



## SUNLENCA<sup>®</sup> INITIATION GUIDE

Acquisition, Access, and Reimbursement for SUNLENCA

### INDICATION

SUNLENCA, in combination with other antiretroviral(s), is indicated for the treatment of human immunodeficiency virus type 1 (HIV-1) infection in heavily treatment-experienced adults with multidrug resistant HIV-1 infection failing their current antiretroviral regimen due to resistance, intolerance, or safety considerations.

### IMPORTANT SAFETY INFORMATION

#### Contraindications

- **Coadministration:** Concomitant administration of SUNLENCA is contraindicated with strong CYP3A inducers.

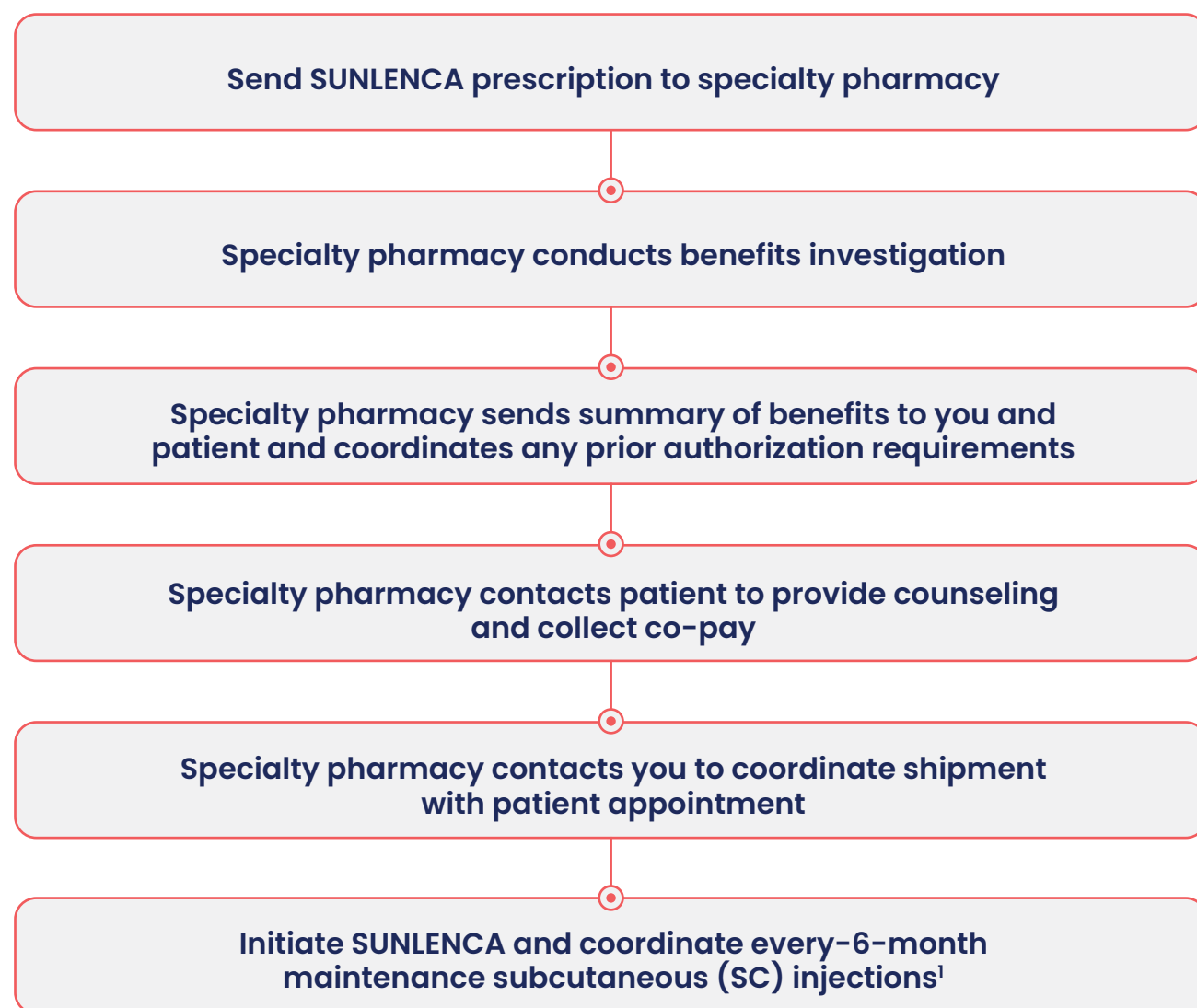
Please see additional Important Safety Information throughout and click for full [Prescribing Information](#) for SUNLENCA.

