Unlocking the Medicine Chest:
A Description of Current Rx Programs

This white paper is a publication of the Access to Benefits Coalition—Ohio Chapter and describes current and proposed federal and state programs that provide increased access to affordable prescription drugs for Ohioans.

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The Prescription Drugs (Rx) Work Group, now known as the Access to Benefits Coalition (ABC) – Ohio Chapter, was convened on April 1, 2003 by the Ohio United Way. The ABC Coalition is comprised of representatives of foundations, pharmaceutical companies, and health and advocacy organizations who work to educate the public and policymakers on ways to increase access to affordable prescription drugs. The Coalition also works to educate older adults, persons with disabilities, and persons with low-income in Ohio to help them make informed choices about prescription drug savings programs; and facilitate their actual enrollment in new and existing prescription savings programs. Organizations whose representatives have participated in the coalition include:

- AARP *
- Abbott Labs
- Access Health Columbus
- Catholic Conference of Ohio
- Center for Family and Children
- Columbus Medical Association Foundation
- The Corporation for Ohio Appalachian Development
- Foundation for Healthy Communities
- GlaxoSmithKline
- George Gund Foundation
- Health Foundation of Greater Cincinnati
- Health Policy Institute of Ohio
- Legal Aid of Cincinnati
- League of Women Voters of Ohio
- MedShare
- Ohio Association of Area Agencies on Aging *
- Ohio Association of Free Clinics
- Ohio Association of Second Harvest Foodbanks
- Ohio Council of Churches
- Ohio Hospital Association *
- Ohio Osteopathic Association *
- Ohio United Way
- Osteopathic Heritage Foundations
- Pfizer, Inc.
- Salvation Army *
- SC Ministry Foundation
- Sisters of Charity Foundation of Canton
- UHCAN Ohio
- United Way Of Central Ohio
- Wyeth

*local affiliate of national ABC member

This white paper will be updated regularly and can be found online at the Ohio United Way Web site, www.ouw.org and at the Ohio Association of Free Clinics’ Web site, www.ohiofreeclinics.org. If you have questions or would like more information, please contact:

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**Table of Contents**

- Why is Access Important?  
- Federal Programs  
  - Medicare Prescription Drug Coverage  
- Federal/State Programs  
  - Healthy Start/Healthy Families (Medicaid)  
  - Other Populations Served by Medicaid  
- State Programs  
  - Ohio’s Best Rx  
  - Golden Buckeye Card with Drug Savings  
  - Medicare-approved Golden Buckeye Drug Discount Card Transitional Assistance Wrap-around Programs  
  - Disability Medical Assistance (DMA)  
  - Prescription Drug Repository Program  
- Local Programs  
- Corporate Programs  
  - Patient Assistance Programs (PAPs)  
- Which program is best for you?
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Why is Access to Affordable Prescription Drugs  
an Important Public Policy Issue?

The Access to Benefits Coalition—Ohio Chapter developed this white paper for two reasons:

1) Prescription medications are out of reach for many Ohioans.

There are an estimated 2.1 million Ohioans living without prescription drug coverage. This number includes 1.3 million uninsured non-elderly Ohioans (1998 Ohio Department of Health data) and 500,000 non-elderly Ohioans with insurance that does not cover prescriptions.

People without prescription drug coverage pay retail market prices for their prescriptions. Prices vary by drug store (even within each chain) and many times different prices are paid in different parts of town. People without insurance are the only ones not paying negotiated prices for prescriptions at the pharmacy.

In a May 19, 2004 draft, the Centers for Medicaid and Medicare Services (CMS) estimated that 400,000 Ohio Medicare beneficiaries did not have prescription drug coverage. Since its inception in 1965, the Medicare program has provided basic health care benefits to all Americans over the age of 65 as well as to many people with disabilities. However, these basic benefits have not included coverage for prescription drugs.

2) Several new programs and policies that impact prescription drug access have been implemented recently.

