

PSYCHIATRY | NEUROLOGY

Last reviewed 5-12-22

Drug Name • Brand bolded if generic not available	Cost	Copay Card • Commercial insurance or cash payers • Government insurance not eligible, i.e. Medicaid, Medicare, VA, Tricare (exclusions apply)	Alternative Access • Cost savings through alternative pharmacy	Patient Assistance Program (PAP) * ** • Fill out patient and provider sections and submit • Patient may need assistance in determining financial information needed • Brand name medications ONLY	Manufacturer Website • Coupons
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ADD AND ADHD MEDICATIONS

Atomoxetine (Strattera)	\$350-\$450	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Reside in U.S. or U.S. territory</li> <li>Uninsured or Medicare Part D patients</li> <li>Household income is &lt; 300% of the FPL</li> </ul>	<a href="http://LillyCares.com">LillyCares.com</a>
Guanfacine ER (Intuniv)	\$200-\$300	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S.</li> <li>Uninsured or insufficient coverage</li> <li>Household income &lt; 500% of the FPL</li> </ul>	<a href="http://Takeda.com">Takeda.com</a> Corporate Responsibility > Patient Assistance
Lisdexamfetamine ( <b>Vyvanse</b> )	\$400-\$450	Eligible patients pay minimum of \$30 (up to \$60 off) per prescription	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S.</li> <li>Uninsured or insufficient coverage</li> <li>Household income &lt; 500% of the FPL</li> <li>Recently lost job/experiencing financial hardship</li> </ul>	<a href="http://Takeda.com">Takeda.com</a> Corporate Responsibility > Patient Assistance
Methylphenidate (Concerta)	\$50-\$100	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S.</li> <li>Uninsured or Medicare Part D (if patient spends ≥ 4% of their gross annual income on prescription drugs)</li> <li>Income requirement (see <a href="http://Jjpf.org">Jjpf.org</a> for details)</li> </ul>	<a href="http://Janssencarepath.com">Janssencarepath.com</a> Paying for Concerta > View All Programs

ANTICONVULSANTS

Brivaracetam ( <b>Briivact</b> )	~\$1,400	<ul style="list-style-type: none"> <li>Commercially patients pay minimum of \$10 per 30 days</li> <li>Maximum annual discount of \$1,300</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S. or Puerto Rico</li> <li>Uninsured or insured patients if no coverage of requested medication (must submit denial letter)</li> <li>Household income &lt; 300% of the FPL</li> </ul>	<a href="http://Briivact.com">Briivact.com</a> Savings & Support > Savings Card
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Carbamazepine (Tegretol)	\$40-\$70	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Carbamazepine ER tablets (Tegretol-XR)	\$100-\$150	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Carbamazepine ER capsules ( <b>Carbatrol</b> , <b>Equetro</b> )	\$100-\$450	<ul style="list-style-type: none"> <li>• Commercially insured patients can pay minimum of \$20</li> <li>• Discount card pays up to \$100 off prescription copay (<b>Equetro only</b>)</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<p><b>Takeda</b></p> <ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Uninsured or insufficient coverage</li> <li>• Household income &lt; 500% of the FPL</li> </ul> <p><b>Equetro</b></p> <ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Meet financial requirements and approval as outlined at <a href="http://Patients-PatientSupport.equetro.com">Patients - Patient Support (equetro.com)</a></li> </ul>	<p><a href="http://Takeda.com">Takeda.com</a> Corporate Responsibility &gt; Patient Assistance</p> <p><a href="http://Equetro.com">Equetro.com</a> Patient support &gt; Patient Assistance Program Application</p>
Divalproex DR (Depakote DR)	\$150-\$250	<ul style="list-style-type: none"> <li>• Commercially insured patients can pay minimum of \$5 per 30 days</li> <li>• Maximum discount of \$100/month</li> <li>• Depakote, Depakote ER or sprinkles</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must be U.S. resident</li> <li>• Limited or no health insurance coverage</li> <li>• Income requirement (see <a href="http://Abbvie.com">Abbvie.com</a> for details)</li> </ul>	<p><a href="http://Abbvie.com">Abbvie.com</a> Patient &gt; myAbbvie Assist &gt; Patient Assistance &gt; Program Qualification</p>
Gabapentin (Neurontin)	\$30-\$60	<p><b>Gralise (Gabapentin ER) only</b></p> <ul style="list-style-type: none"> <li>• Commercially insured can pay minimum of \$28 per 30 days</li> <li>• Maximum of 24 uses per year, no tablet maximum</li> <li>• May be responsible for copayment above the maximum savings benefit</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<p><b>Pfizer Savings Program</b></p> <ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Must have no prescription coverage, or not enough coverage, to pay for medication</li> <li>• Household income &lt; 400% of the FPL</li> </ul>	<p><a href="http://PfizerSavingsProgram.com">Pfizer Savings Program</a> (estimated 36%-75% saving) Learn About Programs</p> <p><a href="http://Gralise.com">Gralise.com</a></p>

