



# Billing and Payment Information

Amprion is committed to ensuring every patient can access the SAAmplify™-αSYN test.

#### **MEDICARE**

- Amprion is a Medicare participating provider, but Medicare has not issued a coverage decision at this time.
- Medicare patients must complete, sign, and date a Medicare ABN (copy available on the website) that instructs Amprion how to proceed with billing. The ABN should be sent to Amprion with the patient specimen.
  - If the patient chooses Option 1, a claim will be sent to Medicare at the test list price. If Medicare denies the claim, the patient may be invoiced for the denied charges.
  - If the patient chooses Option 2, they will be treated as self-pay and invoiced at the self-pay discounted price (see self-pay option below).

#### **MEDICAID**

Amprion is not yet a participating provider for any Medicaid program (see self-pay option below).

#### PRIVATE INSURANCE AND TRICARE

Amprion can courtesy bill a patient's primary insurance at the patient's request; however, the test is not currently covered by many plans.

- Patients should review and complete a Patient Consent Form.
- Amprion must be provided with complete insurance information for a claim to be submitted to their insurance at the list price.\*
- Patients are responsible for fulfilling their plan's copay, coinsurance, deductible, and remaining non-covered costs, as well as forwarding any payments they receive to Amprion.
- Patients can contact their insurance provider to determine coverage (CPT code: 0393U).
- Patients can elect the self-pay option if they have high deductibles or believe there will be no coverage for the test.

## **SELF-PAY**

- Patients without insurance or who choose not to have a claim submitted to their insurance, Medicare, or Medicaid will be treated as self-pay patients.
- Patients will be invoiced at the self-pay discounted price of \$995.<sup>†</sup>
- Patients are eligible for an additional prompt-pay discount of \$200 if they remit payment of \$795 to Amprion within 15 days of their initial bill date.
- · No claim will be submitted to insurance, Medicare, or Medicaid.



### **AMPRION PAYMENT AND FINANCIAL PROGRAMS**‡

- Amprion offers a robust billing and financial assistance program to help reduce patients' out-of-pocket costs whenever
  possible.
- · A six-month, interest-free payment plan is available to help patients pay for this test.
- Patients may qualify for financial assistance before, during, or after testing has been completed or after insurance has processed a claim (see chart below).
- Patients may request a good faith estimate of their financial responsibility for the SAAmplify-αSYN test (formerly SYNTap), however final determination cannot be made until Amprion has received a completed Amprion Financial Assistance application and the required supporting documentation.

Amprion Financial Assistance Income Levels (based on the Federal Poverty Guidelines and gross income for 2024)

Number of people in household	\$100 patient out-of-pocket cost if annual household income is at or below	\$225 patient out-of-pocket cost if annual household income is at or below	\$350 patient out-of-pocket cost if annual household income is at or below	\$500 patient out-of-pocket cost if annual household income is at or below
1	\$37,650	\$52,710	\$67,770	\$82,830
2	\$51,100	\$71,540	\$91,980	\$112,420
3	\$64,550	\$90,370	\$116,190	\$142,010



If a patient or their representative has any questions about the billing process or financial programs, they can contact an Amprion billing specialist at **(858) 461-6338, Option 3**, or by email at **patientservices@AmprionDx.com**.



<sup>\*</sup> Effective 05/01/2024, the list price of the SAAmplify-αSYN test (formerly SYNTap) is \$1,500.

<sup>‡</sup>Amprion's billing, payment, and financial programs are only available to patients who reside within the United States, Puerto Rico, and US territories. Those patients whose tests are billed by their contracted laboratories are not eligible for Amprion payment or financial programs. Please contact the billing laboratory for assistance and an explanation of their programs.



<sup>†</sup>Effective 05/01/2024, the self-pay discounted price of the SAAmplify-aSYN test (formerly SYNTap) is \$995.