



Point Of Contact Responsibilities

- ❖ Must have patient complete and sign enrollment form for ACN-PAP
- ❖ Provide the following documents with enrollment form:
 1. Copy of Medicare Card (*if applicable*)
 2. Current income for the patient

or

 3. Income of individual supporting the patient
- ❖ If patient does not have a Social Security number they must provide Green Card number or Visa (if they have neither, state so on the application).
- ❖ Point of Contact will be deemed physician's liaison.
- ❖ Point of Contact will be ACN-PAP's link to the patient(s).
- ❖ Once packet is complete it must be mailed to:

ACN-PAP
622 West 168th Street
VC 10, Area C, Room 3
New York, NY 10032