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Lacosamide (Vimpat)	~\$1,200	<ul style="list-style-type: none"> <li>Commercially insured patients can pay minimum of \$20 per 30 days</li> <li>Maximum annual discount of \$1,300</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S. or Puerto Rico</li> <li>Uninsured or insured patients if no coverage of requested medication (must submit denial letter)</li> <li>Household income &lt; 300% of the FPL</li> </ul>	<a href="http://Vimpat.com">Vimpat.com</a> Save on Vimpat > Savings Card
Lamotrigine (Lamictal)	\$30-\$150	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S. or Puerto Rico</li> <li>Uninsured or Medicare Part D (if ≥ \$600 out-of-pocket prescription drug expenses in last year)</li> <li>Income requirement (see <a href="http://GSKForYou.com">GSKForYou.com</a> for details)</li> </ul>	<a href="http://GSKForYou.com">GSKForYou.com</a>
Lamotrigine XR (Lamictal XR)	\$900-\$1,500	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S. or Puerto Rico</li> <li>Uninsured or Medicare Part D (if ≥ \$600 out-of-pocket prescription drug expenses in last year)</li> <li>Income requirement (see <a href="http://GSKForYou.com">GSKForYou.com</a> for details)</li> </ul>	<a href="http://GSKForYou.com">GSKForYou.com</a>
Levetiracetam (Keppra)	\$50-\$150	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Oxcarbazepine (Trileptal)	\$50-\$150	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Oxcarbazepine ER (Oxtellar XR)	~\$1,400	Commercially insured patients save up to \$250 per prescription	<a href="http://GoodRx.com">GoodRx.com</a>	Eligibility determined based on financial and insurance information provided on enrollment form	<a href="http://Oxtellarxr.com">Oxtellarxr.com</a> Menu > Payment Support & Resources > Coverage and Payment Assistance

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Phenytoin ER (Dilantin)	\$40-\$60	<ul style="list-style-type: none"> <li>Commercially insured patients can save up to \$20 per 30 days</li> <li>Maximum annual discount of \$240</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S. or U.S. territory</li> <li>Must have no prescription coverage, or not enough coverage, to pay for medication</li> <li>Household income &lt; 400% of the FPL</li> </ul>	<a href="http://Dilantin.com">Dilantin.com</a> Click on Savings tab
Primidone (Mysoline)	\$30-\$50	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Topiramate (Topamax)	\$20-\$50	<ul style="list-style-type: none"> <li>Commercially insured patients can save up to \$150 per 30 days</li> <li>Maximum annual discount of \$1,800</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	<a href="http://Janssencarepath.com/patient/topamax">Janssencarepath.com/patient/topamax</a> Select insurance coverage for copayment card or additional resources
ANTIDEPRESSANTS (MISCELLANEOUS)					
Bupropion ER/SR/XL (Wellbutrin)	\$50-\$100	<ul style="list-style-type: none"> <li>Commercially insured patients pay minimum of \$5 per 30 days</li> <li>Maximum of 12 fills</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	<a href="http://Wellbutrinxl.com">Wellbutrinxl.com</a> Savings & Support > copay savings, free home delivery, insurance assistance for additional resources
Buspirone (Buspar)	~\$20	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Mirtazapine (Remeron)	\$40-\$50	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Trazodone (Desyrel)	\$15-\$20	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Vortioxetine ( <b>Trintellix</b> )	~\$500	<ul style="list-style-type: none"> <li>Commercially insured patients pay minimum of \$10 per 30 days</li> <li>Maximum monthly discount of \$100</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S.</li> <li>Uninsured or insufficient coverage</li> <li>Household income &lt; 500% of the FPL</li> </ul>	<a href="http://Takeda.com">Takeda.com</a> Corporate Responsibility > Patient Assistance