In response to the problem described above, policy makers, advocates, pharmaceutical companies, businesses, and non-profits have created a number of programs to increase access to prescription medications. Still, navigating and understanding all of these programs can be a challenging task. This white paper describes these new programs and policies as succinctly as possible so people who help others with prescription drug access issues can speak with confidence and authority. You will also find a flow chart and a matrix describing these programs at the end of this document.
FEDERAL PROGRAMS

Medicare Prescription Drug Coverage

Program:
The new Medicare Prescription Drug benefit was signed into law in November 2003. This program is voluntary for any Medicare beneficiary who wishes to participate. The new benefit will be available starting in 2006. During the transition, Medicare-endorsed discount cards are available to Medicare beneficiaries and those below a certain income level are eligible for up to $1200 in prescription drug credits.

Eligibility and Other Details:
All Medicare recipients, regardless of income level, are eligible for the interim discount card and the prescription drug benefit.

Medicare-Approved Discount Cards and Transitional Assistance Program:
- Between June 2004 and the start of the new Medicare benefit, Medicare enrollees may purchase a Medicare-approved discount card. The annual fee for the card is up to $30. As of November 2004, there were 49 Medicare-approved discount cards in Ohio.
- A beneficiary cannot change Medicare-approved drug discount cards once a card is chosen, except during November 15, 2004 to December 31, 2004 and under certain special circumstances. In 2005, beneficiaries will not be permitted to change cards although if a beneficiary has not chosen a card he/she may still do so.
- Discounts range from 10 to 25 percent (similar to existing discount cards).
- There are many cards to choose from and each Medicare consumer is allowed to purchase/choose only one Medicare-endorsed card, although consumers can use them in combination with other discount cards that are not Medicare-approved.
- Low income beneficiaries (people whose incomes are below 135 percent of the Federal Poverty Level) who do not have prescription coverage through public or private insurance are eligible to receive a card without paying the annual fee. In addition, they receive a $1,200 credit toward purchasing prescription drugs. If a beneficiary applies before December 31, 2004, the $600 credit for 2004 will be carried over to 2005 and another $600 credit will be available for 2005.
- There is no asset test to qualify for the subsidy and applicants may self declare income.
- People on Medicaid or federal or private insurance that includes a prescription card are not eligible for the subsidy.
- In September 2004 Centers for Medicaid and Medicare Services (CMS) decided to send discount cards automatically to Medicaid beneficiaries known to have lower incomes. These individuals still need to call to activate the prescription drug credit.
Medicare Benefit:

- The new benefit, known as Medicare Part D, will start in January 2006 and will be a voluntary program.
- In order to participate in the benefit, a recipient will have to either join an HMO or enroll in a prescription drug plan.
- Each recipient will pay a premium of up to $35 per month ($420 per year) as well as a $250 annual deductible. The annual premium is projected to increase yearly to $696 in 2013 and the annual deductible is projected to rise to $445 in 2013.
- The plan pays 75 percent of all drug costs up to $2,250. The Medicare recipient pays all prescription costs from $2,250 to $5,100. After expenses reach $5,100, the recipient is eligible for "catastrophic" coverage and will only pay $2 (for generic) or $5 (for brand-name) co-pays for the remainder of the year.¹ The coverage gap—$2,850 in 2006—is projected to rise to $5,066 in 2013.
- Low-income beneficiaries (those below 135 percent of the federal poverty level with assets no more than $6,000 for an individual or $9,000 for a couple) will not pay premiums, co-payments, or gaps in coverage. They will be able to get prescription medications for co-pays of between $1 and $5, based on the individual’s income and whether the drug is generic or brand name.

Projected Costs:
The program has a budget limit of $534 billion over 10 years.

Status:
The temporary Medicare-endorsed cards are available now. The new Medicare prescription drug benefit program is slated to begin in 2006.

For More Information:
The Ohio Department of Insurance (ODI) Web site contains information about the Medicare prescription drug benefit at http://www.ohioinsurance.gov/prescriptiondrugs/index.asp. The Ohio Senior Health Insurance Information Program (OSHIIP), a program of ODI, assists people in determining the best discount card for them and can be reached at 1-800-686-1578.

Consumers may compare discounts by going to http://www.benefitscheckuprx.org/ or by calling the Medicare toll-free number (1-800-MEDICAR or 1-800-633-4227).

