

TRICOR (fenofibrate)

Pharmaceutical Company Abbott

Program Name Abbott Patient Assistance Foundation

Program Address PO Box 270
Somerville, NJ 08876

Phone Number 1-800-222-6885

Fax Number 1-866-898-1473

Website http://www.abbottpatientassistancefoundation.org/pharmaceutical_products.asp

Eligibility Guidelines

1. Client must not have prescription drug coverage.
2. Client must reside in the United States.
3. Income eligibility is at or below 200% of the FPL.
4. Current proof of income is required for household. Proof of income includes copies one of the following:
 - a. Current pay check stub
 - b. Federal Tax Return (Form 1040 or 1040 EZ) for the prior tax year
 - c. Wages and tax statement (W-2 forms)
 - d. Social Security, Pension, or Railroad Retirement statements (SSA-1099 or similar)
 - e. Statements of interest, dividends, or other income (1099-IND, 1099, 1099-DIV or other forms)
 - f. If the client has no income the doctor must submit on his letterhead a letter stating the client has no income.

There is no rush order and the application takes 5-7 business days to process. The medication would ship out in 7-10 business days.

Documents can be faxed or mailed.

Fax completed Enrollment form (1 page) and income documents to:

1-866-898-1473

OR

Mail completed Enrollment form (1 page) and income documents to:

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