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Merck Vaccine Patient Assistance Program

For more information please refer to the following link: <http://www.merck.com/merckhelps/vaccines/home.html>

You may be eligible for the program if all three of the following conditions apply:

- You reside in the United States and are age 19 or older
- You have no health insurance coverage (Some examples of health insurance coverage include private insurance, HMOs, PPOs, college health plans, Medicaid, Veterans' assistance, or any other social service agency support.)
- You have an annual household income less than:
 - \$44,680 for individuals
 - \$60,520 for couples or
 - \$92,200 for a family of four

Merck recognizes that sometimes exceptions need to be made based on a patient's individual circumstances. Individuals who do not meet these criteria may still qualify for the vaccine program if the patient has special circumstances of financial and medical hardship.

To participate in the program, patients and their licensed prescribers (e.g., physicians, nurse practitioners and physician assistants) must:

1. Complete and sign an application form
2. Fax completed form to (800) 528-2551 from your provider's office.

The application must be submitted and approved prior to administration of vaccine in order to qualify. Forms will be processed quickly – with a goal of less than 10 minutes – and your provider's office will be notified by phone so that qualifying patients can receive the Merck vaccine during that visit.

A new application will need to be completed and submitted to the Merck Vaccine Patient Assistance Program for eligibility assessment prior to a patient receiving a subsequent dose in a multi-dose series or for another Merck vaccine.

All of Merck's vaccines for adults are available through the program, including:

- **GARDASIL**[®] [Human Papillomavirus Quadrivalent (Types 6, 11, 16, and 18) Vaccine, Recombinant]
- **M-M-R**[®] **II** (Measles, Mumps, and Rubella Virus Vaccine Live)
- **PNEUMOVAX**[®] **23** (Pneumococcal Vaccine Polyvalent)
- **RECOMBIVAX HB**[®] [Hepatitis B Vaccine (Recombinant)]
- **VAQTA**[®] (Hepatitis A Vaccine, Inactivated)
- **VARIVAX**[®] [Varicella Virus Vaccine Live]
- **ZOSTAVAX**[®] [Zoster Vaccine Live]

*Please note this program is not determined or provided by Women's Health Specialists, it is a separate service offered by an outside source not affiliated with our office.

Updated: 7/2013