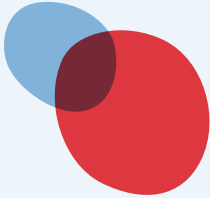




Introducing the G1 to One® Patient Support Program





Your Single Source for Access and Affordability Solutions

Our team of reimbursement experts are available to answer questions regarding coverage, prior authorization, appeals, co-pay support, and more. Completing the G1 to One® enrollment form enables your dedicated Case Manager to help streamline the process of getting your eligible patients started on therapy. Your Case Manager can offer one-to-one support to ensure your eligible patients have access to the therapy they need.

G1 to One offers a suite of solutions to common access and reimbursement hurdles, such as:

- Benefits verifications for patient coverage and out-of-pocket responsibilities
- Providing payer-specific guidance for prior authorizations and appeals to address patient needs
- Offering solutions for insurance-related delays
- Connecting patients, regardless of insurance type, to appropriate resources that can address high deductibles, co-pays/coinsurance, or even a lack of coverage*

*Patients must express need and meet certain eligibility requirements.

Simple G1 to One® Enrollment Process

Complete and submit the form to enroll patients in G1 to One.

- Download the enrollment form at www.G1toOne.com
- Fax the completed form to 1-833-FAX-G121 (1-833-329-4121)
- Submitting the completed form will initiate a benefits investigation that includes coverage status, prior authorization requirements, and patient out-of-pocket treatment costs. This information will be provided to your practice!

[illegible]

[†]Enrollment does not guarantee benefits.

Resources to assist with coverage and reimbursement

Download these helpful resources at www.G1toOne.com



Coding and Billing Guide



Letter of Medical Necessity Template



Appeals Letter Template



Call us with questions at
1-833-G1toOne (1-833-418-6663)
or email us at
Enroll@G1toOne.com

Fax completed enrollment form to
1-833-FAX-G121 (1-833-329-4121)

Visit **www.G1toOne.com** for additional information