

Guardant Access

When you or a loved one is battling cancer, the last thing you want to worry about is an unexpected bill or confusing paperwork.

That's why we created Guardant Access, a program that manages the billing process for you. Guardant Access reduces paperwork, helps manage claims appeals with insurance companies, and handles your billing questions.

Our Billing and Financial Assistance Process:

1. As part of the Guardant Access program in 2017, Guardant Health® will verify insurance eligibility prior to Guardant360 testing and contact every out-of-network patient whose deductible or copay may exceed **\$100**. At such time, Guardant Health will also help determine your eligibility for our Financial Assistance Plan.
2. Billing and insurance appeals for complex medical tests can take several months. Through Guardant Access, Guardant Health will make a significant effort on your behalf to obtain or improve the payment received from your insurance company. We may ask you or your doctor for support in this process.
3. You will receive an Explanation of Benefits from your insurance carrier. It is important to understand that **the Explanation of Benefits is not a bill.**

During the billing process, Guardant Health may communicate with you directly regarding your financial responsibility for co-pays, deductibles, and coinsurance under your insurance plan. At such time, Guardant Health will also help determine your eligibility for our Financial Assistance Plan.

For some insurance plans where Guardant Health is contracted with the insurance carrier, this process may be different and more efficient.

Questions? We want to hear from you.

 855.698.8887

 patients.guardanthealth.com

 clientservices@guardanthealth.com