

Let's Talk Insurance



Medicaid ends the month of your
19th Birthday

If you are on your parents'
insurance, most plans can keep
you covered up to **age 26**

When seeking employment,
insurance coverage, especially
health insurance, is often a key
factor in choosing a job.

Importance of insurance coverage when seeking employment:

1. Financial Security and Peace of Mind:

Protection from Unexpected Costs:

- Health insurance helps protect employees from the financial burden of unexpected medical expenses, allowing them to access necessary care without the fear of crippling debt.

Access to Quality Healthcare:

- Insurance coverage ensures access to quality medical care, leading to better health outcomes and a higher quality of life.

Reduced Financial Strain:

- Knowing that medical expenses are covered can alleviate financial stress and allow individuals to focus on other aspects of their lives.



2. A Key Factor in Job Decisions:

Employee Preference:

- Many employees prioritize health insurance when deciding to accept a job, with surveys showing that a large percentage consider it a "very important" factor.

Job Satisfaction:

- Having access to comprehensive health benefits can contribute to higher job satisfaction and employee retention.

Competitive Advantage:

- Employers who offer strong insurance packages are often seen as more desirable employers, attracting and retaining top talent.

3. Beyond Health Insurance:

Other Types of Insurance:

- Beyond health insurance, other types of insurance, like life insurance and disability insurance, can provide valuable financial security and peace of mind, especially for families.

Understanding Coverage:

- It's crucial to understand the types of insurance offered by employers and how they work to ensure you have adequate coverage and can make informed decisions.

Employer-Sponsored Insurance:

- Employer-sponsored insurance is often a more affordable and efficient way to obtain coverage, with employers often sharing the cost of premiums and offering tax advantages.



What is a deductible?

- The amount of money you pay out of pocket for certain covered health care services before your health plan starts to pay.
- Example:
 - You have a health insurance policy with a \$1,000 deductible and you receive a medical bill for \$2,000.
 - You would be responsible for paying the first \$1,000 and your insurance would cover the remaining \$1,000.

What is a copay?

A fixed amount you pay for a covered health care service, usually at the time of service.

A standard part of many health insurance plans

How copays work:

- You pay your copay after you've paid your deductible.
- The amount of your copay can vary depending on the type of service and the provider.
- For example, a copay for a doctor's office visit might be lower than a copay for a prescription or lab test.
- Copays are usually paid at the time of service, such as at the doctor's office.

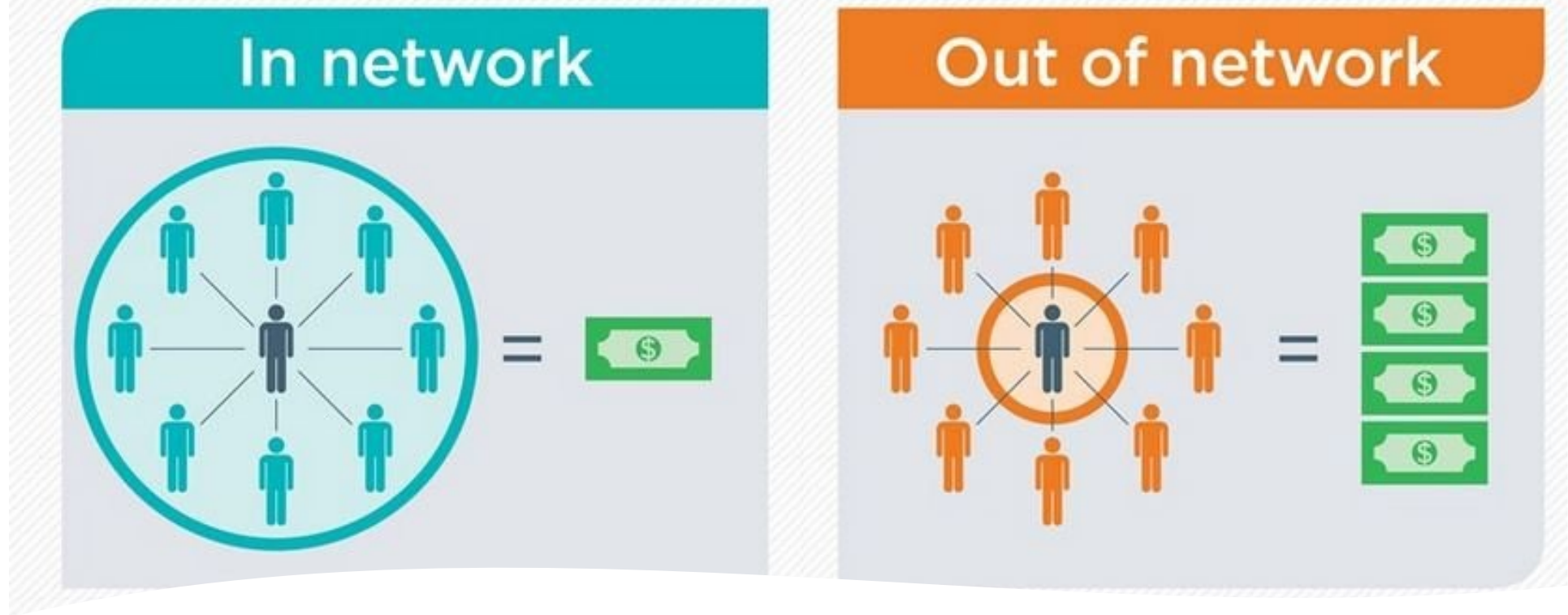
When do copays apply?