FEDERAL/STATE PROGRAMS

Healthy Start and Healthy Families (Medicaid)

Program:
While not a new program, some people are able to gain access to prescription medications through Healthy Start and Healthy Families. These are Medicaid programs that offer families, children (up to age 19) and pregnant women access to free and low-cost health coverage. Healthy Start and Healthy Families cover all necessary prescription medications, regular doctor visits, and dental and vision care.

Eligibility and Other Details:
Although eligibility is based on meeting certain income guidelines, over 85 percent of families enrolled are working. Children in families with incomes up to 200 percent of the federal poverty level are eligible for Healthy Start. Pregnant women with incomes up to 150 percent of the federal poverty level are also eligible. Families with children and incomes up to 100 percent of the federal poverty level are eligible for Healthy Families. To apply, families fill out a short application, attach copies of proof of income for the past 30 days, and mail the application and income verification to their local County Department of Job and Family Services. No face-to-face interview is required.

Costs:
Costs for Healthy Start and Healthy Families are shared between the federal and the state governments.

Status:
These programs are available currently.

For More Information:
Families and pregnant women can get an application or general information including income guidelines by calling the Consumer Hotline at 1-800-324-8680 or visiting the Web site at: http://jfs.ohio.gov/ohp/consumers/familychild.stm.

Other Populations Served by Medicaid:

Note: Adults 65 and older may be eligible for Medicaid. Individuals of any age with disabilities, including individuals who are legally blind, may also qualify for Medicaid. These populations may need to “spend down” their income to Medicaid income levels (64% FPL).

Once the consumer reaches his/her designated “spenddown” limit each month, he or she then becomes qualified for Medicaid. Also, women who have been diagnosed with breast or cervical cancer and meet other eligibility requirements are eligible for Medicaid, but only until cancer treatment is completed (Office of Ohio Health Plans Fact Sheet on Medicaid Programs).
Ohio’s Best Rx

Program:
Ohio’s Best Rx resulted from negotiations between the Coalition for Affordable Prescription Drugs (with members such as the Ohio United Way, the Ohio Council of Churches, and the Ohio AFL-CIO) and the Pharmaceutical Research and Manufacturers of America (PhRMA). The Ohio General Assembly, on a bipartisan and nearly unanimous basis, approved Amended Substitute House Bill 311, which was drafted to implement the Ohio’s Best Rx program, on December 10, 2003. On January 6, 2004, Governor Bob Taft signed the bill. An estimated 1.4 million Ohioans will be eligible to receive a Best Rx card, which is expected to provide a 20 to 40 percent discount on prescription medications.

Eligibility and Other Details:

- Through Ohio’s Best Rx, all uninsured, low-income individuals (up to 250 percent of the federal poverty line), as well as all Ohioans aged 60 and older, who apply and are found eligible, will receive a Best Rx card and access to discounted prescription drugs.
- Those under age 60 will be asked to self declare their income; extensive documentation will not be required.
- There is no application or enrollment fee.
- Participants must not be eligible for prescription drug coverage through an employer, Medicaid, or other state or federal health plan or pharmacy assistance program. Participants may have another discount card but may only use one card per prescription.
- Consumers under age 60 who lose coverage from an employer or other source must wait four months before becoming eligible for Ohio’s Best Rx.
- The program is funded by retaining a small portion (less than 5 percent) of rebates offered by pharmaceutical companies and by a nominal (up to one dollar) fee paid by participants for each prescription. At least 95 percent of any rebate amount goes toward lowering the cost of the drug to the participant; participating pharmacies are reimbursed for that amount.
- Any willing pharmacy may participate and an optional mail order service is available.

Status:
Ohio’s Best Rx is expected to be implemented in December 2004. The Ohio Department of Job and Family Services (ODJFS) will administer the program.

For More Information:
Contact Cynthia Burnell (Best Rx Program Director, Ohio Department of Job and Family Services) at (614) 466-9783 or log onto http://www.ohiobestrx.org/ for more information.
Golden Buckeye Card with Prescription Drug Savings

Program:
In September 2003, Governor Taft announced the implementation of the Golden Buckeye Card with Prescription Drug Savings. Over 2 million Ohioans are eligible for the new discount program. This program allows all Ohio seniors (60 or over) and people with disabilities to receive an average of 24.7 percent savings on their medications at 2,306 Ohio pharmacies (only 3 Ohio pharmacies do not participate). The cardholder always pays the lower of the program’s negotiated price or the pharmacy’s price. The Golden Buckeye Card with Prescription Drug Savings provides prices lower than pharmacy price 79 percent of the time. The cash savings for cardholders were $15 million in the first year. The Golden Buckeye Card with Prescription Drug Savings provides a Drug Utilization Review that checks new prescriptions for potentially harmful interactions with existing drugs taken.

