The Leukemia and Lymphoma Society Co-pay Assistance Program

Provider/Pharmacy Portals: Patient Application Creation

Please Note: The Application requirements and process have not changed, however the portals have a new and improved look. This tutorial is designed to acquaint you with the new layout.
Go to http://www.lls.org/copay

Provider/Pharmacy: Patient Application Creation

Click Submit an application
Click Provider or Pharmacy Login

Quick Tip
Internet browser needs to be most update to work best with portals. Adobe 9 or newer.

Welcome to the Leukemia & Lymphoma Society Co-Pay Assistance Program on-line application process.

We have created this site as a method to access financial assistance in an expedient manner.

Welcome to the Leukemia & Lymphoma Society Co-Pay Assistance Program’s secured, on-line Provider Center!

The LLS Co-Pay Assistance Program currently provides direct financial support to insured patients, who are financially and medically qualified, for pharmaceutical treatments and/or prescription medication co-payments, co-insurance and deductibles relative to your diagnosis.

For your convenience the Patient Center is available 24 hours and you may submit your application through this secure web-site which will expedite program access.

If you would like to begin the application process, please click Start. If the Co-Pay Assistance Patient Center and you would like to register, please.

Please Note: A valid email address is required to complete the registration process. After registering, you will receive an email to confirm your registration and create your password. Your account will not be active until you have confirmed your registration and created your password. Once this is done, you can log in any time with your email address and password.
Provider/Pharmacy: Patient Application Creation

Login with User Name and Password

Quick Tip
Bookmark the page for daily use, if you haven’t already
Quick Tip
Up to 50 patients will be listed on this screen. These are the most recent 50 patients with entries. Portal users have reported that a Last name search is quicker than scrolling through patient list.
Click Create Application for new patient

Welcome to the Leukemia & Lymphoma Society Copay Assistance Program online portal. Below you will see the patients in which you have permission to see.

Click ‘Create…”
Select Fund and fill in all fields.
Click Submit.
If the patient is ineligible for assistance, the user will be notified with the denial reason. Example → If the patient’s income is too high, they will be referred to the Information Resource Center.

Based on the information provided, unfortunately you are not eligible for assistance through the program due to the following reason(s):

Your household income exceeds the guidelines of our program.

If you have any questions, please contact the Leukemia & Lymphoma Society Information Resource Center at 1-800-955-4752 for further assistance.
Step 1: Patient Information – General
Fill in all information then click ‘Contact’ tab, followed by the ‘Additional’ tab

Quick Tip
If you selected Create Patient by accident, ‘Return Home’ will take you back to the Landing page
Step 1: Patient Information – Contact
To add additional phone numbers or address click + Add Item

Quick Tip
Entry fields available for one number and one address, only use +Add Item is additional information.
Provider/Pharmacy: Patient Application Creation

Step 1: After completing all three sections, click the ‘Create Patient’ Button
Step 2: Financial Information
Verify household income & Family Size then click ‘Next’
Provider/Pharmacy: Patient Application Creation

Navigation Buttons – bottom of page

Return Home – Takes you back to Landing Page, with patient created.

Discontinue Application – Erases Application. To apply again find patient on the landing page.

Save Progress – Saves application progress, and returns you to Landing page. Search for patient and click AppID to continue.

<<Back - Moves one step back in application

Next>> - Moves one step forward in the application (you can only move forward once all required fields are populated on that page)
Step 3: Authorized Contacts
To add additional Authorized Contact +Add Item
Fill in all information then click ‘Next>>’
Step 4: Insurance Information
If Insurance not present, type Other and type in the name of the insurance. Fill in all information then click ‘Next>>’
Step 5: Physician Information
If Pharmacy/Provider, the provider section will prepopulate
If Selected Treating Physician is correct, click ‘Next>>’
Step 5: Physician Information
You can search for a different treating physician by using the Search function. Click +Add to select from list or ‘Create New Provider’ not found in search.

Quick Tip
Search with Facility/Practice name & State. If provider present, click ‘Add’ and then use the trash can above to delete the other provider from the application.
Step 5: Physician Information
Physician information will populate in Select provider
Once Provider is selected click ‘Next>>’
Step 6: Diagnosis & Treatment
Enter Primary Diagnosis, Diagnosis Date, and Medication details. To add additional medication, click ‘+Add’.
Enter Treating Physicians Specialty & Treatment Setting
Fill in all information and then click ‘Next>>’
Step 7: Patient Attestations
Read All requirements and submit the application. The Patient or Patient representative (such as Advocate, Family Member, or Guardian) must sign the application.
Step 8: Upload Documents
Here you can submit required application documents by selecting “Upload documents”.
Select “Submit Application” to return to the Landing page.

Quick Tip
You do not have to upload documents at this time by selecting “Submit Application”. You can upload documents from the Landing page at a later date.
You are now back on the Landing Page with the created Patient now listed. Click arrows for more details on patient.
Application documents can be uploaded from this view.

<table>
<thead>
<tr>
<th>Application ID</th>
<th>Approval Date</th>
<th>Submission Channel</th>
<th>Status</th>
<th>Expiration Date</th>
<th>Fund Name</th>
<th>Award Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>APPILLS2015878</td>
<td></td>
<td>Provider Portal</td>
<td>Pending All Documents</td>
<td></td>
<td>Myeloma</td>
<td>2015</td>
</tr>
</tbody>
</table>

My Expenditures

There are no available Expenditures for this application

App Attachments Information

Quick Tip
You can print the Physician Form, Application, Fax Cover Sheet.
Leukemia & Lymphoma Society
Co-pay Assistance Program
P.O. Box 12268
Newport News, VA 23612

Phone: (877) 557-2672
Fax: (877) 267-2932

Internet: www.lls.org/copay