



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?

- *Treatment-Related Scans, Labs and Tests, including electrocardiograms (ECGs or EKGs); PET, CT, and MRI scans; ultrasounds; X-rays*
- *Private & Public Medical Insurance Premiums*
- *Treatment-Related Co-Pays, Deductibles, Co-Insurance, and Medicaid Spend-down*
- *Chemotherapy Drug Treatment (intravenous and oral treatment)*
- *Treatment-Related Supportive Medications (e.g. anti-nausea, pain medication, antibiotics)*

For a detailed list of covered expenses please visit our website, www.LLS.org/copay

4. 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

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

Please visit our website, www.LLS.org/copay, for a list of covered blood cancers or call 1-877-557-2672 to speak with a Co-Pay Intake Specialist who will provide guidance.

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

Please visit our website, www.LLS.org/copay, for list of covered drug categories and procedures or call 1-877-557-2672 to speak with a Co-Pay Intake Specialist who will provide guidance.

7. Does LLS Co-Pay Assistance Program pay for over-the-counter medications?

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



8. 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. We can help pay your out of pocket costs for your Medicaid spend-down.

9. 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 affect their income taxes.

10. Can I get assistance for my prescribed devices?

Unfortunately, no. Prescribed devices such as eyeglasses, wheelchairs, etc., are not covered by this program. For a list of covered expenses, please visit our page at www.LLS.org/copay.

11. Can I get assistance for treatment-related labs, scan and tests?

Yes, you can receive assistance for treatment-related labs, scans, and tests like PET/CT/MRI scans, X-rays, laboratory services including blood work, biopsies, etc. For a list of covered expenses, please visit our page at www.LLS.org/copay

12. 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.

13. 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.

14. 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.

15. 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 to update your information.

16. Are translation services available?

Yes. Please call 1-877-557-2672 for assistance.



17. 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.

18. 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.

19. Does the instant verification system impact my credit score?

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

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

*Your Social Security Number is used to verify your identity, income, 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.*

21. 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 1-877-557-2672 to apply. You will be asked to provide supporting documentation for proof of identity, residency and income.*

a. What forms of supporting documentation are accepted? Please submit all that apply.

-A copy of your Driver's License or State Issued Identification (Front & Back Copy).

-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

22. 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 1-877-557-2672.

23. 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.

24. 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, income or residency, you will be asked for additional documentation.

a. What forms of supporting documentation are accepted? Please submit all that apply.

- A copy of your Driver's License or State Issued Identification (Front & Back Copy).
- 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

25. How does Instant Decision work and do I have to submit any additional information to the program after my application has been approved?

Patients are temporarily approved if they pass the automated check for income, residency, and identity. Approved patients will have 30 days to submit an LLS Diagnosis Verification form signed by their treating physician. If the Diagnosis Verification Form is not submitted by the 30-day deadline, the application and award will be discontinued.*

Patients who do not pass the income check will not be temporarily approved and **must submit supporting documentation within the 30-day deadline.*

26. 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.

27. 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.

28. 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.

29. 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.

30. 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 use the Quick Search Tool at www.LLS.org/copay. This tool allows you to find out about the current status of your application, award coverage period, award balances, claim submissions, and payment details without logging into the portal. You can also call and speak with a Co-Pay Intake Specialist at 1-877-557-2672.



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

LLS allows all applicants 30 days to submit a completed application. Even if the website says fully subscribed, you should continue to fill out the application and submit it.

32. 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.

33. How long does it take to know if I am approved for assistance from the program?

You will receive a decision instantly upon completion of application.

- *If you apply online, a notification will appear on the screen, letting you know if the application is approved or denied or if you need to submit additional information.*
- *If applying over the phone, the LLS Intake Specialist will tell you if the application is approved or denied, or if you need to submit additional information*

34. 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.

The best way to get real time updates on the status of your application is to use the Quick Search Tool at www.LLS.org/copay. This tool allows you to find out about the current status of your application, award coverage period, award balances, claim submissions, and payment details without logging into the portal.

35. How long do I wait before I can begin submitting eligible claims for payment?

Approved patients, their physicians, and pharmacies are eligible to begin submitting claims immediately. Claims can be uploaded via the online portal or you can use the pharmacy card embedded on your approval letter.

36. 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. You can also visit our website, www.LLS.org/copay, to learn more about covered expenses and how to submit for payment or reimbursement.



37. I applied over the phone and lost my approval letter. Am I able to sign up for the portal to access my award information?

Yes. You can register for the portal and access your award information even if you applied over the phone.

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

The best way to get real time updates on your award balance is to use the Quick Search Tool at www.LLS.org/copay. This tool allows you to find out about the current status of your application, award coverage period, award balances, claim submissions, and payment details without logging into the portal.

You can also check your award balance by calling the toll-free number, 877-557-2672, Monday through Friday 8:30AM to 5:00PM ET. Your award balance is also available on the portal.

39. 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.

40. 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.

41. 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.