Alexion Field Reimbursement Manager

Alexion Field Reimbursement Managers (FRMs) provide education and support to healthcare provider (HCP) offices to facilitate patient access to their prescribed Alexion medications

Your dedicated FRM can provide the following:

- · Access and reimbursement education
- Coding, billing and appropriate claims submission educational support
- Prior authorization (PA) and appeal assistance
- Product acquisition education for buy and bill and specialty pharmacy
- · Site of care identification

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HCP Office Access and Reimbursement Education

FRMs can provide general access and reimbursement education including:

- Payer policy information and general PA and re-authorization criteria and required documentation for claims submission
- · Billing, coding, and claims
- Product acquisition

- · Reimbursement and cost considerations
- · Site of care payer requirements and reimbursement
- Pre-initiation vaccination requirements and needed documentation



Case-Specific* Prior Authorization Education

FRMs can provide case-specific education to assist getting patients on therapy, including:

- Patient-specific PA and re-authorization criteria education and support
- Site of care education including site options based on the patient's insurance coverage and requirements
- Pre-initiation vaccination options and required documentation needed for patient's health plans
- Coordination with the OneSource[™] support program for additional patient support

*When involved in patient-specific case work, the patient must be enrolled in OneSource™; and patient-specific information must be redacted for FRM involvement.



Product Acquisition and Claims

After an authorization has been approved by the patient's insurance, the FRM can provide education about:

- Infusion provider and HCP office coordination
- · Product ordering process

- · Billing, coding, and claims submission
- Product reimbursement education

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Prior Authorization Denial* Educational Support

FRMs can provide HCPs with educational support and guidance if they receive a PA denial, including:

- Questions regarding the patient's explanation of benefits (EOB)
- Payer options for PA resubmission, including resubmission, peer-to-peer review and appeals process, and associated timelines
- Review of the redacted denial letter or EOB to provide specific guidance on next steps and best practices

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