

## LLS Co-Pay Assistance Program

### Frequently Asked Questions

#### 1. What is a Co-Pay?

*A fixed amount you pay for a health care service that is covered by your insurance and after you've paid your deductible. Copays vary for different services like drugs, lab tests, and visits to specialists within the same plan.*

#### 2. What is a Premium?

*The amount you pay for your health insurance every month.*

#### 3. What does the LLS Co-Pay Assistance Program help with?

- *Blood cancer treatment-related co-payments*
- *Private health insurance premiums and deductibles.*
- *Medicare Part B, Medicare Plan D, Medicare Supplementary Health Insurance, Medicare Advantage premium, Medicaid Spend-down or co-pay obligations*
- *For a detailed list of covered expenses please visit our website, [www.LLS.org/copay](http://www.LLS.org/copay)*

#### 4. How do I know if my blood cancer is covered?

*Please call 1-877-557-2672 to speak with a Co-Pay Intake Specialist who will provide personalized service through the application process.*

#### 5. What if I'm not sure if a prescribed medication or procedure is covered?

*Please call 1-877-557-2672 to speak with a Co-Pay Intake Specialist who will provide personalized service through the application process.*

#### 6. Does LLS Co-Pay Assistance Program pay for over-the-counter medication?

*No the Co-Pay Assistance Program only reimburses costs for medications prescribed by a healthcare provider.*

#### 7. What is the Medicaid Spend-down?

*Some people have too much income to qualify for Medicaid. This amount is called excess income. Some may qualify for Medicaid if they spend the excess income on medical bills. This is called a spend-down. For more information on Medicaid Spend-Down and how it works, please visit: [http://www.oms.nysed.gov/medicaid/resources/Medicaid\\_spend\\_down.pdf](http://www.oms.nysed.gov/medicaid/resources/Medicaid_spend_down.pdf). We can help pay your out of pocket costs for your Medicaid spend-down.*

#### 8. Is the assistance I receive from the Co-Pay Assistance Program taxable?

*As a charity, LLS is exempt from federal income tax and individuals who receive assistance from a charity to meet their personal needs do not generally have to pay federal income tax on the value of the assistance they receive. With this being said it should not affect their ability to receive financial assistance from the government or effect their income taxes.*

**9. Can I get assistance for my prescribed devices and blood work?**

*Unfortunately no, prescribed devices such as eyeglasses, wheelchairs, etc., and diagnostic procedures such as: PET/CT/MRI scans, X-rays, laboratory services including blood work, biopsies, etc., are not covered by this program. For a list of covered expenses, please visit our page at [www.LLS.org/copay](http://www.LLS.org/copay).*

**10. If I do not have insurance, can I still apply for the Co-Pay Assistance Program?**

*No. Patients must have medical and/or prescription insurance to qualify for this program. If you are uninsured and you need information about getting insurance coverage or other financial help, please call to speak to an LLS Information Specialist at 1-800-955-4572.*

**11. I'm not sure I qualify for the Co-Pay Assistance Program. How can I get more information?**

*To apply or obtain more information about the Co-Pay Assistance Program, please call 1-877-557-2672 to speak with a Co-Pay Intake Specialist who will provide personalized service through the application process. You can also find information or apply online by visiting [www.LLS.org/copay](http://www.LLS.org/copay)*

**12. Should I apply even though it appears I am over the limit on the Federal Poverty Level (FPL) guideline chart found on LLS' website?**

*Yes. You should still apply as you may still qualify after the Cost Of Living Index (COLI) is factored in.*

**13. What should I do if my income has changed?**

*You should call 1-877-557-2672 to speak with a Co-Pay Intake Specialist who will provide personalized service through the application process.*

**14. What happens if I need to relocate for treatment and have a temporary address?**

*You should call 1-877-557-2672 to speak with a Co-Pay Intake Specialist who will provide personalized service through the application process.*

