

Medication	Patience Assistance Program
Viekira Pak	<p>Proceed – Sponsored by AbbVie</p> <p>Contact information: 1-844-277-6233 https://www.viekira.com/proceed-program</p> <p>Eligibility Requirements: Not provided, contact company to determine eligibility and amount of coverage.</p>
Moderiba	<p>AbbVie Patient Assistance Foundation</p> <p>Contact information: 1-844-663-3742 http://www.moderiba.com/patient-support/financial</p> <p>Eligibility Requirements:</p> <p>If Employed and have prescription drug coverage: \$5 out of pocket expense with the Moderiba Co-Pay Card</p> <p>If a recipient of Medicare Part D: May be able to get help from an independent co-pay foundation</p> <p>If Unemployed and/or uninsured: May be able to get Moderiba at no additional cost through the AbbVie Patient Assistance Foundation</p>
Harvoni	<p>Support Path – Administered by Gilead</p> <p>Contact information:1-855-769-7284 http://www.mysupportpath.com/</p> <p>Application: http://www.mysupportpath.com/~media/Files/mysupportpath_com/Support_Path_Intake_Form.pdf</p> <p>Eligibility Requirements:</p> <p>If Insured: The Harvoni co-pay coupon program will cover the out of pocket costs after the first \$5 per prescription fill is paid, up to a maximum of 25% of the catalog price of a 12 week regimen.</p> <p>If Uninsured and below 500% FPL: The Support Path Patient Assistance Program will cover the full cost of Harvoni medications for clients enrolled in the Patient Assistance Program.</p> <p>Medication delivery: Medications delivered via Fed Ex directly to home.</p>

<p>Sovaldi</p>	<p>Support Path – Administered by Gilead</p> <p>Contact information:1-855-769-7284 http://www.mysupportpath.com/</p> <p>Application: http://www.mysupportpath.com/~media/Files/mysupportpath_com/Support_Path_Intake_Form.pdf</p> <p>Eligibility Requirements:</p> <p>If Insured: The Sovaldi co-pay coupon program will cover the out of pocket costs after the first \$5 per prescription fill is paid, up to a maximum of 25% of the catalog price of a 12 week regimen.</p> <p>If Uninsured and below 500% FPL: The Support Path Patient Assistance Program will cover the full cost of Sovaldi medications for clients enrolled in the Patient Assistance Program.</p> <p>Medication delivery: Medications delivered via Fed Ex directly to home.</p>
<p>Ribavirine</p>	<p>Ribasphere RibaPak CoPay Savings- Administered by Kadmon Pharmaceuticals</p> <p>Contact information: 1-800-364-4767 http://www.hcvadvocate.org/community/community_pdf/Riba_CoPay_Cards.pdf</p> <p>Eligibility Requirements:</p> <p>At least 18 years of age Can be insured or uninsured Medicare Part D recipients are not eligible</p> <p>Savings card offers discount of \$150 regardless of insurance status. If uninsured, discount of \$150 toward total cost of medication.</p>
<p>Olysio</p>	<p>Johnson & Johnson Patient Assistance Foundation</p> <p>Contact information: 1-800-652-6227 www.JJPAF.org</p> <p>Eligibility Requirements: Uninsured, US Resident, Outpatient treatment only, Below 500% FPL</p> <p>Medications received at no cost to client.</p> <p>Medication Delivery: Client will receive a card which can be taken to any pharmacy to receive medications.</p>

Olysio Savings Program

Contact information: 1-855-565-9746
<http://www.janssenprescriptionassistance.com/>

Eligibility: Insured

Once eligibility established and card has been activated, clients pay \$5 per fill, with a maximum annual benefit of \$50,000.