Eligibility and Other Details:
❖ All Ohioans 60 years of age or older, and those 18 and older with a Medicare-qualified disability are eligible. People turning 60 automatically receive a card if they have a driver license or state ID. Others eligible for a card may apply at most public libraries and senior centers.

❖ The plan also provides increased savings for seniors below 300 percent of the federal poverty line through Special Assistance Programs. These programs require separate enrollment with eligibility limited to Medicare qualified individuals who have no prescription insurance coverage and have annual incomes below $30,000 (single) or $40,000 (couple). Four manufacturers (Merck, Novartis, GlaxoSmithKline, and Bristol-Myers Squibb) have agreed to use a single enrollment form for their programs. Discounts vary based on income with some drugs available for $12 per monthly supply.

❖ The Golden Buckeye Prescription Drug Savings Program, administered by MemberHealth (a pharmacy benefits manager) on behalf of the Ohio Department of Aging, negotiates prices with pharmacies. Portions of negotiated manufacturer rebates and pharmacy dispensing fees provide for costs of administering the program.

❖ Mail order home-delivery service is also available.

Projected Costs:
The state pays nothing for the prescription program. All administrative and operating costs, including issuing of cards, are paid by MemberHealth. Portions of negotiated rebates and pharmacy dispensing fees provide for costs of administering the program.

Status:
The drug program became active in October 2003 and will also continue after Medicare Part D becomes available in 2006.

For More Information:
Call 1-866-301-6446 or log onto www.goldenbuckeye.com.
Medicare-approved Golden Buckeye Drug Discount Card
Transitional Assistance Wrap-Around Programs

Program:
Persons receiving Transitional Assistance from any Medicare-approved drug discount card may exhaust their prescription drug credit, leaving them still unable to afford their medications.

To assist these people, the Ohio Department of Aging offers a Medicare-approved Golden Buckeye Drug Discount Card that is unique to most Medicare-approved cards in that it includes nine (9) drug manufacturer wrap-around programs. This card is free and provides additional help once the prescription drug credit is exhausted.

<table>
<thead>
<tr>
<th>Abbott</th>
<th>$5/$12 per 30 day supply</th>
<th>Novartis</th>
<th>Free*</th>
</tr>
</thead>
<tbody>
<tr>
<td>AstraZeneca</td>
<td>Free*</td>
<td>Pfizer</td>
<td>$15 per 30 day supply</td>
</tr>
<tr>
<td>Eli Lilly</td>
<td>$12 per 30 day supply</td>
<td>Sython</td>
<td>$12 per 30 day supply</td>
</tr>
<tr>
<td>Johnson &amp; Johnson</td>
<td>Free*</td>
<td>Wyeth</td>
<td>Greater savings for TA eligible individuals</td>
</tr>
<tr>
<td>Merck</td>
<td>Free*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Customer pays $3-6 pharmacy fee

Projected Costs:
There is no charge for persons eligible for the Transitional Assistance Program for a Medicare-approved Golden Buckeye Drug Discount Card.

Status:
The Golden Buckeye Card Transition Assistance wrap-around program will continue through December 31, 2005. Efforts are being made to convince participating drug manufacturers to continue offering their programs as part of the Golden Buckeye Card with Prescription Drug Savings Program in 2006 after Medicare Part D becomes effective.

For More Information:
Call 1-866-301-6446 or log onto www.goldenbuckeye.com.

(Information verified by Gary Panek, Golden Buckeye Program Manager)
Disability Medical Assistance (DMA)

Problem Statement:
Thousands of Ohioans have significant physical challenges, but are not eligible or have not yet applied for Supplemental Security Income (SSI) and therefore do not receive Medicaid.