Copays apply to many services, including doctor visits, prescriptions, physical therapy, occupational therapy, speech therapy, and emergency room visits.



Some services may be covered at no additional cost, such as annual wellness exams.



In-network vs. out-of- network

- The distinction between in-network and out-of-network services can affect copayments. In-network providers have lower copayments.

What are Pharmacy Benefits?

A pharmacy benefit covers prescription medications that patients can self-administer at home. Typically with a co-pay.

The key difference is that DME providers often focus on more complex medical devices requiring extensive patient education and support, whereas pharmacies primarily dispense medications with less in-depth device training involved

**What happens if I
find myself without
Insurance?**

Lilly Cares Patient Assistance Program

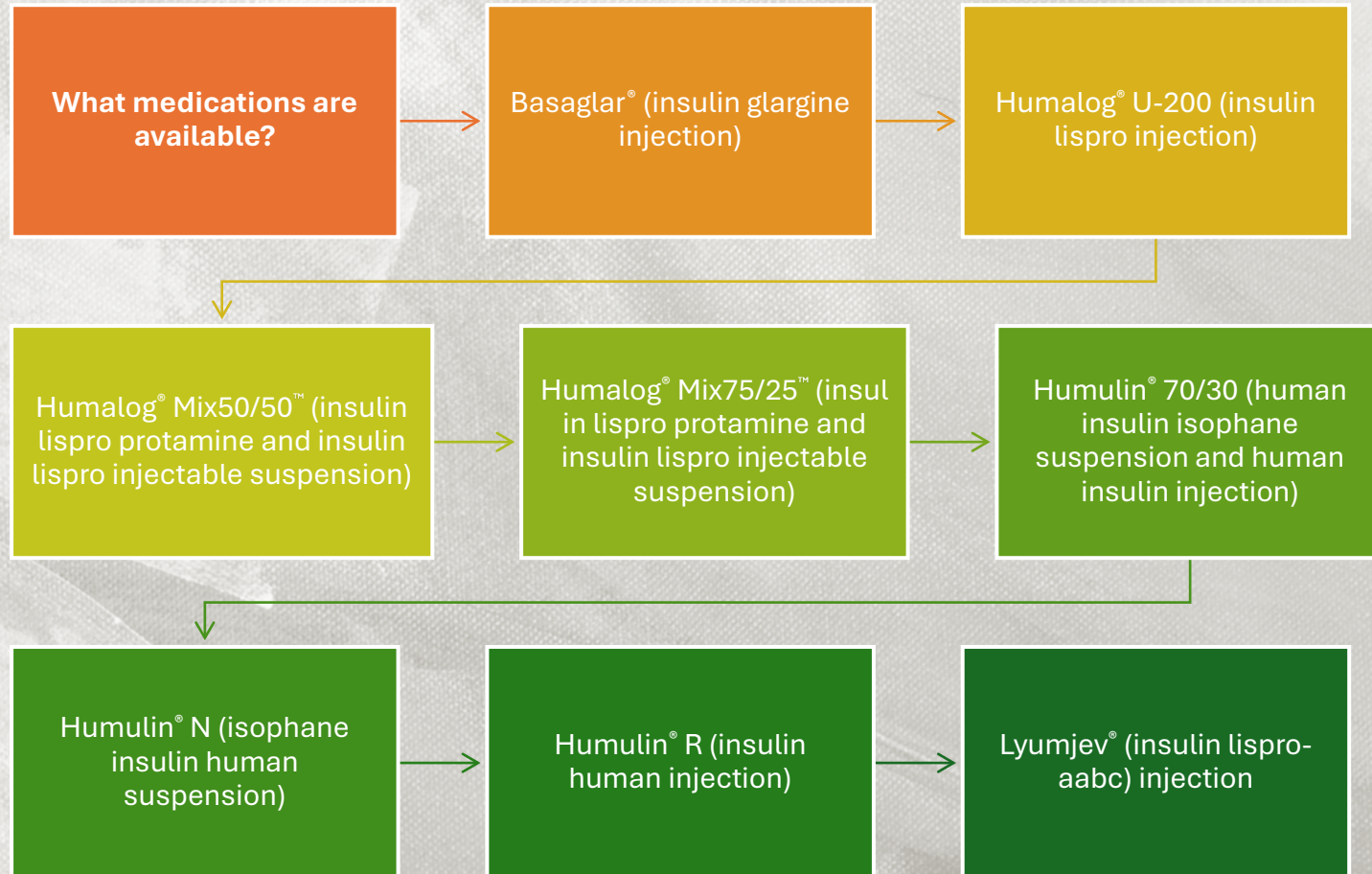
Lilly Cares Patient Assistance Program

- Helping patients with financial need receive their prescribed Eli Lilly and Company (Lilly) medications at no cost or low cost

You may be eligible for the Lilly Cares Program if:

- You are a permanent resident of the United States (inclusive of Puerto Rico and the U.S. Virgin Islands).
- Your healthcare provider has prescribed a medication offered through Lilly Cares.
- The following applies to you with regard to your insurance coverage: You are not enrolled in Medicaid, full Low Income Subsidy (LIS, “Extra Help”) or Veterans (VA) Benefits
- For all Medications, you do not have an insurance plan or third party that requires you to apply to the Lilly Cares Program as a condition, requirement, or prerequisite for coverage of specific Eli Lilly and Company medications. Additional information on such ineligible programs, often referred to as alternative funding programs, for-profit patient advocacy programs, or specialty cost-containment networks (collectively known as "AFPs"), is provided below*.
- You meet the insurance requirements for the medication for which you are applying. Insurance requirements are listed below for each Medication Group.
- You meet the household income guidelines for the Program.

Lilly Cares Patient Assistance Program



Lilly Cares Patient Assistance Program

- How do you apply?
 - You can complete an online application. Choosing to use the online application reduces paperwork and potential for delays.
- You can Print an application off of the website