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ANTIPARKINSON AGENTS

Amantadine (Symmetrel)	\$60-\$70	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Carbidopa/levodopa (Sinemet)	\$40-\$60	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
<b>Carbidopa/levodopa ER (Rytary)</b>	\$350-\$400	<ul style="list-style-type: none"> <li>• Commercially insured patients pay no more than \$25/month</li> <li>• Maximum \$100 benefit per prescription fill, patient responsible for additional cost</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S. or Puerto Rico</li> <li>• Uninsured, insufficient coverage or Medicare Part D if spent ≥ 3% annual income on prescription drugs</li> <li>• Household income meeting eligibility requirement</li> </ul>	<a href="http://Rytary.com">Rytary.com</a> MyRytary Program
Pramipexole (Mirapex)	\$40-\$70	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Ropinirole (Requip)	\$40-\$60	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Trihexyphenidyl (Artane)	~\$15	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A

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ANTIPSYCHOTICS

Aripiprazole (Abilify)	\$650-\$750	Commercially insured patients pay as little as \$5 per month	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	<a href="http://Abilify.com">Abilify.com</a>
Aripiprazole injection ( <b>Aristada</b> )	~\$3,300	Commercially insured patients pay as little as \$10 per month	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S. and be ≥ 18 years of age</li> <li>• Uninsured or insurance coverage denied for product</li> <li>• Income requirement</li> </ul>	<a href="#">Aristada Care Support</a> Co-pay and savings program and Patient Assistance Program
Aripiprazole injection ( <b>Abilify Maintena</b> )	~\$3,000	<ul style="list-style-type: none"> <li>• Commercially insured patients pay as little as \$10 per month</li> <li>• Maximum benefit \$8,000 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Uninsured or underinsured patients</li> <li>• Income requirement</li> </ul>	<a href="#">Otsuka Patient Assistance</a>  <a href="#">Support &amp; Savings for Abilify Maintena (Aripiprazole)</a>
Brexpiprazole ( <b>Rexulti</b> )	~\$1,500	<ul style="list-style-type: none"> <li>• Commercially insured patients pay \$0 for two months</li> <li>• Pay minimum of \$15 on refills</li> <li>• Maximum benefit \$5,800 per year, maximum of \$100 benefit per 30 days</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Uninsured or underinsured patients</li> <li>• Income requirement</li> </ul>	<a href="#">Otsuka Patient Assistance</a>  <a href="#">Rexulti (Brexpiprazole)   Savings Card Information</a> Savings & Cost > Rexulti Savings Card
Cariprazine ( <b>Vraylar</b> )	~\$1,500	<ul style="list-style-type: none"> <li>• Commercially insured patients pay \$0 for two months</li> <li>• Pay minimum of \$5 on monthly refills</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in the U.S.</li> <li>• Uninsured or limited insurance</li> <li>• Demonstrate financial need based on income and projected out-of-pocket medical expenses</li> </ul>	<a href="#">Abbvie</a> Patients > Check Eligibility > Allergan Patient Assistance  <a href="#">Vraylar Savings Card</a>

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Haloperidol Injection (Haldol)	~\$100-\$200	N/A	N/A	<ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Uninsured or Medicare Part D (if patient spends ≥ 4% of their gross annual income on prescription drugs)</li> <li>• Income requirement (see <a href="http://Jjpaf.org">Jjpaf.org</a> for details)</li> </ul>	<a href="#">Johnson &amp; Johnson Patient Assistance Foundation</a> How to Apply
Lithium ER	\$20-\$50	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Lurasidone (Latuda)	~\$1,600	<ul style="list-style-type: none"> <li>• Commercially insured patients pay as little as \$0 for the first month and \$10 for refills after that</li> <li>• Maximum benefit \$400 per month</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	<a href="#">Latuda Copay Savings and Support</a>
Olanzapine (Zyprexa)	\$100-\$300	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Reside in U.S. or U.S. territory</li> <li>• Uninsured or Medicare Part D patients</li> <li>• Household income is &lt; 300% of the FPL</li> </ul>	<a href="http://LillyCares.com">LillyCares.com</a> Zyprexa and ODT Zydis both available
Olanzapine injection ( <b>Zyprexa Relprevv</b> )	~\$1,700	N/A	N/A	<ul style="list-style-type: none"> <li>• Reside in U.S. or U.S. territory</li> <li>• Uninsured or Medicare Part D patients</li> <li>• Household income is &lt; 500% of the FPL</li> </ul>	<a href="http://LillyCares.com">LillyCares.com</a>
Paliperidone injection ( <b>Invega Sustenna</b> )	~\$2,400	<ul style="list-style-type: none"> <li>• Commercially insured patients pay \$10 per dose</li> <li>• Maximum benefit \$8,000 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Uninsured or Medicare Part D (if patient spends ≥ 4% of their gross annual income on prescription drugs)</li> <li>Income requirement (see <a href="http://Jjpaf.org">Jjpaf.org</a> for details)</li> </ul>	<a href="#">Johnson &amp; Johnson Patient Assistance Foundation</a> How to Apply  <a href="#">Paying for Invega Sustenna - Cost Support   Janssen CarePath</a> Patient copay savings

