

LAI-PREP AND PRIVATE INSURANCE

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AGENDA

Introduction

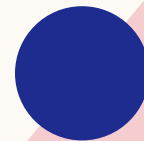
Benefits Investigation and Coverage

Options

Selecting a Pharmacy

Common Issues

Summary



INTRODUCTION

Navigating a patient's private insurance to determine the coverage they have for LAI-PrEP (Apretude) often takes multiple steps, with each insurance plan having their own process for Apretude to get covered

It's important to determine before sending out a prescription how a plan covers Apretude, the pharmacy you must use, and any share of cost



BENEFITS INVESTIGATION AND COVERAGE OPTIONS

Determining how private insurance plans
covers LAI-PrEP

BENEFITS INVESTIGATION

- Submit a request for a benefits investigation (BI) using ViiV's online portal or paper application (both patient and provider must sign)
- Provide a copy of the patient's insurance card to expedite this process, expect a response in 1-2 weeks
- The BI will determine if the plan covers LAI-PrEP and how it can be billed
- LAI-PrEP will be covered under either the plan's **pharmacy benefit** or **medical benefit**

COVERAGE OPTIONS

PHARMACY BENEFIT

- PA needed for most insurance plans, may be required every 3-6 mo.
- Use listed specialty pharmacy
- NDC code: 49702-0264-23

MEDICAL BENEFIT

- Specialty pharmacies can bill under a medical benefit on a provider's behalf
 - Important for clinics that do not charge for services or are considered out of network with the insurance plan
 - Note: HMO plans must be seen within their provider network
- Pharmacies often require specific forms when requesting to bill under medical benefit on behalf of clinic
- J-Code: J0739

Payment assistance options for co-pays/OOP costs:

- Apetude co-pay card (up to \$7500 annually, no income limit)
- Patient Advocate Foundation
- PAN Foundation
- Healthwell Foundation
- Good Days Foundation

Example Benefits Investigation

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Patient Information		Prescriber Information	
Name:	[REDACTED]	Name:	[REDACTED]
DOB:	[REDACTED]	Phone:	[REDACTED]

Product Information		
Product Name: Apetude	Drug Code: J0739	NDC: 49702-0264-23

Insurance Plan Information			
Cigna Corporation	ID#: [REDACTED]	Group #: [REDACTED]	Phone #: (800) 997-1654
Plan Type:			
Effective Date: 04/01/2022	Termination Date:	PBM: Express Scripts	Phone #: (800) 753-2851

Specialty Pharmacy Acquisition - Medical Benefit			
Drug Covered? <u>Yes</u>		Physician In-Network? <u>No</u>	
Copay:		Co-Insurance: 30%	
Deductible:	Deductible Met:	OOP Max: \$6,000.00	OOP Met:
PA/Pre-D Required? <u>Yes</u>		Reference/Approval #:	
PA/Pre-D Type Required? <u>Verbal</u>	Phone: (800) 244-6224	Fax:	
Specialty Pharmacies in Network: Accredo Health Group (877) 732-3431, OptumRX (855) 577-6313, AllianceRX Walgreens Prime (800) 332-9581			
Explanation Summary: APRETUDE is subject to a 30% co-insurance up to a \$6,000.00 out of pocket max. Once the OOP max is met, APRETUDE is covered at 100%.			

Specialty Pharmacy Acquisition – Pharmacy Benefit			
Drug Covered? Yes			
Copay:		Co-Insurance:	
Deductible:	Deductible Met:	OOP Max:	OOP Met:
PA Required? Yes, PA		Reference/Approval #:	
PA Type Required? Verbal	Phone: (800) 753-2851	Fax:	
Specialty Pharmacies in Network: Accredo Health Group (877) 732-3431			
<p>Explanation Summary:</p> <p>APRETUDE is covered at 100%. This plan does not include a deductible or out-of-pocket maximum.</p>			

Comments
<p>Medical Benefit: For in-network providers, benefits can only be obtained with an in-network NPI. Please call Cigna at (800) 997-1654 to obtain benefits.</p> <p>Pharmacy Benefit: Accredo is the mandated specialty pharmacy for this patient's plan.</p>

SELECTING A PHARMACY

- Apretude is filled through a **Limited Distribution Network**, meaning only a select number of pharmacies are filling and distributing the medication
- The pharmacies apart of this network are listed on ViiV's application for a benefits investigation
- The BI will state which specialty pharmacy must be used
 - Note: you do not have to select a pharmacy when submitting BI application

7 Injection Acquisition Information

My practice will acquire the injections through:

☐ Buy & Bill ☐ Specialty Pharmacy (Select one)* ▼ ☐ Unknown/Undecided

<input type="radio"/> No preference	<input type="radio"/> Accredo Health Group Inc	<input type="radio"/> Avita Pharmacy	<input type="radio"/> Curant Health	<input type="radio"/> Mail-Meds Clinical Pharmacy
	<input type="radio"/> AHF Pharmacy	<input type="radio"/> CenterWell Specialty Pharmacy	<input type="radio"/> CVS Specialty	<input type="radio"/> Optum Specialty Pharmacy
	<input type="radio"/> AllianceRx Walgreens Pharmacy	<input type="radio"/> Coordinated Care Network	<input type="radio"/> Kroger Specialty Pharmacy	<input type="radio"/> Walgreens Community-Based Specialty

☐ The prescription has been sent to the preferred Specialty Pharmacy indicated above

*Preferred Specialty Pharmacy selection will be honored if permitted by Patient's insurance plan.

COMMON ISSUES

- Patient's insurance medical coverage attempting to bill under pharmacy benefit
 - Medical plans will often push back assume that Apretude is covered under a pharmacy benefit
 - Tip: Provide J-Code and request any insurance-specific documents that may be needed
 - For PA's or request to bill under medical benefit, include BI with any documents you are sending over
- Contracted specialty pharmacy is not included in the limited distribution network
 - Tip: Call the PBM/medical coverage benefit to see if there is a secondary specialty pharmacy designated
 - If no designated secondary pharmacy, request that the PBM/medical coverage benefit make an override/exemption to add a secondary specialty pharmacy



THANK YOU! QUESTIONS?

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