## SUNLENCA<sup>®</sup> OVERVIEW

SUNLENCA is a long-acting injectable administered twice a year, which provides a complete HIV-1 treatment regimen when used in combination with an optimized background regimen<sup>1</sup>

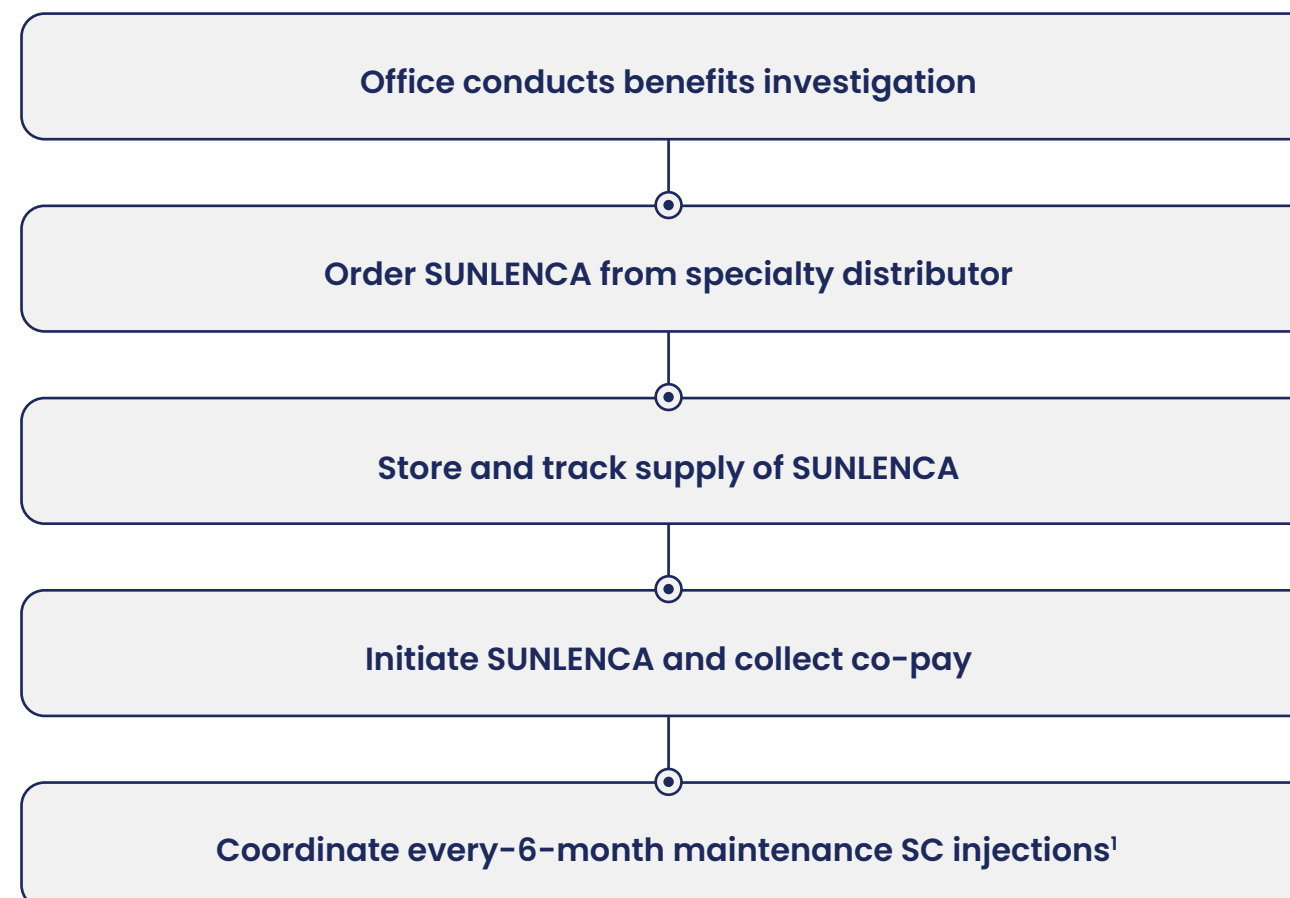
Your office can acquire SUNLENCA in two ways: through a specialty pharmacy or through a specialty distributor (buy-and-bill). Your patient's insurer may dictate how SUNLENCA is acquired.