Program:
The Disability Assistance program was created to assist people with physical challenges who do not qualify or have not yet applied for SSI. In the biennial budget bill for state fiscal years 2004-2005, the program was divided into two categories: Disability Financial Assistance (DA Cash) and Disability Medical Assistance (DMA).

Eligibility and Other Details:
Because of the rising costs associated with the program, the Ohio Department of Job and Family Services decided to restrict new eligibility for DMA to people who are medication dependent.

Projected Costs:
Expenditures for DMA are capped at $100 million for each year of the biennium.

Status:
Enrollment for DMA was “frozen” as of July 1, 2003 so that costs could be contained within the cap. At the time there were over 29,000 people receiving this benefit. From July 2003-July 2004 the number of people in the program was reduced to about 12,000. Enrollment was re-opened from July to mid-September 2004 and the number of DMA recipients increased to about 17,000. It is uncertain when or if enrollment will be re-opened again.

For More Information:
A person with a medication dependent disability should contact their respective county Department of Job and Family Services to apply because he/she may be eligible for other programs and/or enrollment may be re-opened periodically.

Prescription Drug Repository Program

Problem Statement:
In the 124th General Assembly, Representative Kirk Schuring introduced House Bill 221 in response to a constituent who wanted to donate his wife's prescription medications after her death. The husband was not able make such a donation under current law.

Program:
House Bill 221, which was signed into law on January 6, 2003 and went into effect on April 7, 2004, created
a prescription drug donation program for medications that are donated in their “original sealed and tamper-evident unit dose packaging.” The Ohio Board of Pharmacy was charged with establishing rules that describe how these drugs may be donated as well as to whom they may be dispensed.

Because of concerns about safe storage and tampering, the rules created for House Bill 221 only allow drugs that “have been in the possession of a licensed healthcare professional and not in the possession of the ultimate user” to be donated. Therefore, the program relies on local relationships among nursing homes, hospitals, non-profit clinics and pharmacies in order to be successful.

Eligibility and Other Details:

- The rules for the program state that “a pharmacy, hospital, or non-profit clinic that elects to participate in the drug repository program must determine if a person is eligible to receive drugs.”

- A person must meet the following requirements to become eligible:
  1) Is a resident of Ohio, and
  2) Has no active third party prescription drug reimbursement coverage; or,
  3) Is a patient of a non-profit clinic

Projected Costs:

There are no federal or state funds allocated to this program. According to the rules, “a pharmacy, hospital, or a non-profit clinic may charge the recipient of a donated drug a maximum of 200 percent of the Medicaid professional dispensing fee to cover restocking and dispensing costs.”

Status:

House Bill 221 went into effect on April 7, 2004. The program can be implemented at the local level by entities interested in organizing the coordination. No funding is available for administration of the program.

For More Information:

Contact Mark Keeley, Ohio Board of Pharmacy at (614) 466-4143.

LOCAL PROGRAMS

There are several local prescription drug assistance programs throughout the State of Ohio. These are funded through foundations, corporations, local government, and other sources. Because the eligibility for these programs varies so widely, we suggest that you contact your local information and referral (I & R) agency for more information.

To find your local I & R agency, log onto www.211ohio.net.
CORPORATE PROGRAMS

Patient Assistance Programs (PAPs)

Program:

Patient Assistance Programs (PAPs) are designed to provide assistance to those who have no drug coverage or are underinsured through their health care provider. There are several tools available to assist people with gaining access to these programs:

1. BenefitsCheckUp Rx provides information about brand name and generic drug Patient Assistance Programs. Eligibility requirements for specific programs and applications (with instructions) to enroll in any of the plans may be printed from the Web site. The program is sponsored by The Access to Benefits Coalition™ (ABC) and over 80 national voluntary organizations. The Web site also provides information on local and state programs, a section on tools you can use, promising practices in outreach, screening and enrollment, and news and funding opportunities. Log onto http://www.benefitscheckuprx.org/ for more information.

