Intra-Cellular Therapies Patient Assistance Program (PAP)	
Frequently Asked Questions (FAQs)	
What is the Intra-Cellular Therapies Patient Assistance Program (PAP) for CAPLYTA™ (lumateperone)?	The Intra-Cellular Therapies PAP provides free CAPLYTA medicine to eligible patients with no insurance. You may learn more about the program eligibility by reviewing the program enrollment form and the FAQs below.
Can anyone apply for the PAP?	If you are being treated by a licensed U.S. healthcare provider and have been prescribed CAPLYTA, do not have insurance, live in the U.S. and meet our eligibility criteria, you may apply for the PAP.
What are the specific eligibility criteria for the PAP?	Patients must not have current insurance coverage, must be a U.S citizen or a permanent resident of the U.S., and their income must not exceed three (3) times the Federal Poverty Level (FPL) based on household size. Proof of Income must be demonstrated for enrollment. Additionally, patients must be 18 years or older, and under the age of 65. This program is not available for those living in Puerto Rico.
What documents may I use to verify income?	To participate in the PAP, patients must submit accurate and complete documentation to verify income, such as most recent federal tax returns, W-2 or pay stubs.
Can enrollment in the PAP be backdated to cover previous prescriptions for CAPLYTA?	The PAP eligibility cannot be backdated to cover any previous prescriptions.
Does the PAP ship CAPLYTA to the patient or to the healthcare provider?	The designated specialty pharmacy will ship CAPLYTA directly to your healthcare provider, so you will need a follow-up appointment with your healthcare provider to receive your CAPLYTA.
How do I apply?	You will need to complete the enrollment form with your prescribing healthcare provider, as both of you will need to complete sections of the form. Then, you or your healthcare provider will need to fax the enrollment form and any supporting documents to the PAP to the fax number provided on the enrollment form.
I have health insurance, but it does not cover CAPLYTA. Can the PAP still help me?	No, patients that have insurance coverage are not eligible for this program.
If I qualify, how long can I receive free medicine?	If you qualify, you may be able to receive CAPLYTA for 90 days. After the 90-day period, you may be able to continue receiving free drug for up to one year.
Is there a fee to apply?	There is no cost to apply for the PAP.
Will I have to pay a copay or any other fee for my CAPLYTA medicine?	CAPLYTA provided through the Intra-Cellular Therapies PAP is 100% free to the patient. There is no copay or shipping cost to you.
How long will it take to process my application?	Once we receive all the information needed, it is typically reviewed within two business days. After that, we'll contact you and your healthcare provider to let you know if you qualify for the PAP.

Do I need to provide proof of income?	Yes. Proof of income is usually required when applying for the PAP. We prefer to see your most recent tax returns but will also accept other documents.
What if I have no income?	If you don't have an income, please include a letter describing your current financial situation (e.g., if you recently lost your job, retired, etc.).
If I have insurance coverage, do I still qualify for the PAP?	The PAP is currently intended for patients with no insurance coverage. If you have insurance coverage, even in part, ask your healthcare provider to process your prescription through your insurance provider.
I lost my job, so my income is not as much as what my tax return shows. Will I still be able to apply?	Yes. If you are experiencing a financial hardship, such as a job loss, that isn't reflected in your tax return, please include this in a letter attached to your application.
How will I know if I qualify?	Once we review your application, we will send you a letter. We will also notify your healthcare provider and he/she can let you know if you qualify.
If I qualify, how long will it be before I receive my medicine?	Once the enrollment form is reviewed and approved, the prescription order is processed, and we use 2-day shipping, so in total, your healthcare provider's office should typically receive your CAPLYTA within 2-3 days of being approved for the program.
What are the refill requirements?	To request a refill, you or your healthcare provider will have to contact the PAP at 1-888-481-4824. Your healthcare provider may choose to <i>authorize</i> refills for up to the full year of your enrollment, but each refill will need to be requested by you or your healthcare provider.
If my enrollment application is not approved, and I have reason to believe that I should qualify based on program requirements, is there an appeals process?	Unfortunately, not every enrollment application to the PAP will be approved, based on the eligibility criteria. It is possible in some cases to have the denial overturned, by contacting the PAP and asking for instructions on how to appeal the decision. You will need a letter from your healthcare provider detailing the specific reason(s) your application should be reconsidered.
Can this PAP be used to obtain other medications?	No, the PAP is not insurance and cannot be applied to other medications.
Will I always be able to obtain CAPLYTA through this PAP?	Intra-Cellular Therapies, Inc. (ITCI) understands that not all patients have insurance coverage to pay for their medications. The PAP for CAPLYTA was established by Intra-Cellular Therapies, Inc. as a temporary means to help eligible patients without insurance obtain their prescribed CAPLYTA. However, ITCI reserves the right to modify or discontinue PAP at any time.

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