### Acquiring SUNLENCA via specialty pharmacy



We are here to help! Go to the last page for information on how to connect with a Reimbursement Manager and the Advancing Access<sup>®</sup> team for additional support.

### Acquiring SUNLENCA via buy-and-bill



#### IMPORTANT SAFETY INFORMATION (cont'd)

##### Warnings and precautions

- **Immune reconstitution syndrome**, including the occurrence of autoimmune disorders with variable time to onset, has been reported in patients treated with combination antiretroviral (ARV) therapy.
- **Long-acting properties and potential associated risks with SUNLENCA:** Residual concentrations of SUNLENCA may remain in the systemic circulation of patients for up to 12 months or longer. SUNLENCA may increase exposure, and potential risk of adverse reactions, to drugs primarily metabolized by CYP3A initiated within 9 months after last injection. Counsel patients regarding the dosing schedule because nonadherence could lead to loss of virologic response and development of resistance. If virologic failure occurs, switch to an alternative regimen if possible. If discontinuing SUNLENCA, begin alternate suppressive ARV regimen within 28 weeks from last injection.
- **Injection site reactions** may occur, and nodules and indurations may be persistent.

Please see additional Important Safety Information throughout and click for full [Prescribing Information](#) for SUNLENCA.



## ADMINISTRATION

### Initiation

SUNLENCA<sup>®</sup> initiation includes oral tablets and the first set of SC injections.<sup>1</sup>

- A treatment regimen incorporating SUNLENCA begins with 1 of 2 initiation options. Providers should determine the appropriate initiation option for the patient. See diagrams to the right for additional details<sup>1</sup>
- Patients must maintain an optimized background regimen (OBR) while taking SUNLENCA<sup>1</sup>

### Maintenance

SUNLENCA maintenance involves SC injections administered by a healthcare professional every 6 months, in addition to an ongoing OBR.<sup>1</sup>

- Maintenance injections are given every 26 weeks ( $\pm 2$  weeks) from the date of the previous injection<sup>1</sup>
- If more than 28 weeks have passed since the last injection, and it is clinically appropriate to continue SUNLENCA, restart with either initiation dosage regimen from Day 1<sup>1</sup>

### How to write a SUNLENCA prescription



#### Initiation

##### Option 1:

**Lenacapavir 300-mg tablets (4-tablet blister pack):**  
Take 2 tablets (600 mg) by mouth on both Day 1 and Day 2.

**Lenacapavir injection (309 mg/mL):**  
Inject 927 mg (two 1.5-mL injections) subcutaneously into the abdomen on Day 1 and then every 6 months (26 weeks).

##### Option 2:

**Lenacapavir 300-mg tablets (5-tablet blister pack):**  
Take 2 tablets (600 mg) by mouth on both Day 1 and Day 2 and 1 tablet (300 mg) on Day 8.

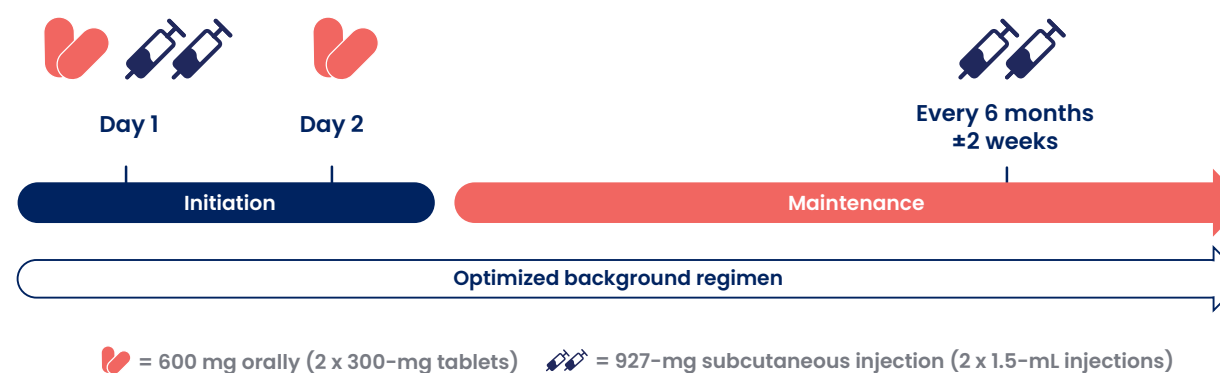
**Lenacapavir injection (309 mg/mL):**  
Inject 927 mg (two 1.5-mL injections) subcutaneously into the abdomen on Day 15 and then every 6 months (26 weeks).