 - <https://www.lillycares.com/how-to-apply>
- Lilly Insulin is \$35 or Less a Month: [Get your \\$35 savings card here.](#)
- **An automatic \$35 max out-of-pocket monthly cost** for people with commercial insurance at the majority of retail pharmacies
- An easy-to-download savings card that provides a **\$35 max out-of-pocket monthly cost for people who are uninsured**, or need to use a non-participating retail pharmacy
 - <https://www.lilly.com/resources/insulin-affordability>

Novo Nordisk Patient Assistance Program (PAP)

- The Patient Assistance Program provides medication at no cost to those who qualify.
- Can not be mailed to home address. Must be mailed to MD's office.
 - Many Providers do not accept.
- Who can participate in the Patient Assistance Program?
 - Be a US citizen or legal resident
 - Have a total household income that is at or below 400% of the federal poverty level (FPL). Visit the [NeedyMeds website](#), which lists the current FPL guidelines
 - Have Medicare or no insurance (Note: If you have private or commercial insurance, you are not eligible for the PAP)
 - Not be enrolled in or qualify for any other federal, state, or government program such as Medicaid, Low Income Subsidy, or Veterans Affairs (VA) Benefits
- If you are eligible for Medicaid, you must sign the Patient Declaration section of the latest version of the PAP application stating that you are not enrolled in, plan to enroll in, or are eligible for Medicaid or Medicare Extra Help/LIS (proof of denial must be submitted if requested)

Novo Nordisk Patient Assistance Program (PAP)

What medications are available?

RYBELSUS® (semaglutide) tablets

Xultophy® 100/3.6 (insulin degludec & liraglutide injection) 100 U/mL & 3.6 mg/mL

Fiasp® (insulin aspart) injection 100 U/mL

Novolin® (human insulin [rDNA origin] injection) 100 U/mL

NovoLog® (insulin aspart) injection 100 U/mL

NovoLog® Mix 70/30 (insulin aspart protamine and insulin aspart injectable suspension) 100 U/mL

Tresiba® (insulin degludec) injection 100 U/mL, 200 U/mL

NovoPen® Echo

Disposable Needles (only available for FlexPen®, FlexTouch®, and Xultophy® 100/3.6)

Zegalogue® (dasiglucagon) injection 0.6 mg/0.6 mL

Novo Nordisk Patient Assistance Program (PAP)

- How do you apply?
 - Applying online is a step-by-step process that tells you what to do next. However, you can also apply by paper. Just see the “How to apply” section on this page.
 - <https://www.novocare.com/diabetes/help-with-costs/pap.html>