



Financial Programs Guide For Cancer Treatment

If you are having cancer treatment and are experiencing financial hardship due to lack of insurance coverage or low reimbursement, there are programs that can help. Even if you have insurance, you may still be eligible for programs that assist with insurance co-pays, premiums and prescriptions. The Cancer Center of Santa Barbara employs Support Services Staff who can help to determine if you would qualify for assistance programs.

Below are some assistance programs and their general guidelines:

COUNTY HEALTH COVERAGE PROGRAMS

- ACE Program for Adults in Ventura County- (805) 677-5260 or 1-888-343-0533**
A health coverage program that offers uninsured individuals on-going regular access to comprehensive outpatient and inpatient health care services, including specialty care, in the Ventura County Health Care System. For those 19-64, without other coverage.
- BCCTP Breast and Cervical Cancer Treatment Program*-** A state program that may pay for breast and cervical cancer treatments for women diagnosed with cancer.*
Contact: 1- 800-824-0088 or (805) 963-8566- SB
Cancer Detection Program: 1-800-511-2300- For women 40 & up who need breast cancer screening or 25 & up for cervical cancer screenings.
(You can apply in person at all County Clinics, Neighborhood Clinics, Planned Parenthood, American Indian Health & Santa Ynez Tribal Health clinics.)
- Medi-Cal-** A program that may cover health care services, co-pays, prescriptions and insurance premiums. **For those under 21, over 65 or disabled or with children.**
Contact: (805) 681-4401- Santa Barbara
(805) 737-7080- Lompoc
(805) 346-7135- Santa Maria
- MIA-** A county program that may pay all or part of the cost of medical care and is for those who are ineligible for Medi-Cal. **For those ages 21-64.**
Contact: (805) 681-5398/ (805) 681-5399- Santa Barbara
(805) 737-6486- Lompoc
(805) 346-7374- Santa Maria
- TSAC Fund- 681-5390**
County Health Services fund that pays for specialty care after services have been received.

PATIENT ASSISTANCE PROGRAMS

- Cancer Center of Santa Barbara-** To apply for patient discount.
Contact: (805) 682-7300 or (805) 898-2191- Patient Finance
- Cottage Health System Hospitals-** To apply for patient discount, for the uninsured.
Contact: (805) 682-7111 or (805) 879-8900- Patient Billing

PRIVATE FOUNDATIONS

- Private Foundations-** May help with cost of medical bills, treatment, personal expenses and bills. Eligibility based on income, expenses and residency. Please contact a social worker for details.

MEDICARE PLANS

- Medicare- 1-800-633-4227 www.medicare.gov**
For individuals 65 and older.
- Medicare Part D Information Websites**
www.myMedicareMatters.com and www.myMedicareCommunity.org
- Social Security Administration- 1-800-772-1213 www.socialsecurity.gov**
For low-income individuals who need help in paying for Medicare prescription drug costs. Can apply online.
- Medicare Supplemental Policies-** Supplement Medicare Payment.
 - **HICAP (Health Insurance Counseling & Advocacy Program)-** can help you to understand Medicare coverage, solve medical billing problems, compare insurance policies, assist in filing claims appeals and review HMO's and Managed Care options. **Contact: 1-800-434-0222- HICAP**

COBRA, CONVERSION PLANS, HIPPA PLANS & MRMIP PLANS

- Cal-COBRA-**Cal-COBRA is a California law that is like Federal COBRA. Cal-COBRA applies to employers and group health plans that cover from **2 to 19 employees**. It lets you keep your insurance for up to a total of 36 months. Cal-COBRA is also for people who use up their Federal COBRA. When your 18 months of Federal COBRA ends, you can buy 18 more months of health insurance under Cal-COBRA. **Contact your employer for an application. Information available at the California Department of Insurance: 800-927-HELP or www.insurance.ca.gov**
- Federal COBRA- US Department of Labor Information- 1-866-444-3272**
Federal COBRA is a U.S. law that applies to employers and group health plans that cover **20 or more employees**. It lets you keep your group health insurance when your job ends or your hours are cut. You have to pay the premium but you can keep your insurance for at least 18 months. **Contact your employer for a Cobra application.**
- Conversion Plans-** When your group health insurance ends, your health plan may have to offer you an individual plan. This is called a conversion plan because you convert from the group to an individual plan. If you qualify for a conversion plan, you cannot be denied insurance because of your medical history. If you buy a conversion plan, you have to pay the premiums. However, you must first use up Federal COBRA/Cal-COBRA if you qualified for it. **Contact: 1-800-927-4357 at California Department of Insurance www.insurance.ca.gov or Department of Managed Health Care at www.dmhc.ca.gov (888) HMO-2219.**

COBRA, CONVERSION PLANS, HIPPA PLANS & MRMIP PLANS (CONTINUED)

HIPPA Plan (Health Insurance Portability and Accountability Act)- 1-800-927-4357 or 888-HMO-2219

If you have had health insurance for the last 18 months without a gap of more than 63 days, you may have the right to buy a HIPAA Individual Insurance Plan. However, you must first use up Federal COBRA/Cal-COBRA if you qualified for it.

