up to \$13,250 (1997) or a family with income up to \$16,375 (1997) may be eligible
Maximum eligible income (1997)	Single: \$10,600 Family: \$13,100
Covered drugs/restrictions	Covers both prescription and non-prescription drugs produced by manufacturers who enter into rebate agreement
Deductible	None
Copayment (per prescription)	\$2 or 20% of the medication's price (the price as allowed by the Department of Human Services), whichever is greater
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 10%
Dispensing fee to pharmacy	\$3.35 per prescription
Administrative agency	Department of Human Services
Information telephone number	(207) 287-2674
Enrollment (1997)	16,179

An application form is not included in this report.

# Maryland

Pharmacy Assistance	
Year program enacted	1979
Minimum eligibility age	No limit
Other eligible groups	None
Maximum eligible income (1997)	Single: \$9,250 and assets of no more than \$3,750 Household of two or more: \$10,050 and assets of no more than \$4,500
Covered drugs/restrictions	Chronic maintenance drugs, anti-infective drugs, insulin
Deductible	None
Copayment (per prescription)	\$5
Ingredient cost reimbursement to pharmacy	Wholesale Acquisition Cost, plus 10% or Average Wholesale Price, minus 10%, whichever is lower
Dispensing fee to pharmacy	\$4.21 per prescription
Administrative agency	Department of Health and Mental Hygiene
Information telephone number	(410) 767-5394
Enrollment (1997)	11,237 (ages 65 and over) 10,176 (ages 45 to 64)

An application form is not included in this report.

# Massachusetts

The Senior Pharmacy Program	
Year program enacted	1996
Minimum eligibility age	65
Other eligible groups	None
Maximum eligible income (1997)	\$12,084 per individual
Covered drugs/restrictions	All drugs covered by the state Medicaid program; also insulin and syringes
Deductible	None
Copayment (per prescription)	\$3 for generic version \$10 for brand name drugs and certain medical supplies
Ingredient cost reimbursement to pharmacy	Medicaid reimbursement rate
Dispensing fee to pharmacy	None
Administrative agency	Executive Office of Elder Affairs
Information telephone number	1(800) 953-3305 (In Massachusetts)
Enrollment (1997)	20,000
Other	
◆ Annual enrollment fee	\$15
◆ Limited benefit	Maximum annual benefit of \$750

An application form is available in the [appendix](#).

# Michigan

State Medical Program	
Minimum eligibility age	No limit
Other eligible groups	None
Maximum eligible income (1997)	Individual: \$246/mo. Household (2 persons or more): \$401/mo. Assets of no more than \$3,000
Covered drugs/restrictions	All drugs covered by state Medicaid program
Deductible	None
Copayment (per prescription)	None
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 13.5%, if 1-4 stores participating, or Average Wholesale Price, minus 15.1%, if 5 or more stores participating
Dispensing fee to pharmacy	\$3.72 per prescription
Administrative agency	Department of Community Health
Information telephone number	(517) 335-5136
Enrollment (1997)	20,000

An application form is not included in this report. See the next page for information on Michigan's Emergency Pharmaceutical Program for Seniors.

## Michigan, continued

Michigan Emergency Pharmaceutical Program for Seniors	
Year program enacted	1994
Minimum eligibility age	65
Other eligible groups	N/A
Maximum eligible income (1998)	Individual: \$986/mo. Married: \$1,326/mo.
Covered drugs/restrictions	All drugs listed on the Medicaid Maximum Cost List (which may require generic substitution for some drugs) are covered. Not restricted to the Medicaid formulary.
Deductible	None
Copayment (per prescription)	\$0.25
Ingredient cost reimbursement to pharmacy	Based upon the Michigan Medicaid Maximum Allowable Cost list. For drugs not on that list: the lesser of Average Wholesale Price, minus 12% or Usual and Customary charge
Dispensing fee to pharmacy	\$3.65 per prescription
Administrative agency	Office of Services to the Aging
Information telephone number	(517) 373-8230
Enrollment (1997)	10,934
Other	
◆ Additional eligibility requirement	Drug costs must represent 10% or more of a single/widowed person's income or 8% of a married person's monthly income

An application form is not included in this report.

# Minnesota

Senior Pharmacy Program	
Year program enacted	1999
Minimum eligibility age	65
Other eligible groups	None
1999 maximum eligible income	Single: \$9,660 and assets of no more than \$4,000 Couple/family: \$13,020 and assets of no more than \$6,000
Covered drugs/restrictions	Medicaid formulary as well as antacids, insulin products and vitamins.
Deductible	\$25 per month
Copayment	\$3
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 9%, or Usual and Customary cost, whichever is lower.
Dispensing fee to pharmacy	None
Administrative agency	Department of Human Services
Information telephone number	(651) 296-6627
Enrollment (1999)	4,500 (projected)
Other	
◆ Annual enrollment fee	\$120

An application form is not included in this report.

