



## CRITERIA FOR LINKED BY PINK MEDICAL ASSISTANCE GRANT

**\* The age limit has been temporarily increased to those initially diagnosed at the age of 55 and younger**

1. The grant is open to all breast cancer patients/survivors initially diagnosed with breast cancer at the age of 55 and younger.
2. The patient must live within a 45 mile radius of Erie, PA.
3. Form must be filled out entirely including all required medical provider sections and required signatures. A copy of most recent income tax return (first two pages only) must be included except for stage 4 patients.
4. The total amount available for all grants is set each year during our budget session beginning January 1. Funds available may affect the number/amount of grants approved each year.
5. The maximum amount of the grant for patients in ACTIVE treatment is \$2,500 per person yearly, until all funds from the grant fund are exhausted. The maximum amount of the grant for patients in INACTIVE treatment is \$1,500 per person yearly, until all funds from the grant fund are exhausted.

**\*\*\* Please note:**

***Above are the maximum amounts available per grant.***

***Not all applicants will qualify for maximum amounts.***

***Not all applicants will qualify for both grants.***

6. We do not pay for costs already paid for by insurance or another program.
7. After receiving a grant, a patient must wait 12 months before submitting a new application, and all eligibility requirements must be met before reapplying
8. Incomplete or old applications will not be processed.

### **Income Guidelines**

Eligibility is determined on a case by case basis. Supporting documentation may be submitted as a proof of extenuating circumstances.

### Income Information –

**\*\*Note - Grant requests exceeding these income limits below are awarded on a sliding scale.**

Household Size	1	2	3	4	5	6	7	8
Yearly Income	\$58,320	\$78,880	\$99,440	\$120,000	\$140,560	\$161,120	\$181,680	\$202,240

## **Billing Procedure**

Please enclose copies of all medical bills and/or receipts of payment for award determination.

**\*Please allow 4 - 6 weeks for processing of payments**

## **Allowable Expenses**

### **Medical Grant**

- Medical treatment necessary as a result of a breast cancer diagnosis
- Doctor or therapist co-pays or office visits
- Prescribed Lymphedema garments and supplies
- Prescription and co-pays of medications
- Medically necessary supplies prescribed by a doctor
- Medical Marijuana as prescribed by a doctor

**\*Please allow 4 - 6 weeks for processing of application and payments\***

**Check your email. Your determination letter will be sent to the email address provided.**

**No checks will be sent until we receive your email response.**

**\*\*LBP will not be responsible for lost or misdirected mail.**