



# Provider Resource Guide

## How do I bill The Assistance Fund?

If you are a pharmacy, The Assistance Fund's preferred method of billing is with electronic billing information. PDMI will issue appropriate claims processing information to support the cost of the patient's claim. This information is as follows:

Customer/Card ID: Provided by The Assistance Fund  
BIN: 610020  
PCN: MEDDPDM  
Group #: See the table below for Rx group # by program

## Processing Rx group #s:

**NOTE:** For processing questions, please call the PDMI help desk at (800) 800-7364.

Fund Name	Rx Group#	Fund Name	Rx Group#
Alpha-1 Antitrypsin	99993724	Melanoma	99992661
Ankylosing Spondylitis	99992656	MPS VII - Sly Syndrome	99993781
Atypical Hemolytic Uremic Syndrome	99993782	Multiple Sclerosis	99992648
Breast Cancer	99992667	Myasthenia Gravis	99993777
Clostridium Difficile CDAD	99992651	Myositis	99992697
Crohn's	99992713	Nephrotic Syndrome	99992693
Cystic Fibrosis	99992650	Neuroendocrine Tumors	99992662
Duchenne Muscular Dystrophy	99992775	Non-Small Cell Lung Cancer	99992665
Epilepsy (Seizures)	99993833	Nontuberculous Mycobacterial Lung Disease	99993838
Fabry Disease	99993834	Parathyroid Disease	99992663
Gastric Cancer	99993824	Parkinson's Disease	99992649
Gaucher Disease	99993721	Primary Biliary Cholangitis (Cirrhosis)	99992758
Head and Neck Cancer	99992766	Primary Immunodeficiency	99993725
Hemophilia	99993722	Psoriasis	99992654
Hepatitis C	99992666	Psoriatic Arthritis	99992659
Hereditary Amyloidosis	99993825	Renal Cell Carcinoma	99992668
Hereditary Angioedema	99992652	Rheumatoid Arthritis	99992655
Hodgkin Lymphoma	99993826	Sarcoidosis	99992694
Hunter Syndrome	99993723	Short Bowel Syndrome	99992660
Hypophosphatemia	99993797	Skin and Skin Structure Infections	99992664
Infantile Spasms	99992695	Systemic Lupus Erythematosus	99992658
Inherited Retinal Diseases	99993788	Thrombocytopenia	99993808
Iron Deficiency Anemia	99992685	Ulcerative Colitis	99992714
Juvenile Arthritis	99992657	Uveitis	99992696

## How do I bill for administering medication onsite?

For healthcare providers who are administering a prescription medication at their site, payments are facilitated through a claims administrator, Florida Health Administrators (FHA) TPA. To file a claim, please use the contact information to the right. To verify a patient's enrollment status or to confirm funds availability for a claim, please call TAF at (855) 845-3663 and select Option 2. You will need the patient's Cardholder ID and date of birth.

Florida Health Administrators (FHA) TPA  
 Payer ID: 86753  
 PO Box 21426  
 Eagan, MN 55121

Website: tafcares.org/billing  
Phone Number: 866.236.2673  
Fax Number: 954.901.2711

For Pharmacy Portal access, please email Program Manager, Christina Abbene at Christina.Abbene@tafcares.org