#### Maintenance

**Lenacapavir injection (309 mg/mL):**  
Inject 927 mg (two 1.5-mL injections) subcutaneously into the abdomen every 6 months (26 weeks).

### Two ways to start SUNLENCA prior to maintenance injections<sup>1</sup>:

#### Option 1 (Day 1 First SC Injection)



#### Option 2 (Day 15 First SC Injection)



For more information about SUNLENCA dosing and administration, visit [SunlencaHCP.com](https://www.sunlencahcp.com).

#### IMPORTANT SAFETY INFORMATION (cont'd)

##### Adverse reactions

- Most common adverse reactions (incidence  $\geq 3\%$ , all grades) are injection site reactions (65%) and nausea (4%).

Please see additional Important Safety Information throughout and click for full [Prescribing Information](#) for SUNLENCA.

## ACCESS AND REIMBURSEMENT

### Main factors that will affect coverage and reimbursement for prescribed SUNLENCA<sup>®</sup>



#### 1. Type of Payer

Different insurance statuses and coverage details will impact how a patient accesses SUNLENCA.

Understanding details of a patient's coverage is critical when coordinating procurement of SUNLENCA.



#### 2. Benefit Category

SUNLENCA may be covered under the medical benefit, the pharmacy benefit, or both. The Gilead Advancing Access<sup>®</sup> program can perform a benefits investigation for enrolled patients to confirm coverage. Visit the last page for more information about Advancing Access.



#### 3. Coverage Requirements

Plans may require prior authorization(s) (PA) or other supporting documentation to confirm patient eligibility.

Some plans may allow one PA to cover the course of therapy, while others may require separate PAs for the oral and injectable components.

A specialty pharmacy can support the PA process.<sup>2</sup>

### SUNLENCA must be acquired 1 of 2 ways: through a specialty pharmacy or directly from a specialty distributor



**Oral component** is likely to be covered under the pharmacy benefit. Exceptions are possible.



**SC injectable component** may be covered under the medical benefit and/or the pharmacy benefit.

### The benefit category (ie, pharmacy benefit or medical benefit) under which SUNLENCA is covered by the patient's insurer will dictate how you acquire the medication.

- **Components covered under the pharmacy benefit** can generally be acquired via the designated specialty pharmacy. If the SC injection is covered under the medical benefit, the medication may be acquired directly from a specialty distributor via the buy-and-bill process
- **Assignment of Benefit (AOB)** may be permitted by some payers. AOB allows the designated specialty pharmacy to acquire and bill for reimbursement for SUNLENCA, even when it is covered under the medical benefit
  - The specialty pharmacy can verify if this option is available for your patient

**Go to the Specialty Contacts tab for information on the in-network specialty pharmacy and specialty distributors.**

### IMPORTANT SAFETY INFORMATION (cont'd)

#### Drug interactions

- **Prescribing information:** Consult the full prescribing information for SUNLENCA for more information on Contraindications, Warnings, and potentially significant drug interactions, including clinical comments.
- **Enzymes/transporters:** Drugs that are strong or moderate inducers of CYP3A may significantly decrease the concentration of SUNLENCA. Drugs that strongly inhibit CYP3A, P-gp, and UGT1A1 together may significantly increase the concentration of SUNLENCA. SUNLENCA may increase the exposure of drugs primarily metabolized by CYP3A, when initiated within 9 months after the last injection of SUNLENCA, which may increase the potential risk of adverse reactions.

Please see additional Important Safety Information throughout and click for full [Prescribing Information](#) for SUNLENCA.