**MRMIP Major Risk Medical Insurance Program- 1-800-289-6574
www.mrmib.ca.gov**

If you have been denied individual coverage or involuntarily terminated from health insurance coverage for reasons other than nonpayment or been offered an individual, not group, health insurance premium in excess of the MRMIP subscriber contribution amount, within the last 12 months, you can apply for the MRMIP Policy. Applicants must not be Medicare Part A or Part B eligible and must not be eligible to purchase any health insurance Through COBRA or CalCOBRA. You can apply for deferred enrollment if you will be eligible in future.

Please Note: If you feel that you were improperly denied a chance to participate in Federal COBRA or Cal-COBRA or a HIPPA Plan please contact the Department of Managed Care HMO Help Center at 888-466-2219 or online at www.dmhc.ca.gov . They will assist you in filing a complaint.

PHARMACEUTICAL ASSISTANCE PROGRAMS

- ❖ **Managed RX Plans, Inc.- 1-800-799-8765**
Managed RX Plans is a pharmacy that provides prescription drugs at zero cost to those who have an acceptable major medical insurance with prescription coverage (after they have met their deductible). The registered pharmacist will fill your doctor's prescriptions, and bill your insurance carrier. Managed RX does not accept Medicare, Medi-Cal or HMO's.
- ❖ **Needy Meds- <http://www.needymeds.com/>**
Online resource for links to all pharmaceutical assistance programs and their applications. Access information by drug generic or brand name.
- ❖ **Partnership for Prescription Assistance PPA- 1-888-477-2669 www.pparx.org**
Single Point of access to more than 475 public and private patient assistance programs.
- ❖ **RX Help for Californians- 1-877-777-7815 www.RxHelpforCA.org**
RX Help for Californians is a free service for people who are insured, underinsured or have limited income. It can help sort through hundreds of free and reduced priced medication programs- all with a single phone call or website check.

GENERIC DRUG PROGRAMS

Offer generic medications at a reduced cost.

- ❖ **K-Mart Pharmacy- 90 Day Generic Drugs for \$15- (805) 968-1633**
This program is for uninsured, indigent and those whose insurance will not allow for 90-day orders. Patient can pick up drugs from the Goleta K-Mart located at 6865 Hollister Avenue, Goleta, CA 93117.
- ❖ **RX Outreach (Patient assistance program through Express Scripts)- 1-800-769-3880**
This program is an easy and affordable way for people of all ages to get medicines they need. People who qualify can get more than 55 generic medications that treat a wide range of conditions free of charge. There is a shipping fee. www.rxoutreach.com/
- ❖ **Target Pharmacy- (805) 644-0095- Ventura, (805) 922-9904- Santa Maria**
\$4 Generic Drug Program.
- ❖ **Xubex Pharmaceutical Services- 1-866-699-8239**
Patient assistance program for over 250 generic medications. There is a shipping fee. This program is similar to RX Outreach. <http://www.xubex.com/>
- ❖ **Wal-Mart (Oxnard closest location)- (805) 981-9606.** \$4 for 30 day supply of listed generic drugs. For [Generic Drug List](#) see below.
Website List of Medications: <http://i.walmart.com/i/if/hmp/fusion/genericdruglist.pdf>

MISCELLANEOUS EXPENSES

ALL CANCERS

- ❖ **American Cancer Society- 1-866-444-7672 or 1-800-ACS-2345**
Provides assistance with gas & lodging reimbursement for any cancer treatment appointment.
- ❖ **Cancer Care- 1-800-813-4673 www.cancercare.org**
Provides funds for cancer patients for transportation and medical expenses.

BONE MARROW TRANSPLANT

- ❖ **Bone Marrow Foundation- 1-800-365-1336 www.bonemarrow.org**
Provides funds for transplant-related expenses such as medications, childcare, housing, transportation, donor searches and compatibility testing.

BREAST CANCER

- ❖ **American Breast Cancer Foundation- 1-877-539-2543 www.abcf.org**
Provides up to \$750 for mammograms, ultrasounds, surgical consultation and up to \$1,000 in emergency treatment for low-income women, including lymphedema supplies.

COLON CANCER

- ❖ **Colorectal Careline Financial Aid Fund- 1-866-657-8364 www.colorectalcareline.org**
Provides up to \$200 grant for treatment-related expenses, including transportation, housing, childcare and food costs.

