

Benefits Investigation Report Overview



What is an Access 360 Benefits Investigation?

A Benefits Investigation determines expected medical or prescription drug coverage through the patient's health insurance plan and may include:

- Coverage and prior authorization requirements
- Patient out-of-pocket costs
- Specialty Pharmacy options

This request can be placed on behalf of the patient, by the provider, to Access 360.



What is an Access 360 Benefits Investigation Report?

After completing a Benefits Investigation, we will provide a comprehensive report on the health insurance plan information, the patient's out-of-pocket costs, prior authorization requirements, and pharmacy information. This document is referred to as a Benefits Investigation Report.



Pharmacy Coordination

As part of a Benefits Investigation, Access 360 will verify what Specialty Pharmacies are "in-network" and contracted with the patient's plan. We can also submit the prescription to the pharmacy at the request of the health care provider (HCP).



Prior Authorization

Currently, Access 360 does not submit prior authorizations on behalf of the HCP. An HCP will need to submit a prior authorization to a patient's health insurance company, if one is needed. Although we do not submit prior authorizations, we can research and confirm what prior authorization requirements and forms are necessary to be submitted by the HCP.



What should an HCP expect from Access 360?

After your personal Access 360 Reimbursement Counselor has completed the Benefits Investigation, we will contact the HCP by fax (by faxing the Benefits Investigation Report) and via phone to review the results.

For more information, call AstraZeneca Access 360™ at **1-844-ASK-A360**, Monday through Friday, 8 AM to 8 PM ET.

 **1-844-ASK-A360** (1-844-275-2360)

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