



## Pharmaceutical Patient Assistance Program Frequently Asked Questions - FAQs

- **How does the program work?**
  - An application must be completed by the applicant **and** the licensed prescriber and submitted by mail or fax.
  - If the applicant is eligible under the Nestlé HealthScience guidelines, they will be enrolled for a 12-month time period. Medicare enrollees will only be enrolled until the end of the calendar year. Once the application is approved, a 90-day supply of the requested medication(s) or device(s) will be shipped to the applicant's licensed prescriber for dispensing. If approved, there is no cost for any of the medications on this program.
  - Any drug provided to an eligible applicant under this program will be free of charge. There is no purchase requirement associated with receiving assistance under this program.
  
- **How can I get an application?**
  - The application is available to download on the website <https://www.nestlehealthscience.us/patient-assistance-program> or contact us at +1 855- 210-6228 and request an application be mailed, faxed, or emailed to you.
  
- **What paperwork needs to be sent with the signed application?**
  - A valid prescription written for a three-month supply of the medication(s) from the licensed prescriber who signed the application.
  - Proof of gross monthly household income.
  - A signed notarized Power of Attorney (POA) for signatures other than the applicants' signature, if applicable.
  - A denial letter from the Medicare Extra Help Program, if the patients' medications are reimbursed under a Medicare Part D Prescription Drug Program with income below 150% of the Federal Poverty Level (FPL), if applicable.
  
- **Where can the medication(s) be shipped?**
  - Your medication must be shipped to your physicians' office.
  - If the physician will not accept the medication, please contact us at +1 855-210-6228 and we will work with you to determine if there is an approved pharmacy in your area that we can work with to have your medication delivered to. We will need a completed form from your physician allowing the pharmacy to dispense the medication on their behalf and a completed form from the receiving pharmacy stating they will receive and dispense the medication at no cost to the applicant.
  - **Note: Currently, the medication cannot be shipped to the applicants' residence.**
  
- **Can copies be made of the application?**
  - You are welcome to make copies of the front page of the application as long as none of the information has changed. However, we must have new signatures and a new prescription with current dates for each application.
  
- **How do I submit my application?**
  - You are welcome to fax the application to 1-877-867-1831, applications faxed must be faxed from the physicians' office with their fax banner attached.
  - You are welcome to mail the application to:
    - Zenpep and Viokace Patient Assistance Program PO
    - BOX 66520
    - St. Louis, MO 63166



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- **How soon can I check the status of my application?**
  - Contact the Nestlé Health Science Zenpep and Viokace Patient Assistance Program at +1 855-210-6228. Please allow 5-7 business days from the date the application was submitted.
  
- **If approved, how long am I eligible for?**
  - Non-Medicare enrollees are approved for 12 months of eligibility.
  - Medicare enrollees are approved until the end of the calendar year.
  
- **If I am denied, can I appeal the decision?**
  - Yes, you can appeal the decision:
  - Each appeal must include the following documentation prior to review:
    - Physician Letter of necessity
    - Detailed budget/expense statement from patient, with household breakdown
    - Proof of Out-of-Pocket Cost
    - If applicable, denial letter for the Medicare Extra Help Program
  
- **How much medication will I receive?**
  - You will receive a 30-day or 90-day supply of the medication.
  
- **Can my doctor write for refills?**
  - No, your physician will need to fax in a prescription every 3 months or call into our call center and request a reorder.
  
- **How do I reorder my medication?**
  - Once approved, you or your physician can fax the reorder to 1-877-867-1831 or call +1 855- 210-6228 and request a refill via our call center.
  
- **When will I need to re-apply?**
  - You will need to reapply about 30 days from your application expiration date; we will send you a reminder letter in the mail when it is time to reapply.
  - If you receive Medicare, you will need to reapply after open enrollment annually. A reminder letter will go out in advance of the Medicare patient's annual enrollment for the new calendar year.
  
- **How long will it take for me to receive my medication?**
  - Once the application is approved it takes approximately 10 business days to be delivered to your physician's office.
  - If your physician does not accept medication deliveries, the time it takes medications to be delivered to a pharmacy is subject to change.
  
- **What should I do if I have a change in dose?**
  - If you have a change in dose your licensed prescriber must write a new prescription and indicate "Dose Change" on the revised prescription. Please make sure your name, date of birth, and address is clearly written on the prescription. Have your licensed prescriber fax the revised prescription to 1-877-867-1831.
  - Alternatively, your licensed prescriber can verbally authorize a Dosage Change by calling the following number: 1-855-210-6228.



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- **My doctor is away, or I had to change doctors. Can I have another doctor write my prescription?**
  - We will need an updated Section 1 of the application and a new physician signature page for the physician and prescription.
  
- **Guidelines for gross monthly household income**
  - **What is gross monthly household income?**
    - This is the total amount of money you receive in one month's time before any deductions are taken out of your check(s). For the purposes of this program, gross monthly income is defined as the following: (1) Monetary compensation for services, including wages, salary, commissions, or fees; (2) net income from non-farm self-employment; (3) net income from farm self-employment; (4) Social Security; (5) dividends or interest on savings or bonds or income from estates or trusts; (6) net rental income; (7) public assistance or welfare payments; (8) unemployment compensation; (9) government civilian employee or military retirement or veteran's payments; (10) private pensions or annuities; (11) alimony or child support payments; (12) regular contributions from persons not living in the household; (13) net royalties; (14) other cash income, including cash amounts received or withdrawn from any source including savings, investments, trust accounts, and other resources.
  
- **Where do I go for Medical Nutrition support?**
  - Please call +1 800-422-2752 or visit <https://www.nestlemedicalhub.com/reimbursement>
  
- **Quick Contacts**
  - Phone Number: +1 855-210-6228
  - Fax Number: +1 877-867-1831
  - Website: <https://www.nestlehealthscience.us/patient-assistance-program>
  - Mail: Zenpep and Viokace Patient Assistance Program PO  
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