# New Jersey

Pharmaceutical Assistance for the Aged and Disabled (PAAD)	
Year program enacted	1975
Minimum eligibility age	65 21 if disabled
Other eligible groups	None
Maximum eligible income (1999) level	Single: \$18,151 Couple: \$22,256
Covered drugs/restrictions	All prescription drugs
Deductible	None
Copayment (per prescription)	\$5
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 10%
Dispensing fee to pharmacy	\$3.73 plus \$0.15 for pharmacies with a combined Medicaid and PAAD prescription volume equal to or greater than 50 percent of the provider's total prescription volume, plus \$0.11 for 24-hr emergency service, and/or plus \$0.08 if pharmacist provides consultation
Administrative agency	Department of Health and Senior Services
Information telephone number	1 (800) 332-3742 (In New York)
Enrollment (1997)	183,600 older adults; 22,300 individuals with disabilities
Other	This program derives some funding from the state's Casino Revenue fund.

An application form is included in the [appendix](#)

# New York

Elderly Pharmaceutical Insurance Coverage (EPIC) Fee Plan													
Year program enacted	1987												
Minimum eligibility age	65												
Other eligible groups	None												
Maximum eligible income (1997) level	Single: \$18,500 Married: \$24,400												
Covered drugs/restrictions	Most prescription drugs are covered as well as insulin and insulin supplies. A drug will not be covered if its manufacturer does not participate in EPIC's Manufacturers' Rebate program. No DESI drugs.												
Deductible	None												
Copayment (per prescription)	<table border="1"> <thead> <tr> <th><u>Cost of Prescription</u></th> <th><u>Copayment</u></th> </tr> </thead> <tbody> <tr> <td>up to \$8.00</td> <td>\$3.00</td> </tr> <tr> <td>\$8.01-13.00</td> <td>\$5.00</td> </tr> <tr> <td>\$13.01-23.00</td> <td>\$7.00</td> </tr> <tr> <td>\$23.01-33.00</td> <td>\$10.00</td> </tr> <tr> <td>\$33.01 and over</td> <td>\$23.00</td> </tr> </tbody> </table>	<u>Cost of Prescription</u>	<u>Copayment</u>	up to \$8.00	\$3.00	\$8.01-13.00	\$5.00	\$13.01-23.00	\$7.00	\$23.01-33.00	\$10.00	\$33.01 and over	\$23.00
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\$33.01 and over	\$23.00												
Ingredient cost reimbursement to pharmacy	Average Wholesale Price or Usual and Customary price, whichever is lower. Average Wholesale Price, minus 5%, for high-volume pharmacies.												
Dispensing fee to pharmacy	\$3 per prescription if the pharmacy provides delivery service and 24-hour emergency service; otherwise \$2.75												
Administrative agency	New York State Department of Health												
Information telephone number	1 (800) 332-3742 (In New York)												
Enrollment (1998)	99,500 (total for EPIC Fee and EPIC Deductible plans)												
Other													
◆ Annual fee	\$8-\$280, sliding scale based on income and marital status												
◆ Limit on annual copayments	\$300-\$1,088; sliding scale based on income and marital status												

See the next page for information on New York's EPIC Deductible Plan.  
An application form is available in the [appendix](#).