2. Rx for Ohio is a clearinghouse of information, sponsored by the Pharmaceutical Research and Manufacturers of America (PhRMA), regarding patient assistance programs offered by pharmaceutical companies. The program provides PAP information on more than 1,400 different medications, offers an easy way for patients to know if they qualify, and an application. Patients can access Rx for Ohio by calling (877) 794-6446 or by logging onto www.rxforohio.org. The toll-free phone lines are open Monday through Friday from 9:00 a.m. to 2:00 p.m. Patients who use the toll-free phone number will talk with an operator who will help determine eligibility for programs and begin the application process. Visitors to the Web site can check eligibility and begin the application process online. Rx for Ohio focuses on brand name medication. Rx for Ohio is supported by a number of voluntary health organizations and physician groups in Ohio.

3. Express Scripts Specialty Distribution Services offers a patient assistance program for generic medications, Rx Outreach. Patients pay an administrative fee to participate and must have incomes below 250 percent of the federal poverty level. For more information on this program log onto www.rxoutreach.com or call 1-800-769-3880.


5. There are other companies that charge an administrative fee to manage patient assistance program applications for individuals. PrescriptionRelief.org (1-866-drug-686) is a non-profit company based in Columbus, Ohio that charges a $25 case management fee as well as $7 per month per prescription. Patient Assistance Services (www.patientassistancepriceservices.com or 1-877-463-1905) is a for-profit company that charges an initial $25 set up fee as well as $10 per month per prescription.
Eligibility and Other Details:
Eligibility criteria vary based on the provider and the drug but is generally based on income requirements, family size, and status of insurance coverage.

Projected Costs:
Costs of the patient assistance programs are absorbed by the pharmaceutical industry and patients (Rx Outreach). In 2002, approximately 14 million prescriptions were filled under patient assistance programs that had an estimated wholesale value of $2.3 billion.²

Status:
The programs described above are currently in operation. With about 140 industry-sponsored programs and 400 government and private programs, easing access to these programs has been challenging. Currently, each patient assistance program has a separate application and eligibility criteria. Many advocates believe that a consolidated application form for all programs would help patients to take advantage of the patient assistance programs. Pharmaceutical companies must work through federal anti-trust laws in order to create a uniform application.

For More Information:
BenefitsCheckUp Rx: www.benefitscheckuprx.org
Rx for Ohio: (877) 794-6446 or www.rxforohio.org (brand name prescription medications)
Rx Outreach: (800) 769-3880 or www.rxoutreach.com (generic medications)

Additional Web sites with information about PAPs: www.rxassist.org and www.needymeds.com

²http://www.rxforohio.org/resources/questions.html
Unlocking the Medicine Chest: Which Program is Best for You?

This flow chart illustrates the various prescription drug programs available to Ohioans. For more information, log onto www.ohiofreeclinics.org or www.ouw.org.

Do you have prescription drug coverage through your employer-sponsored insurance carrier or Medicaid?

YES

In most cases you will not be eligible for or need other government programs. You may be eligible for a few discount or patient assistance programs.

NO

Are you enrolled in Medicare?

NO

You are eligible for a Medicare-approved discount drug card. These cards are in effect until the new Medicare Part D program starts in 2006.

YES

Is your income under 250% of poverty?

NO

You may be eligible for a pharmaceutical company’s discount or patient assistance program. Eligibility for these programs vary by company and by drug and income level. Many programs offer qualifying individuals free medicine or generous discounts.

YES

Is your income under 200% of poverty?

NO

You may be eligible for the Disability Medical Assistance program. See the chart.

YES

The Golden Buckeye Card with Prescription Drug Savings is for available to Ohioans 60 years and older, and those 18 and older with a Medicare-qualified disability. There is no income requirement.

Is your income under 135% of poverty?

NO

You may be eligible for another discount card in addition to a Medicare discount card.

YES

You are eligible for Medicare Discount Card’s $600 temporary assistance program (TAP). You may also be eligible for another discount card.

