



To better serve you, we handle the insurance claims process for you. Please call us, not your healthcare provider, with any questions regarding patient responsibility or the billing process. Our WE CARE Customer Service Team is here to serve you Monday through Friday from 8 AM to 8 PM Eastern Time at 866.757.9204.

## How much does GeneSight cost patients?

GeneSight is the leading pharmacogenomics test to help healthcare providers select appropriate medications for the treatment of depression, anxiety and other neuropsychiatric conditions. GeneSight has been shown in multiple published clinical studies to improve patient treatment outcomes at significant value to the healthcare system. Therefore, GeneSight is now covered by many health insurance plans.

We help make GeneSight financially accessible to all patients by working with patients to meet coinsurance obligations required by their health insurance plans. Patients with commercial health insurance are responsible for their coinsurance payment, which typically will be around \$330.

GENESIGHT TEST	PATIENT'S RESPONSIBILITY	
	Medicare, Medicaid, Workers' Compensation <sup>1</sup>	Private Insurance
GeneSight Psychotropic, Analgesic, and/or ADHD (based on medical necessity)	\$0	\$330 <sup>2</sup>
GeneSight MTHFR	\$0	

<sup>1</sup> A nominal annual deductible (Medicare) or spend down (Medicaid) may rarely apply. For Medicare Advantage, normal coinsurance and deductible will apply.

<sup>2</sup> Based on typical in-network allowed amount and coinsurance.

## Does Assurex Health offer patient financial assistance?

GeneSight is available for **all patients** regardless of income level. Patient assistance programs include a Financial Assistance Program for patients who have verified annual household income of \$75,000 or less and a 12 month interest-free payment plan. Please call 866.757.9204 for details.

**Financial Assistance Program** - Our Financial Assistance Program is available for those patients who are U.S. citizens or legal residents and have insurance but need help meeting the uncovered portion or patient responsibility for the GeneSight test(s). Patients must not be eligible for coverage through any local, state or federal programs (such as Medicaid, Medicare, Medicare Advantage or TRICARE®). Patients with verified annual household income of \$75,000 or below qualify for financial assistance. Patients who qualify will have responsibility of \$20 or \$150 depending on household income (see table below).

HOUSEHOLD INCOME	PATIENT'S RESPONSIBILITY
\$0 to \$50,000	\$20
\$50,001 to \$75,000	\$150 (or \$12.50 per month)
\$75,001 and above	Financial Assistance Program does not apply \$330 <sup>1</sup> (or \$27.50 per month)

<sup>1</sup> Based on typical in-network allowed amount and coinsurance.

**Payment Plan** - If a patient's out of pocket expense is \$120 or more, he or she qualifies for the Assurex Health 12 month, interest-free payment plan. As an example, for households with an income over \$75,000, the total amount due of \$330 is spread over 12 equal monthly payments of \$27.50. Patients have the option to take the full 12 months to complete payment or may pay off their balance at any time. To participate in the payment plan, patients must provide credit card information.



## Assurex Health Billing Process: What can you expect?

To better serve you, **we handle the insurance claims process for you.** For GeneSight Psychotropic, GeneSight Analgesic, GeneSight ADHD, GeneSight MTHFR, or any combination of these tests:

**To Get Things Started:** Provide your healthcare provider with your current health insurance plan card along with a signed Patient Financial Consent form at the time you receive the GeneSight cheek swab sample collection materials. Inaccurate insurance information can make it more difficult to collect payment from your health insurance company.

**Assurex Health** will submit your claim to your health insurance company on your behalf. We will make a concerted effort (including an appeal) to have your health insurance company cover as much of the cost of your GeneSight test as possible, up to 100%.

**Your health insurance company** will usually process your claim and send you an "Explanation of Benefits" (EOB) form within 30-45 days. The **EOB is not a bill**, but rather a detailed explanation of the amount your health insurance company has covered for various components of the GeneSight test(s). If you receive a check for GeneSight directly from your health insurance company, you must endorse the check and forward it to Assurex Health, Dept. CH 16854, Palatine, IL 60055.

**You will receive a bill from Assurex Health** specifying any amount due shortly after you receive an EOB from your health insurance company. Assurex Health offers a patient assistance program to help offset the cost of the GeneSight test and, in addition, a monthly payment program to make payments easier.

Our **WE CARE Customer Service team** is here to serve you and answer any questions that you may have throughout this process. Please call us at **866.757.9204**.

## Questions

To learn more about the cost of and reimbursement for the GeneSight test, please contact us:

PHONE	866.757.9204
E-MAIL	<a href="mailto:support@assurexhealth.com">support@assurexhealth.com</a>
WEBSITE	<a href="http://www.genesight.com">www.genesight.com</a>