LEUKEMIA & LYMPHOMA

- ❖ **Leukemia & Lymphoma Society- 1-800-955-4572 www.leukemia-lymphoma.org**
Provides cash grants for expenses, travel and certain medications for those diagnosed with leukemia or lymphoma, up to \$150 annually.
- ❖ **Lymphoma Research Foundation- 1-800-235-6848 www.lymphoma.org**
Offers limited financial assistance program to help uninsured and underinsured with unpaid medical bills.

LYMPHEDEMA

- ❖ **American Breast Cancer Foundation- 1-877-539-2543 www.abcf.org**
Provides funds for breast cancer related lymphedema supplies.
- ❖ **Cancer Care- 1-800-813-4673 www.cancercare.org**
Provides funds for cancer-related lymphedema supplies.

PANCREATIC CANCER

- ❖ **The Hirschberg Fund for Pancreatic Cancer- 1-800-813-4673 at CancerCare**
Managed by the Cancer Care organization, this fund pays up to \$1,000 for transportation and cancer care costs as well as home care and childcare for those diagnosed with pancreatic cancer.

INFORMATION WEBSITES

- ❑ **Disability Benefits 101- www.disabilitybenefits101.org**
This website brings together rules for health coverage, benefit, and employment programs that people with disabilities use. These programs may be run by state, federal government, non-profit, or private organizations.
- ❑ **Foundation for Health Coverage Education- 1-800-234-1317 www.coverageforall.org**
This website offers assistance and information on health coverage options and other resources organized by state.

For more information please call a Support Services Staff at the Cancer Center of Santa Barbara toll free at (877) 755-7300 or call the agencies listed directly.

Insurance Co-Pay Relief and Prescription Assistance Cancer-Related Programs

Organization	Contact Information	Program Information (Funding is limited and can change- please call to confirm what is available.)		
Cancer Care Co-Payment Assistance Foundation	1-866-55-COPAY (1-866-552-6729) www.cancercarecopay.org	<p>Helps people being treated for cancer afford the insurance co-payments on the prescription medicines they need. Offers assistance for the following specific conditions:</p> <ul style="list-style-type: none"> ❖ Breast Cancer ❖ Colon and Colorectal Cancer ❖ Glioblastoma (Avastin, Temodar & Gliadel Wafer Implant) ❖ Head & Neck Cancer (Erbix & Taxotere only) ❖ Lung Cancer ❖ Pancreatic Cancer ❖ Prostate Cancer 		
Chronic Disease Fund	1-877-968-7233 www.cdfund.org	<p>Helps underinsured patients with chronic disease, cancers or life-altering conditions obtain expensive medications through co-pay assistance for the following conditions:</p> <ul style="list-style-type: none"> ❖ Breast Cancer ❖ Colorectal Cancer ❖ Multiple Myeloma ❖ MDS ❖ Non-Small Cell Lung Cancer ❖ Pancreatic Cancer 		
Healthwell Foundation	1-800-675-8416 www.healthwellfoundation.org Coverage Period: Retroactive 90 days case-by-case and forward 12 months from date of approval.	<p>Addresses the needs of individuals who cannot afford their insurance co-payments, premiums, coinsurance, or other out-of-pocket health care costs. Offers assistance for the following specific conditions:</p> <table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> ❖ Breast Cancer ❖ Carcinoid Tumors ❖ Chemotherapy Induced Anemia/ Neutropenia ❖ Colorectal Cancer ❖ Cutaneous T-Cell Lymphoma </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> ❖ Head and Neck Cancer ❖ Hodgkin's Disease ❖ ITP ❖ Non-Hodgkin's Lymphoma ❖ Non-Small Cell Lung Cancer ❖ Wilms' Tumor </td> </tr> </table>	<ul style="list-style-type: none"> ❖ Breast Cancer ❖ Carcinoid Tumors ❖ Chemotherapy Induced Anemia/ Neutropenia ❖ Colorectal Cancer ❖ Cutaneous T-Cell Lymphoma 	<ul style="list-style-type: none"> ❖ Head and Neck Cancer ❖ Hodgkin's Disease ❖ ITP ❖ Non-Hodgkin's Lymphoma ❖ Non-Small Cell Lung Cancer ❖ Wilms' Tumor
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Leukemia & Lymphoma Society Co-Pay Assistance Program	1-877-557-2672 www.LLS.org/copay Coverage Period : Retroactive and forward 12 months from date of approval.	<p>Provides assistance for co-pays for prescription drugs to insured U.S. residents who have:</p> <ul style="list-style-type: none"> ❖ Chronic Myelogenous Leukemia ❖ Multiple Myeloma ❖ MDS- Myelodysplastic Syndromes ❖ Waldenstrom macroglobulinemia 		
National Organization for Rare Disorders (NORD)	1-203-744-0100 www.rarediseases.org	<p>Assist uninsured or under-insured individuals in securing life saving or life-sustaining medications. Offers assistance for the following specific conditions:</p> <ul style="list-style-type: none"> ❖ Bladder Cancer ❖ Hepatocellular Carcinoma ❖ Hodgkin's Lymphoma ❖ Intrathecal Therapy for Pain Management ❖ Multiple Myeloma ❖ Renal Cell Carcinoma, Advanced 		

