

September 1, 2026

AZ&Me[™] Prescription Savings Program
2027 Re-enrollment Overview Website Frequently Asked Questions

Income Eligibility Guidelines for 2027

AZ&Me Program income eligibility requirements are not changing for 2027:

- Annual adjusted gross household income must be at or below **300%** of the Federal Poverty Level (FPL) for Primary and Specialty products (no change)
- Annual adjusted gross household income must be at or below **500%** of the Federal Poverty Level (FPL) for Rare Disease products (no change)

AZ&Me 2027 Re-enrollment for Medicare Patients

AZ&Me remains committed to helping eligible patients access select AstraZeneca medicines. To support the long-term sustainability of the program, existing Medicare patients must complete the 2027 re-enrollment process. **Medicare patients will not be automatically re-enrolled for 2027**

Beginning in September 2026, AZ&Me will use a secure electronic income verification process to assess eligibility for 2027. Patients and healthcare providers will be notified of the patient's re-enrollment status beginning in October 2026

What Happens Next?

If the patient meets all program eligibility requirements, they will be Conditionally Approved for 2027. **To complete re-enrollment, all Conditionally Approved patients must provide updated program consent on or after November 1, 2026.**

Patients may provide consent in one of three ways:

1. **Preferred Option:** Opt-in to use the AZ&Me Digital Assistant to submit consent electronically
 - Click [HERE](#) to access the AZ&Me Digital Assistant
2. Complete and submit the [AZ&Me Program Consent Form](#)
 - May be uploaded to the AZ&Me website (must be a registered user) or faxed to program (1-877-239-0867)
3. Call AZ&Me to provide verbal consent: 1-800-AZandMe (1-800-292-6363)

Conditionally Approved Specialty & Rare Disease Patients

In addition to providing updated program consent, Specialty & Rare Disease Medicare patients who are Conditionally Approved for 2027 must also pursue other available resources of assistance before enrollment can be finalized

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Because AZ&Me is a program of last resort, these patients must first pursue grant assistance from Independent Non-profit Organizations (INOs), which may help with copays, premiums, deductibles, and other out-of-pocket costs.

To explore available assistance, patients and providers can visit:

- <https://fundsupport.reassist.app>
- www.azpatientsupport.com

If Conditionally Approved Specialty & Rare Disease Medicare patients do not qualify for INO assistance, or if no applicable INO funds are open for their respective diagnosis, and continue to require assistance from AZ&Me, they must complete the [AZ&Me Specialty & Rare Disease Medicare Enrollment Form](#) as proof of denial or fund closure from three (3) INOs

- Patients must document three applicable closed INO funds or fund denials on the form
 - Screenshots of closed INO funds are no longer required
 - AZ&Me Operations will confirm fund closures
- If the patient was denied by an INO, they must submit the INO denial letter with the form
 - INO Denial letters must be dated in 2027
 - INO Denial letters must be submitted within 15 days of the date on the letter
 - If an INO denial letter is not available, a time & date stamped screenshots of INO denial is acceptable
- The form must be completed and submitted on or after January 1, 2027, and must be received by March 31, 2027
 - Conditionally Approved Specialty & Rare Disease patients who do not submit required documentation to finalize their enrollment by this date will be required to submit a new application if they continue to need assistance.

If a Patient No Longer Needs Assistance from AZ&Me

Patients and their providers have three options to withdraw from the program:

1. Sign In to the AZ&Me website to withdraw from the program (must be a registered user)
2. Complete the AZ&Me Withdrawal form and fax to AZ&Me (877) 239-0867
3. Call 1-800-AZandMe (1-800-292-6363), Monday through Friday 9:00 AM-6:00 PM ET, to speak with an AZ&Me Representative

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Frequently Asked Questions

Q. Are the AZ&Me Program income eligibility requirements changing for 2027?

A. AZ&Me income eligibility requirements will remain the same in 2027

- Annual adjusted gross household income must be at or below **300%** of the Federal Poverty Level (FPL) for Primary and Specialty products
- Annual adjusted gross household income must be at or below **500%** of the Federal Poverty Level (FPL) for Rare Disease products

Q. Will current Medicare patients be automatically re-enrolled for 2027

A. No, current Medicare patients must complete the 2027 re-enrollment process.

Q. How will AZ&Me determine eligibility for 2027?

A. AZ&Me will use a secure electronic income verification process beginning in September 2026 to determine eligibility for 2027.

Q. How will patients and their providers be notified of their re-enrollment status?

A. Patients will be notified through the AZ&Me Digital Assistant if they opted in, or by US postal mail. Providers will be notified by fax. Registered website users may also sign in to review the patient's re-enrollment status.

Q. What if an electronic income verification is inconclusive?

A. The patient must complete a new AZ&Me application so eligibility can be determined.

Q. What if a patient is denied but their income has changed?

A. The patient may submit recent income documentation, preferably a 1040, for reconsideration.

Q. What does Conditionally Approved mean?

A. It means the patient has met program eligibility requirements for 2027, but must complete required next steps, such as providing updated program consent. Specialty & Rare Disease patients must also pursue assistance from Independent Non-profit Organizations (INOs) before finalizing their re-enrollment.

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Q. Where can the patient or provider obtain a list of Independent Non-profit Organizations (INOs) that may be able to assist?

A. For a list of some Independent Non-profit Organizations (INOs) that may be able to assist, that patient or provider can visit:

- <https://fundsupport.reassist.app>
- www.azpatientsupport.com

Q. Are Conditionally Approved Specialty and Rare Disease patients required to complete the AZ&Me Specialty & Rare Disease Medicare Enrollment Form?

A. Yes, if the patient or their provider has confirmed three (3) applicable closed funds or received three (3) INO denials on/after January 1, 2027, they must complete the form to finalize their 2027 enrollment. AZ&Me Operations will confirm that the funds are closed.

Q. Are screenshots of closed INO funds required in addition to completing the AZ&Me Specialty & Rare Disease Medicare Enrollment Form

A. No, if the patient or their provider has confirmed three (3) applicable closed funds on/after January 1, 2027, they should simply indicate the names of the INO and the Fund Names on the form. AZ&Me Operations will confirm that the funds are closed.

Q. If a patient received a denial from an INO, are they required to submit a copy of the denial letter with the AZ&Me Specialty & Rare Disease Medicare Enrollment Form?

A. Yes, because AZ&Me does not have the ability to confirm fund denials, we require that copies of any INO denial letters (or screenshots of INO website denial message must be time/date stamped) be attached when submitting the AZ&Me Specialty & Rare Disease Medicare Enrollment Form. Denial letters must be dated in 2027 and submitted within 15 days of the date on the letter.

Q. What should patients and providers do if they have additional questions regarding the 2027 Medicare Re-enrollment process?

A. For further information regarding the 2027 Medicare Re-enrollment process, please visit the AZ&Me Website at www.AZandMe.com or contact the AZ&Me Prescription Savings Program at 1-800-AZandMe (1-800-292-6363) Monday through Friday, 9 AM – 6 PM ET.