

PAN Foundation Pharmacy Billing Guide

The Patient Access Network (PAN) Foundation is an independent, national 501 (c)(3) organization dedicated to helping federally and commercially insured people living with life-threatening, chronic and rare diseases with the out-of-pocket costs for their prescribed medications. Partnering with generous donors, healthcare providers and pharmacies, PAN provides the underinsured population access to the healthcare treatments they need to best manage their conditions and focus on improving their quality of life.

Services considered for reimbursement by the PAN Foundation

The Patient Access Network (PAN) Foundation provides reimbursement in the form of a grant for co-payment, coinsurance and deductible amounts related to eligible medications.

PAN is the payer of last resort, so all patients must be insured and insurance must cover the medication for which the patient seeks assistance.

Services not considered for reimbursement by the PAN Foundation

The following items are not covered by PAN:

- Eligible medications not covered by the patient’s insurance.
- Eligible medications paid by the primary insurance payer at 100%.
- Eligible medications billed only to drug discount cards and not insurance.
- Medications not covered under PAN’s formulary for the corresponding disease fund.

Pharmacy electronic billing information

Billing ID: 10-digit numeric ID unique to each patient
Rx Group: See below per fund

Rx BIN: 610728
Rx PCN: PANF

Disease Fund Name	Rx Group Number
Acromegaly	99990616
Acute Myeloid Leukemia	99992776
Amyloidosis	99994000
Ankylosing Spondylitis	99991108
Arrhythmia in Patients with Atrial Fibrillation or Atrial Flutter	99991568
Asthma	99990668
Atopic Dermatitis	99993729
Basal Cell Carcinoma	99991104

Disease Fund Name	Rx Group Number
Bladder Cancer	99993890
Carcinoid Syndrome	99993930
Chronic Iron or Lead Overload	99991290
Chronic Lymphocytic Leukemia	99991004
Colorectal Cancer	99990438
Cushing’s Disease or Cushing’s Syndrome	99991289
Cutaneous T-Cell Lymphoma	99990439
Diabetic Foot Ulcers	99990617

Disease Fund Name	Rx Group Number
Fabry Disease	99993910
Gaucher Disease	99990456
Glioblastoma Multiforme	99993800
Heart Failure*	99992637
Hemophilia	99993830
Hemophilia Premium	99997030
Hepatitis C	99990613
HIV Treatment and Prevention	99991280
Hypercholesterolemia	99991258
Hyperkalemia	99991257
Immune Thrombocytopenic Purpura	99990657
Inflammatory Bowel Disease	99990512
Inherited Retinal Disease	99993810
Inherited Retinal Disease Premium	99997020
Inherited Retinal Disease Travel	99998700
Macular Diseases	99990418
Mantle Cell Lymphoma	99991223
Melanoma	99991237
Metastatic Breast Cancer	99990647
Multiple Myeloma	99993757
Multiple Sclerosis	99990457
Myelodysplastic Syndromes	99990454

Disease Fund Name	Rx Group Number
Neuroendocrine Tumors of Pancreatic Origin	99990673
Neutropenia	99990658
Non-Hodgkin's Lymphoma	99990463
Non-Small Cell Lung Cancer	99990459
Ovarian Cancer	99991497
Parkinson's Disease*	99991255
Philadelphia Chromosome Negative Myeloproliferative Neoplasms	99990651
Plaque Psoriasis	99991109
Postmenopausal Osteoporosis	99991105
Prostate Cancer	99991142
Psoriatic Arthritis	99991107
Pulmonary Hypertension	99993820
Renal Cell Carcinoma	99990594
Retinal Vein Occlusion	99991026
Rheumatoid Arthritis	99990664
Short Bowel Syndrome	99992330
Thyroid Cancer	99991045
Tuberous Sclerosis Complex	99991288
Uveitis	99991039
Venous Leg Ulcers	99991256
Waldenstrom Macroglobulinemia	99993950
Wilson Disease	99991234

*Disease fund has a minimum threshold requirement for PAN to process the claim. You may combine multiple prescriptions to meet the minimum claim threshold.

Minimum claim requirement for PAN Foundation disease funds

Select disease funds have a minimum threshold requirement for PAN to process the claim. You may combine multiple prescriptions to meet the minimum claim threshold. The following disease funds have a minimum claim requirement:

- Heart Failure: \$25
- Parkinson's Disease: \$50

Submitting claims electronically versus manually

Almost all claims can be submitted electronically. PAN encourages you to bill claims electronically for a faster turnaround time. If your claim must be aggregated because it does not meet the minimum claim threshold, please submit the claim manually.

How to submit a manual claim to PAN

1. Gather and complete the following items:
 - Universal Pharmacy Claim Form or CMS-1500 form.
 - Corresponding remittance or Explanation of Benefit statement.

2. Submit claim by mail or fax:

Mail: DST Pharmacy Solutions
Dept.: 0756
PO Box 419019
Kansas City, MO 64141

Fax: 1-844-871-9753

Mailing or faxing multiple claims together

You may mail or fax multiple claims together. However, each claim must have its own claim form and Explanation of Benefit statement. Please separate claims with a blank page to ensure each claim is processed correctly.

Claim processing time

Electronic claims are processed immediately. The standard processing time for manual claims is 10 to 14 business days. Claims are processed on a first-come, first-served basis. Please keep in mind that any missing information may lead to delays in claim processing time.