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Paliperidone injection <b>(Invega Trinza)</b>	~\$9,000	<ul style="list-style-type: none"> <li>Commercially insured patients pay \$10 per dose</li> <li>Maximum benefit \$8,000 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S.</li> <li>Uninsured or Medicare Part D (if patient spends ≥ 4% of their gross annual income on prescription drugs)</li> <li>Income requirement (see <a href="http://Jjpaf.org">Jjpaf.org</a> for details)</li> </ul>	<a href="#">Johnson &amp; Johnson Patient Assistance Foundation</a> How to Apply  <a href="#">Paying for Invega Trinza - Cost Support   Janssen CarePath</a> Patient copay savings
Quetiapine (Seroquel)	\$50-\$150	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Quetiapine XR (Seroquel XR)	\$200-\$250	<ul style="list-style-type: none"> <li>Commercially insured patients pay minimum of \$3 per month</li> <li>Maximum benefit of \$185 savings per month</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	<a href="#">Coupon and Savings for Health Care Professionals   Seroquel XR</a> Copay savings card
Risperidone (Risperdal)	\$50-\$100	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Risperidone Injection <b>(Risperdal Consta)</b>	~\$1,300	<ul style="list-style-type: none"> <li>Commercially insured patients pay \$10 per dose</li> <li>Maximum benefit \$5,500 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S.</li> <li>Uninsured or Medicare Part D (if patient spends ≥ 4% of their gross annual income on prescription drugs)</li> <li>Income requirement (see <a href="http://Jjpaf.org">Jjpaf.org</a> for details)</li> </ul>	<a href="#">Johnson &amp; Johnson Patient Assistance Foundation</a> How to Apply  <a href="#">Paying for Risperdal Consta - Cost Support   Janssen CarePath</a> Copay savings card
Zirprasideone (Geodon)	\$125-\$200	<ul style="list-style-type: none"> <li>Commercially insured patients pay little as \$4 per month</li> <li>Maximum benefit \$250 per month</li> <li>Maximum benefit \$3,000 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S.</li> <li>Must have no prescription coverage, or not enough coverage, to pay for medication</li> <li>Household income &lt; 400% of the FPL</li> </ul>	<a href="#">Pfizer Savings Program</a> (estimated 36%-75% saving) Learn About Programs  <a href="#">Savings Card   Geodon (Ziprasidone HCl)</a> Copay savings card



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Zonisamide (Zonegran)	\$50-\$150	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRI)					
Citalopram (Celexa)	~\$20	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Escitalopram (Lexapro)	~\$35	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S</li> <li>• Must have limited or no health insurance coverage</li> <li>• Household income requirements as outlined at <a href="http://Abbvie.com">Abbvie.com</a></li> </ul>	<a href="#">Lexapro (Escitalopram) tablet - Find my medicine - Patient Assistance - Patients   AbbVie</a> Patient Assistance Program
Fluoxetine (Prozac)	~\$20	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Reside in U.S. or U.S. territory</li> <li>• Uninsured or Medicare Part D patients</li> <li>• Household income is &lt; 300% of the FPL</li> </ul>	<a href="http://LillyCares.com">LillyCares.com</a>
Paroxetine (Paxil)	~\$25	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Sertraline (Zoloft)	\$20-\$40	<ul style="list-style-type: none"> <li>• Commercially insured or uninsured patients pay as little as \$4 per month</li> <li>• Maximum benefit \$150 per month</li> <li>• Maximum benefit \$1,800 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S.</li> <li>• Must have no prescription coverage, or not enough coverage, to pay for medication</li> <li>• Household income &lt; 400% of the FPL</li> </ul>	<a href="#">Your Savings   Zoloft</a> Copay Savings Card

