

Medicare-Only Funds

In order to qualify for a PAN Medicare-only fund, a patient must meet the following criteria:

- Patient must be a Medicare beneficiary and the patient’s Medicare benefit must cover the medication for which the patient seeks assistance;
- Medication must treat the disease directly;
- Patient must reside and receive treatment in the United States; and,
- Patient’s income must fall at or below 400% or 500% of the Federal Poverty Level, depending upon the disease fund.

Use the chart below to determine if a patient is eligible for a Medicare-only fund. Please note, the order of benefits is not a determining factor for coverage.

Type of Insurance	Drug Covered under Medical Benefit	Drug Covered under Prescription Benefit
Medicare Part A/B only	Yes	No
Medicare Part A/B and Part D	Yes	Yes
Medicare Advantage or Replacement	Yes	Yes
Medicare Part A/B and Medigap	Yes	No
Medicare Part A/B and Commercial	Yes	No
Medicare Part A/B and Medicaid	Yes	No
Medicare Part A/B and Tricare	Yes	No
Medicare Part A/B and COBRA	Yes	No
Medicare Part A/B and Marketplace plan	Yes	Yes
Medicare Part A/B and Part D and Commercial	Yes	Yes
Medicare Part A/B and Part D and Tricare	Yes	Yes
Medicare Part A/B and Part D and COBRA	Yes	Yes
Medicare Part A/B and Part D and Marketplace plan	Yes	Yes
Commercial only	No	No
Medicaid only	No	No
Tricare only	No	No
COBRA only	No	No
Marketplace plan only	No	No