## New York, continued

EPIC Deductible Plan													
Year program enacted	1987												
Minimum eligibility age	65												
Other eligible groups	None												
Maximum eligible income (1997)	Single: \$18,500 Married: \$24,400												
Covered drugs/restrictions	Most prescription drugs are covered, as well as insulin, insulin syringes, and insulin needles. A medication will not be covered if its manufacturer does not participate in EPIC's Manufacturers' Rebate program. No DESI drugs are covered.												
Deductible	\$468 to \$638 (1997), depending upon income and marital status												
Copayment (per prescription, after deductible is met)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Cost of Prescription</u></th> <th style="text-align: left;"><u>Copayment</u></th> </tr> </thead> <tbody> <tr> <td>up to \$8.00</td> <td>\$3.00</td> </tr> <tr> <td>\$8.01-13.00</td> <td>\$5.00</td> </tr> <tr> <td>\$13.01-23.00</td> <td>\$7.00</td> </tr> <tr> <td>\$23.01-33.00</td> <td>\$10.00</td> </tr> <tr> <td>\$33.01 and over</td> <td>\$23.00</td> </tr> </tbody> </table>	<u>Cost of Prescription</u>	<u>Copayment</u>	up to \$8.00	\$3.00	\$8.01-13.00	\$5.00	\$13.01-23.00	\$7.00	\$23.01-33.00	\$10.00	\$33.01 and over	\$23.00
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\$33.01 and over	\$23.00												
Ingredient cost reimbursement to pharmacy	Average Wholesale Price or Usual and Customary payment, whichever is lower, Average Wholesale Price, minus 5% for high-volume dispensaries												
Dispensing fee to pharmacy	\$3 per prescription if the pharmacy provides delivery service and 24-hour emergency service; otherwise \$2.75												
Administrative agency	New York State Department of Health												
Information telephone number	1 (800) 332-3742 (In New York)												
Enrollment (1998)	99,500 (in Fee and Deductible plans)												
Other													
◆ Limit on annual copayments	\$633-\$863, sliding scale based on income and marital status												
◆ Minimum income	\$10,801 for single; \$14,401 for married												

An application form is available in the [appendix](#).

# Pennsylvania

Pharmaceutical Assistance for the Elderly (PACE)	
Year program enacted	1984
Minimum eligibility age	65
Other eligible groups	None
Maximum eligible income (1997)	Single: \$14,000 Married: \$17,200
Covered drugs/restrictions	Most prescriptions are covered, as well as insulin, syringes, and needles. Does not cover experimental drugs, medications for baldness or wrinkles, or non-prescription drugs. Some DESI drugs may be covered with proof of medical necessity.
Deductible	None
Copayment (per prescription)	\$6
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 10%, or Usual and Customary cost, whichever is lower
Dispensing fee to pharmacy	\$3.50 per prescription
Administrative agency	Pennsylvania Department of Aging
Information telephone number	(717) 652-9028
Enrollment (as of March, 1998)	260,000

An application form is available in the [appendix](#). See the next page for information on Pennsylvania's PACENET program.

## Pennsylvania, continued

PACE Needs Enhancement Tier (PACENET)	
Year program enacted	1996
Minimum eligibility age	65
Other eligible groups	None
Maximum eligible income (1997)	Single: \$16,000 Married: \$19,200
Covered drugs/restrictions	Most prescriptions are covered, as well as insulin, syringes, and needles. Does not cover experimental drugs, medications for baldness or wrinkles, or non-prescription drugs. Some DESI drugs may be covered with proof of medical necessity.
Deductible	\$500 annually
Copayment (per prescription)	\$8; \$15 for brand name medications
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 10%, or Usual and Customary cost, whichever is lower
Dispensing fee to pharmacy	\$3.50 per prescription
Administrative agency	Pennsylvania Department of Aging
Information telephone number	(717) 652-9028
Enrollment (1997)	12,889

An application form is available in the [appendix](#).

# Rhode Island

Rhode Island Pharmaceutical Assistance for the Elderly (RIPAE)	
Year program enacted	1985
Minimum eligibility age	65
Other eligible groups	None
Maximum eligible income (1997)	Single: \$15,358 Couple: \$19,199 Excludes income spent on medication if greater than 3% of total income
Covered drugs/restrictions	Medication for high blood pressure, heart disease, high cholesterol, circulatory insufficiency, asthma or chronic respiratory disease, diabetes, cancer, Parkinson's disease, glaucoma, Alzheimer's disease
Deductible	None
Copayment (per prescription)	40% of retail prescription cost
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 13%
Dispensing fee to pharmacy	\$2.50 per prescription
Administrative agency	Department of Elderly Affairs
Information telephone number	(401) 222-2858
Enrollment (1997)	27,000

An application form is not included in this report. Applicants must apply in person.

# Vermont

Vermont Health Access Program (VHAP) Pharmacy	
Year program enacted	1996
Minimum eligibility age	65
Other eligible groups	Recipients of disability benefits through Social Security or Medicare
Maximum eligible income (1997)	Single: \$11,844 Couple: \$15,924
Covered drugs/restrictions	No experimental or non-prescription drugs.
Deductible	None
Copayment (per prescription)	\$1 for prescriptions that cost \$1 to \$29 \$2 for prescriptions that cost \$30 and over
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 10%, or Usual and Customary cost
Dispensing fee to pharmacy	\$4.25 per prescription
Administrative agency	Office of Vermont Health Access
Information telephone number	1(800) 529-4060 (In Vermont)
Enrollment (1997)	7,149
Other	
◆ Ombudsman	Coordinates VHAP and Medicaid managed care

An application form is available in the [appendix](#). See also the description of the Vscript program on the next page.