**15. Are translation services available?**

*Yes. Please call 866-446-7377 for assistance.*

**16. Can a healthcare professional and/or caregiver apply to LLS Co-Pay Assistance Program for me?**

*Yes, a healthcare professional, such as your doctor, a social worker, a financial counselor, nurse, patient advocate, etc., can apply for the program on your behalf either by phone or through the online portal. The portal is available 24 hours a day. The call center is available Monday through Friday 8:30AM to 5PM ET.*

**17. Why do I need to provide my Social Security Number?**

*Your Social Security Number is used to verify your income, identity, and residency through our instant verification system. This eliminates the need for the applicant to submit documentation. It is never shared.*

**18. Does the instant verification system impact my credit score?**

*No. We are only verifying your identity, income and residency.*

**19. What if I don't want to provide my Social Security Number?**

*Your Social Security Number is used to verify your identity and residency **only** through our instant verification system. It is **required** and **never shared**. If you are unable to provide your Social Security Number, you will be required to send in additional documentation to confirm your identity and residency.*

**20. What happens if I am an undocumented parent/guardian looking to apply on behalf of my child who is a citizen?**

*If you are an undocumented parent/guardian, applying on behalf of your child who is a citizen, you **MUST** call 866-446-7377 to apply. You will be asked to provide supporting documentation.*

**a. What forms of supporting documentation are accepted?**

*In order to process your application, you will need to submit a copy of your Driver's License or State Issued Identification (Front & Back Copy). If you are unable to provide a Driver's License or State Issued I.D., please submit all that apply.*

*--Utility Bill*

*-Three consecutive months of pay stubs*

*-Copy of current federal tax return (page 1 only)*

*-W2s*

*-Social Security Award/Benefit Statement*

*-Statement of Pension or Retirement Benefits*

*-Statement of alimony and/or child support*

*-Statement of workers compensation*

*-Statement of dividends and/or interest income*

*-Statement of Short Term and/or Long-Term Disability Benefits*

*-Statement of Unemployment Benefits*

**21. What happens if I am an undocumented parent/guardian looking to apply on behalf of my child who is a citizen, can I apply on the portal?**

No. The application **MUST** be processed over the phone by calling 866-446-7377.

**22. Will I receive a phone call if more information is needed?**

No. The patient will receive a letter informing him/her that additional documentation is required.

***If applying on the portal, you will...***

-See an alert in your profile letting you know more information is needed.

-Receive a letter in the mail with the same information. A copy of this letter can also be found on your portal account.

***If applying over the phone with an Intake Specialist...***

-The specialist will inform you if more supporting documentation is needed. A letter is also mailed.

**23. I received a letter requesting that I send additional documentation. Why am I being asked for this information?**

LLS uses an instant verification system. In the rare case where our system cannot verify your identity or residency, you will be asked for additional documentation.

**a. What forms of supporting documentation are accepted?**

*In order to process your application, you will need to submit a copy of your Driver's License or State Issued Identification (Front & Back Copy). If you are unable to provide a Driver's License or State Issued I.D., please submit all that apply.*

*-Utility Bill*

*-Three consecutive months of pay stubs*

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*-Statement of Unemployment Benefits*

**24. Do I need to submit all requested documentation before my application can be approved?**

*Yes. Applications are not reviewed for approval until all supporting documentation is received.*

**25. What if I am homeless?**

*You can still apply to the program. We recommend you apply over the phone and inform the Intake Specialist of your current income/living situation.*

**26. What if I have no income?**

*You can still apply to the program. We recommend you apply over the phone and inform the Intake Specialist of your current income/living situation.*

**27. What if my doctor's office has yet to submit the physician's form to confirm my diagnosis?**

*This information is required for application approval. LLS will fax the physician's form to the doctor's office at the point of application, and the patient should follow up with their doctor to confirm the form has been submitted.*

**28. Can I sign documents electronically?**

*Yes. Applicants can sign the application either verbally over the phone with an Intake Specialist, or electronically through the online portal.*

**29. How do I check the status of my application?**

*The best way to get real time updates on the status of your application is to call a Co-Pay Intake Specialist directly at 877-557-2672.*

**30. I started an application and now the website has the fund listed as fully subscribed. What do I do?**

*LLS allows all applicants 90 days to submit a completed application. Even if the website says fully subscribed, you should continue to fill out the application and submit it.*