Consider these programs

Programs with eligibility tied to poverty level

<table>
<thead>
<tr>
<th>FAMILY SIZE</th>
<th>MEDICAID ELIGIBILITY</th>
<th>OTHER PROGRAMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPL</td>
<td>Aged, Blind, and Disabled*</td>
<td>Disability Medical Assistance</td>
</tr>
<tr>
<td>1</td>
<td>64% 100% 150% 200%</td>
<td>16% 135% 250%</td>
</tr>
<tr>
<td>2</td>
<td>$5,958 $9,310 $13,965 $18,620</td>
<td>$1,998 $16,862 $31,225</td>
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<tr>
<td>3</td>
<td>$7,994 $12,490 $18,735 $24,980</td>
<td>$2,507 $21,155 $39,175</td>
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<tr>
<td>4</td>
<td>$10,029 $15,670 $23,505 $31,340</td>
<td>$3,016 $25,448 $47,125</td>
</tr>
<tr>
<td>5</td>
<td>$12,064 $18,850 $28,275 $37,700</td>
<td>$3,016 $25,448 $47,125</td>
</tr>
</tbody>
</table>

Consider these programs

The Best Rx Discount Card will soon be available to Ohioans who are 60 years of age and older regardless of income, and to those with incomes at or below 250% of the poverty level.
<table>
<thead>
<tr>
<th>Name of Program or Policy</th>
<th>Disability Status</th>
<th>Over Age 60</th>
<th>Over Age 65</th>
<th>Any Age</th>
<th>Under 16% FPL</th>
<th>Under 135% FPL</th>
<th>Under 150% FPL</th>
<th>Under 200% FPL</th>
<th>Under 250% FPL</th>
<th>Under 300% FPL</th>
<th>Insurance Status</th>
<th>Status</th>
<th>For More Information</th>
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<tbody>
<tr>
<td>Medicare Transitional Assistance Program</td>
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<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Medicare Beniciary</td>
<td>People below 135% FPL do not pay $30 annual premium for discount card and receive a $600 annual credit for 2004 and 2005.</td>
<td>Ohio Department of Insurance: Call 1-800-666-1578 or log onto <a href="http://www.ohioinsurance.gov/prescriptiondrugs/">www.ohioinsurance.gov/prescriptiondrugs/</a> BenefitsCheckUp Rx: <a href="http://www.benefitscheckuprx.org">www.benefitscheckuprx.org</a> Federal Government: Call 1-800 MEDICAR or log onto <a href="http://www.medicare.gov">www.medicare.gov</a></td>
</tr>
<tr>
<td>Medicare Prescription Drug Coverage (also known as Medicare Part D)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Medicare Beniciary</td>
<td>Signed into law Nov. 2003. New drug benefit will begin 2006. Add'l assistance will be available to people below 135% FPL.</td>
<td>Call 1-800 MEDICAR or log onto <a href="http://www.medicare.gov">www.medicare.gov</a></td>
</tr>
<tr>
<td>Ohio Golden Buckeye Card with Prescription Drug Savings</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>No restrictions</td>
<td>Ohio Department of Aging implemented in October 2003; Special Assistance Programs available to those with incomes under 300% of FPL.</td>
<td>Call 1-866-301-6446 or log onto <a href="http://www.goldenbuckeye.com">www.goldenbuckeye.com</a></td>
</tr>
<tr>
<td>Disability Medical Assistance</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>No new applications are being accepted for this program due to a cap on funding.</td>
<td>Contact your respective county Department of Job and Family Services to apply because you may be eligible for other programs or enrollment may be re-opened periodically.</td>
</tr>
<tr>
<td>Ohio’s Best Rx (HB 311 and SB 138, 125th GA)</td>
<td>X</td>
<td>X</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Cannot have or be eligible for employer or government Rx coverage</td>
<td>Signed into law Jan. 2004. Will be implemented in Dec. 2004.</td>
<td>Contact Cynthia Burnell, Best Rx Program Director, Ohio Department of Job and Family Services (614) 466-9783 or log onto <a href="http://www.ohiobestrx.org/">http://www.ohiobestrx.org/</a></td>
</tr>
<tr>
<td>Patient Assistance Programs (PAPs)</td>
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<td>All criteria depends on the Rx company that sponsors the PAP for a particular drug</td>
<td>Rx for Ohio is sponsored by PNRMA and includes only PNRMA members’ PAPs (brand name medications). Rx Outreach is a PAP for generic medications, but requires a co-pay.</td>
</tr>
<tr>
<td>Prescription Drug Donation Program (HB 221, 124th GA)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Cannot have or be eligible for employer or government Rx coverage</td>
<td>Has no active 3rd party Rx drug reimbursement coverage for the drug prescribed</td>
<td>Law went into effect in April 2004</td>
</tr>
</tbody>
</table>