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SEROTONIN AND NOREPINEPHRINE REUPTAKE INHIBITORS (SNRI)

Desvenlafaxine (Pristiq)	\$150-\$200	<ul style="list-style-type: none"> <li>Commercially insured or uninsured patients pay as little as \$4 per month</li> <li>Maximum benefit \$90 per month</li> <li>Maximum benefit \$1,080 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Must reside in U.S. or U.S. territory</li> <li>Must have no prescription coverage, or not enough coverage, to pay for medication</li> <li>Household income &lt; 400% of the FPL</li> </ul>	Pfizer (PAP) <a href="#">Learn About Programs</a>  <a href="#">Pfizer Savings Program</a> (estimated 36-75% savings) Learn About Programs  <a href="#">Savings Card   Pristiq (Desvenlafaxine)</a> Copay savings card
Duloxetine (Cymbalta)	\$75-\$150	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>Reside in U.S. or U.S. territory</li> <li>Uninsured or Medicare Part D patients</li> <li>Household income is &lt; 300% of the FPL</li> </ul>	<a href="http://LillyCares.com">LillyCares.com</a>
Venlafaxine ER (Effexor XR)	\$50-\$150	<ul style="list-style-type: none"> <li>Commercially insured patients pay minimum of \$4 per month</li> <li>Maximum benefit of \$1,800 per year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	<a href="#">Safety Info   Effexor XR (Venlafaxine HCl)</a> Copay Savings Card

TRICYCLIC ANTIDEPRESSANTS (TCA)

Amitriptyline (Elavil)	~\$15	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Clomipramine (Anafranil)	\$100-\$200	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Nortriptyline (Pamelor)	~\$15	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A

PSYCHIATRY | NEUROLOGY

Last reviewed 5-12-22

Drug Name • Brand bolded if generic not available	Cost	Copay Card • Commercial insurance or cash payers • Government insurance not eligible, i.e. Medicaid, Medicare, VA, Tricare (exclusions apply)	Alternative Access • Cost savings through alternative pharmacy	Patient Assistance Program (PAP) * ** • Fill out patient and provider sections and submit • Patient may need assistance in determining financial information needed • Brand name medications ONLY	Manufacturer Website • Coupons
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MISCELLANEOUS

Donepezil (Aricept)	\$100-\$250	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Memantine (Namenda)	\$80-\$200	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in the U.S.</li> <li>• Uninsured or limited insurance</li> <li>• Demonstrate financial need based on income and projected out-of-pocket medical expenses</li> </ul>	<a href="#">Namenda Patient Assistance</a> Patient Assistance Website
Memantine ER ( <b>Namenda XR</b> )	\$300-\$500	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in the U.S.</li> <li>• Uninsured or limited insurance</li> <li>• Demonstrate financial need based on income and projected out-of-pocket medical expenses</li> </ul>	<a href="#">Namenda XR Patient Assistance</a> Patient Assistance Website
Nicotine replacement therapies	\$40-\$80	N/A	<a href="http://GoodRx.com">GoodRx.com</a>	N/A	N/A
Varenacline (Chantix)	~\$350-500	<ul style="list-style-type: none"> <li>• Commercially insured patients pay as little as \$0 per fill</li> <li>• Maximum benefit \$175 per fill</li> <li>• Maximum benefit \$1,050 per year and 6 times per calendar year</li> </ul>	<a href="http://GoodRx.com">GoodRx.com</a>	<ul style="list-style-type: none"> <li>• Must reside in U.S. or U.S. territory</li> <li>• Must have no prescription coverage, or not enough coverage, to pay for medication</li> <li>• Household income &lt; 400% of the FPL</li> </ul>	Pfizer (PAP) <a href="#">Learn About Programs</a> <a href="#">Start Saving on Chantix   Chantix (Varenicline) Site</a> Copay savings cards

\* Most patient assistance programs require income verification by submission of W2 (1040 or 1040Z) federal tax forms, pay stubs or social security  
 \*\* Medication received through patient assistance programs may be sent to patient's home or physician's office depending on program requirements  
 If patient's income or household income is \$0, many patient assistance programs require letter explaining the financial situation and that the patient does not have income.