**31. The fund is fully subscribed, can you put my name on a waiting list or contact me when the fund reopens?**

*No. The Co-Pay Assistance Program is overseen by The Office of Inspector General (OIG) which provides strict guidelines of operations. The guidelines prohibit LLS from keeping a waiting list or contacting patients when funds open or close. Patients and healthcare professionals should check the website regularly for updated funding information.*

**32. How do I know if I've been approved?**



*You will receive a letter in the mail. In addition to the letter, if you applied through the online portal, your account status will reflect your approval or denial.*

**33. My application is approved, now what?**

*If your application is approved, you will receive a letter of approval in the mail within 4 to 7 business days, along with instructions on how to submit claims.*

**34. How do I find out what my award balance is?**

*You can check your account balance by calling the toll free number, 877-557-2672, Monday through Friday 8:30AM to 5:00PM ET.*

**35. What if I change my doctor or pharmacy?**

*Patients enrolled in the LLS Co-Pay Assistance Program have complete freedom to choose doctors, providers, suppliers, insurance companies and/or treatment related medications. Patients are free at any time to make changes in any of the above without affecting their continued eligibility.*

**36. When do I know it is time to renew my Co-Pay Assistance Program application?**

*All patients will receive a written notice prior to the end of their award cycle.*

**37. Why do I need to reapply to the Co-Pay Assistance Program?**

*Patients need to reapply to the program as the most up to date demographic, income, and treatment information must be captured to ensure that the patient is still eligible.*

**Continue to CLAIMS FAQs**

## Frequently Asked Questions

### CLAIMS

**1. How often do I have to submit a claim to keep my award active?**

*Patients need to submit a claim every 90 days to keep their award active. This can be done by using the LLS Pharmacy Benefit Card or by submitting claims via mail or fax. For a list of covered expenses and instructions on how to submit a claim, please visit our website [www.LLS.org/copay](http://www.LLS.org/copay).*

**2. How do I submit a claim?**

*All claims can either be faxed to the program at 877-267-2932 or mailed to the Co-Pay program at the address below. If you are registered on the portal, you may also submit claims through your online portal account.*

**3. Can I submit bills for previous years?**

*No, you may only submit claims for services received within the dates of your 12 month coverage period. \*\*\*If you are a first time applicant, we may be able to pay for services received up to three months prior to your approval date.*

**4. What is the LLS Pharmacy Benefit card?**

*The Pharmacy Benefit card is a virtual pharmacy card (information is found in your award letter) that can be used at your local and specialty pharmacies. Provide the pharmacist with your card information, found in your award letter, and your out-of-pocket cost for covered medications will be paid instantly.*

**5. How do I use my Pharmacy Benefit card?**

*Provide the pharmacist with your card information, found in your award letter, and your out-of-pocket cost for covered medications will be paid instantly.*

**6. I've misplaced my Proof of Expenditure (POE) form. What should I do?**

*If you are unable to locate, or are unable to make copies of the form, you can call 877-557-2672 to get a copy. If you have a portal account, you can access and download a copy.*

**7. My doctor's office requires me to prepay for my treatment. How do I submit a claim to get reimbursed?**



*We suggest you call 877-557-2672 to speak with an Intake Specialist to walk through the process. In some cases, the patient may need to follow up with the provider and/or the insurance company.*

**8. How can I get information about a claim I submitted?**

*You can check the status of a claim by calling the toll free number, 877-557-2672, Monday through Friday 8:30AM to 5:00PM ET. If your claim was submitted via the online portal, you can check the status of the claim in your online account.*

**9. What do I do if I already forfeited my award because I was unable to submit a claim within 90 days, do I have to reapply to the program to get assistance or to reactivate my award?**

*No. You will not be eligible to reapply until your award period (12 month coverage period) has expired. You may be able to reactivate your award by submitting a new claim. Claims submitted must be for eligible expenses for dates of service within your award period. **Please note reactivation is not guaranteed and is dependent on available funding.***

***For any additional questions, please call us at 1-877-557-2672. Thank you!***