Information about Prescription Vitamins that are Excluded from the Medicare Prescription Drug Coverage

You indicated that you take a vitamin prescribed by your doctor. The list below is a <u>sample</u> of some of the prescription vitamins that may not be paid for by the Medicare Prescription Drug Coverage. The Medicare Prescription Drug Coverage will probably not pay for any prescription vitamins.

Brand Name	Generic Name
BeroccaTablets	vitamin B combination and vitamin C
Berocca Plus Tablets	vitamin B combination, vitamin C, and iron
Calcijex	vitamin D/calcitriol
Calderol	vitamin D/calcitriol
Calphron	calcium acetate
Cardiotek Rx Tablets	vitamin B combination
Cefol Filmtab	multivitamin with folic acid
Cyanoject	vitamin B12/cyanocobalamin
Diatx	vitamin B combination and vitamin C
Drisdol	vitamin D/ergocalciferol
Eldercaps Capsules	multivitamin with minerals
Folgard	vitamin B combination
Folic Acid	folic acid
FOLTX	vitamin B combination
K-Phos Neutral	phosphorus
Megaton Elixir	vitamin B combination
Mephyton	vitamin K/phytonadione
Nascobal	vitamin B12/cyanocobalamin
Nephplex Rx Tablets	vitamin B combination and vitamin C
Nephrocaps Capsules	vitamin B combination and vitamin C
Nephron FA	vitamin B combination and vitamin C
Niacor	niacin/nicotinic acid
Niaspan	niacin/nicotinic acid
Niferex-150 Forte	multivitamin with iron
PhosLo	calcium acetate
Potaba	PABA/aminobenzoate
Renax	multivitamin with minerals
Rocatrol	vitamin D/calcitriol
Senilezol Liquid	vitamin B combination
Strovite Forte	multivitamin, minerals, and iron
Strovite Plus Caplets	multivitamin and minerals
Theragran Hematinic	multivitamin with iron
Trinsicon capsules	vitamin B12, iron, and intrinsic factor
Vicon Forte Capsules	multivitamin and minerals
Zemplar	paricalcitrol
Zincvit Capsules	multivitamin and minerals

Below are some options that may either reduce the cost or provide coverage for your medication that may be excluded from Medicare Prescription Drug Coverage:

- Generic drugs— If you take the brand-name drug for one of the excluded medications listed above, check with your physician or pharmacist to find out if a generic drug is available. Generic drugs are less expensive than brand-name drugs and can help you save money on medications that are not covered by Medicare Prescription Drug Coverage. A generic drug works like the brand-name drug in dosage, strength, performance and use, and must meet the same quality and safety standards. All generic drugs are reviewed and approved by the U.S. Food and Drug Administration.
- "Enhanced coverage plans" through Medicare Prescription Drug Coverage— Some Medicare Prescription Drug Plans may offer enhanced coverage. Your excluded medication may be paid for under the enhanced coverage. Please note that the premiums (monthly fees paid to the plan) for enhanced coverage plans may be higher than standard coverage plans.
- Pharmaceutical company patient assistance programs—These programs offered by some pharmaceutical companies provide medications at a very low cost based on a person's income and needs. The specific medication you take may or may not be included in a pharmaceutical company patient assistance program. Check with the pharmaceutical company to find out if the excluded medication you take is available as part of their patient assistance program.
- **Pharmaceutical company discount cards**—Prescription cards that offer medications at a discounted price are available to qualified persons. The specific medication you take may or may not be included as part of a pharmaceutical company discount card program. Check with the pharmaceutical company to find out if the excluded medication you take is available as part of their discount card program.
- Other Options—The following programs may pay for some or all of the medications that are excluded from the Medicare Prescription Drug Coverage. If you currently receive prescription benefits or assistance from any of the following programs, you may want to consider checking into whether the program will cover your excluded medications.
 - **O Your State Medicaid Program**
 - o Your State Pharmacy Assistance Program (if available in your state)
 - o CHAMPVA