Insurance Co-Pay Relief and Prescription Assistance Cancer-Related Programs

Organization	Contact Information	Program Information (Funding is limited and can change- please call to confirm what is available.)			
Patient Access Network Foundation	1-866-316-7263 www.patientaccessnetwork.org Coverage Period: Retroactive to 90 days and forward 12 months from date of approval. Prescreening required.	Assists patients who cannot access the treatments they need due to out-of-pocket health care costs including deductibles, co-payments, and coinsurance . Offers assistance for the following specific conditions: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> ❖ Breast Cancer ❖ Chemotherapy induced Nausea ❖ Colorectal Cancer ❖ Cutaneous T-Cell Lymphoma ❖ Multiple Myeloma </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> ❖ Non-Hodgkin's Lymphoma ❖ Non-Small Cell Lung Cancer ❖ Pancreatic Cancer ❖ Secondary Issues as a result of cancer treatment ❖ Symptom Management </td> </tr> </table>		<ul style="list-style-type: none"> ❖ Breast Cancer ❖ Chemotherapy induced Nausea ❖ Colorectal Cancer ❖ Cutaneous T-Cell Lymphoma ❖ Multiple Myeloma 	<ul style="list-style-type: none"> ❖ Non-Hodgkin's Lymphoma ❖ Non-Small Cell Lung Cancer ❖ Pancreatic Cancer ❖ Secondary Issues as a result of cancer treatment ❖ Symptom Management
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Patient Advocate Foundation's Co-Pay Relief Program	1-866-512-3861 www.copays.org Apply first business day of the month by phone or online. Coverage Period: Retroactive 12 months and forward 12 months from date of approval.	Provides direct co-payment assistance for pharmaceutical products to insured patients (including Medicare Part D Beneficiaries) who financial and medically qualify. Offers assistance for the following specific conditions: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> ❖ Breast Cancer ❖ Colon Cancer ❖ Head & Neck ❖ ITP-Idiopathic Thrombocytopenic Purpura ❖ Kidney Cancer ❖ Lung Cancer ❖ Malignant Brain Tumors </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> ❖ Myelodysplastic Syndrome and other pre-leukemia diseases ❖ Pain & Nausea ❖ Pancreatic Cancer ❖ Prostate Cancer ❖ Sarcoma ❖ Secondary issues as a result of cancer treatment </td> </tr> </table>		<ul style="list-style-type: none"> ❖ Breast Cancer ❖ Colon Cancer ❖ Head & Neck ❖ ITP-Idiopathic Thrombocytopenic Purpura ❖ Kidney Cancer ❖ Lung Cancer ❖ Malignant Brain Tumors 	<ul style="list-style-type: none"> ❖ Myelodysplastic Syndrome and other pre-leukemia diseases ❖ Pain & Nausea ❖ Pancreatic Cancer ❖ Prostate Cancer ❖ Sarcoma ❖ Secondary issues as a result of cancer treatment
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Patient Services Incorporated (PSI)	1-800-366-7741 www.uneedpsi.org Coverage Period: Retroactive back to the month of approval and forward 2 years from date of approval.	Assists patients with chronic medical illnesses in accessing health insurance (COBRA) and pharmacy co-payment assistance . Also helps with incidental medical expenses such as transportation and lodging, assisted devices and medical evaluation testing. Offers assistance for the following specific conditions: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 100%; vertical-align: top;"> <ul style="list-style-type: none"> ❖ Bone Metastases ❖ Chronic Myeloid Leukemia or Chronic Myeloid Leukemia or Chronic Myelocytic Leukemia ❖ Gastrointestinal Stromal Tumors ❖ Hemophelia ❖ Multiple Myeloma ❖ T-Cell Lymphoma </td> </tr> </table>		<ul style="list-style-type: none"> ❖ Bone Metastases ❖ Chronic Myeloid Leukemia or Chronic Myeloid Leukemia or Chronic Myelocytic Leukemia ❖ Gastrointestinal Stromal Tumors ❖ Hemophelia ❖ Multiple Myeloma ❖ T-Cell Lymphoma 	
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Go to the corresponding website for any non-cancerous diagnosis assistance programs.

List provided by the Cancer Center of Santa Barbara Support Services Department.
 If you need more assistance or information, please call (805) 682-7300 and ask to speak to a social worker.