A VHAP managed care option is also available. In VHAP managed care, enrollees pay 50% copayment (per prescription) until their total annual prescription drug costs reach \$750, after which VHAP pays all costs.

## Vermont, continued

Vscript	
Year program enacted	1989
Minimum eligibility age	65
Other eligible groups	Recipients of disability benefits through Social Security (all ages)
Maximum eligible income (1997)	Single: \$13,812 Couple: \$18,576
Covered drugs/restrictions	Covers maintenance drugs only, such as antihypertensives
Deductible	None
Copayment (per prescription)	50% of prescription cost
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 10%, or Usual and Customary cost
Dispensing fee to pharmacy	\$4.25 per prescription
Administrative agency	Office of Vermont Health Access
Information telephone number	1(800) 529-4060 (In Vermont)
Enrollment (1997)	2,250

An application form is available in the [appendix](#).

# Wyoming

Minimum Medical Program	
Year program enacted	1988
Minimum eligibility age	No limits
Other eligible groups	None
Maximum eligible income (1997)	1 person in household: \$ 7,890 2 or more persons in household: \$ 10,610
Covered drugs/restrictions	All drugs covered by the state Medicaid program
Deductible	None
Copayment (per prescription)	\$25 per prescription
Ingredient cost reimbursement to pharmacy	Average Wholesale Price, minus 4%
Dispensing fee to pharmacy	\$4.70
Administrative agency	Health Care Financing
Information telephone number	(307) 777-7986
Enrollment (1997)	970
Other	
◆ Number of prescriptions limited	Covers up to three prescriptions per month, plus oxygen

An application form is not included in this report.

## **OTHER SOURCES OF DISCOUNTED OR FREE PHARMACEUTICALS**

### **Disease/population-specific programs**

Most states have programs to provide educational, clinical, and financial assistance to needy individuals who have particular diseases or conditions. For example, people with AIDS living in any state may be eligible for benefits under their state's AIDS drug assistance program (ADAP) that can assist those who are seriously ill, impoverished, or disabled, with the costs of some pharmaceuticals for the management of HIV/AIDS.<sup>1</sup> Other programs directed toward those at risk for heart attack, stroke, cancer or other diseases may include a pharmaceutical component. Some states target programs to specific populations, such as pregnant women and children. Although disease/population-specific programs have a broader mission than pharmacy assistance, they may be an important source of medications for some needy individuals.

### **Community/local programs**

Public community providers or local governments may have programs with small budgets and can only assist those within a given county or community. Some programs are operated privately by religious organizations. An important service that these programs can offer, in addition to providing prescription drugs, is education regarding prescription use and the implications of choosing not to finish a course of medication, taking lower doses, or using medicine past its expiration date.

### **Drug manufacturer assistance programs**

Some pharmaceutical manufacturers offer discounts or free medication to needy individuals. Several states help these individuals by identifying companies that produce the medication required and by assisting with the complicated paperwork and physician approvals required to use these programs. Other states refer requests for assistance to one of several organizations<sup>2</sup> that, often for a small fee, help individuals utilize the programs.

The National Information and Referral Support Center has identified the following barriers to access to industry drug assistance programs<sup>3</sup>:

- Most programs require the involvement of a physician to certify need but not all physicians are aware of the programs.
- Some individuals have been discouraged from pursuing these programs because of the programs' limited benefits. For example, many programs offer only one month's worth of medication.
- Some physicians refuse to participate in the programs.

Other difficulties may include:

- The need for multiple applications. A single individual seeking four or five medications may need to apply to four or five different manufacturers' programs, each with differing eligibility requirements and administration.
- Even if an individual needs only one prescription, he or she may have to apply separately each time the prescription is written.

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<sup>1</sup> For a complete listing of HIV/AIDS assistance programs, refer to: Health Policy Tracking Service, *Issue Brief: AIDS Drug Assistance Programs*. ([www.hpts.org](http://www.hpts.org))

<sup>2</sup> In the survey conducted by AARP's Public Policy Institute, state Offices on Aging provided referrals to private organizations such as: the Medication Advocate Program, The Medicine Program, the Pharmaceutical Research and Manufacturers of America (PhRMA), CLAIM, and Rx Access.

<sup>3</sup> National Information and Referral Service, Information & Referral Reporter, November 1992.

The Appendix is not available in this form. For copies of application forms for those state pharmacy assistance programs for which applications could be obtained, please write to:

**David Gross or Sharon Bee  
AARP Public Policy Institute  
AARP  
601 E Street, NW  
Washington, DC 20049**