## **Prescription Assistance Program for Patients**

Available 24/7 No Other Eligibility Criteria Patients must meet income and insurance criteria. Call hotline for further information regarding eligibility. Intake Process Registered physicians may enroll their patients. Provider Refer Yes Self Refer Yes Astellas Pharma US, Inc. https://www.astellas.com/us/ https://www.astellas.com/us/patients-and-caregivers Main (800) 477-6472 Toll-Free (800) 727-7003 1 Astellas Way 60062 IL United States Fee Structure Call for Information Languages Spoken

English

Astellas Pharma has helped provide prescription assistance program to uninsured patients who have to experience financial hardship. Physicians must first register for the program. The patient can call to pre-qualify. If you would like to learn more, call the Reimbursement Hotline (1-800-477-6472) opens from 9 AM until 8 PM EST. The patient has to be pre-qualified over the telephone; the application is sent to the provider's office, both provider and patient complete application and forwards it to Astellas.

Visit Patients & Caregivers for more information.

Service Area(s) Nationwide