Relying on the Kindness of Strangers for Prescription Drugs

Elliot is a single 59 year-old New Yorker with Post-Polio syndrome, hypertension, chronic depression and a recently diagnosed case of diabetes. Until his conditions interfered with his ability to work full time, Elliot held an administrative position at a university.

Surviving on $865 per month in Social Security Disability, with a $564 per month rent-controlled apartment, Elliot relies on Medicare for his health care, but does not have prescription drug coverage. He depends on a combination of samples from his doctor and pharmaceutical company "compassionate care" programs. If Elliot paid for his medication out of pocket, it would cost him as much as $300 per month, leaving him $1 for food, clothing and other expenses.

"When I was younger I didn't need as much medication. But as I am getting older and my disabilities are changing, I need more medication, different medication. Sometimes the drug that keeps me healthy or keeps my condition from getting worse is expensive, even if it's generic."

Relying on programs and samples that may not always be there is anxiety-producing. "There are many administrative hurdles that have delayed me getting my medication for depression. Without it I become withdrawn, isolated. It's a constant struggle. And my doctor does not always have enough samples of my high blood pressure medication, so I have to worry or think about trying a different medication. It's stressful. You start tampering with medication and you go into a health crisis.

"I feel so much anger and frustration at being caught right in the middle – I'm not young and I'm not old, but my health needs and financial situation are the same as many seniors. There are so many people like me who could benefit from EPIC."

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