## SPECIALTY PHARMACY ACQUISITION

### Key things to know about SUNLENCA<sup>®</sup> specialty pharmacy acquisition



#### Benefits Investigation

- The specialty pharmacy can conduct a benefits investigation to confirm coverage for your patient
- The Gilead Advancing Access<sup>®</sup> program can also run a benefits investigation and offer reimbursement support to patients that enroll in the program



#### Medication Shipment

- The specialty pharmacy will deliver the medication directly to your office (rather than to the patient) unless directed otherwise
- Refrigeration is not required



#### Appointment Coordination

- Your office and the specialty pharmacy will coordinate the timing of product shipment according to the patient's injection appointment schedule

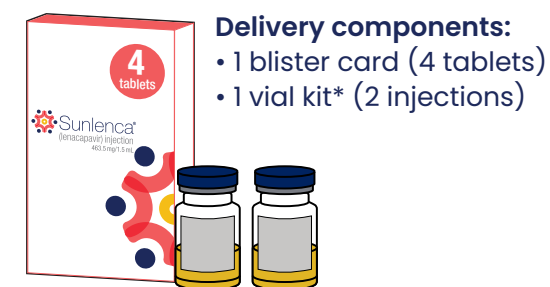


#### Patient Out-of-Pocket (OOP) Responsibilities

- The patient may be required to pay any drug-related co-pays or coinsurance directly to the specialty pharmacy
- Commercially insured patients who are prescribed SUNLENCA may be eligible to enroll in the Gilead Advancing Access co-pay coupon program. Please see the last page for Advancing Access contact information

Please see the **Specialty Contacts** tab for more information about ordering from the specialty pharmacy.

#### Initiation Option 1 (Day 1 First Injection)



- Delivery components:**
- 1 blister card (4 tablets)
  - 1 vial kit\* (2 injections)

#### Initiation Option 2 (Day 15 First Injection)



- Delivery components:**
- 1 blister card (5 tablets)
  - 1 welcome card
  - 1 vial kit\* (2 injections)

#### Maintenance



- Delivery components:**
- 1 vial kit\* (2 injections) per maintenance dose

Images for illustrative purposes only. Actual packaging may differ.

Please see the **Additional Information** tab for a list of the contents provided in the injection vial kit.

\*Vials contain a yellow solution.

#### IMPORTANT SAFETY INFORMATION (cont'd)

##### Dosage and administration

- **Dosage:** Initiation with 1 of 2 options, followed by maintenance dosing once every 6 months. Tablets may be taken with or without food.
  - **Initiation Option 1:** Day 1: 927 mg by subcutaneous injection and 600 mg orally (2 x 300-mg tablets). Day 2: 600 mg orally (2 x 300-mg tablets).
  - **Initiation Option 2:** Day 1: 600 mg orally (2 x 300-mg tablets). Day 2: 600 mg orally (2 x 300-mg tablets). Day 8: 300 mg orally (1 x 300-mg tablet). Day 15: 927 mg by subcutaneous injection.
  - **Maintenance:** 927 mg by subcutaneous injection every 26 weeks +/- 2 weeks from date of last injection.
- **Missed Dose:** During the maintenance period, if more than 28 weeks have elapsed since the last injection and if clinically appropriate to continue SUNLENCA treatment, restart the initiation dosage regimen from Day 1, Option 1 or Option 2.

Please see additional Important Safety Information throughout and click for full [Prescribing Information](#) for SUNLENCA.

## BUY-AND-BILL ACQUISITION

With buy-and-bill, your practice will order and purchase SUNLENCA<sup>®</sup> directly from a specialty distributor within the network.

When covered under the medical benefit, the buy-and-bill process may be preferred or required by the patient's health insurance.

- In many cases, only the injectable component of SUNLENCA will be covered under the medical benefit, while the oral component will be covered under the pharmacy benefit and acquired from the designated specialty pharmacy

### Key things to know about SUNLENCA buy-and-bill acquisition

#### Injectable Component



- Your office will need to plan ahead and coordinate the shipment to arrive prior to the patient's scheduled injection appointment
- The specialty distributor will supply the medication to your office
- Your office will collect any co-pays or coinsurance for the injectable component from the patient
- If your office prefers not to buy-and-bill, and the patient's insurance plan does not allow SUNLENCA to be obtained through the specialty pharmacy, you may consider referring a patient to an alternate provider for the injection

#### Oral Component



- If the oral component is covered under the pharmacy benefit, it must be ordered from the specialty pharmacy; this is not subject to buy-and-bill reimbursement
- The specialty pharmacy will work with your office to coordinate shipment of the oral component around scheduled injection appointments

**Please see the Specialty Contacts tab of this document for more information about ordering from a specialty distributor authorized by Gilead.**

## MEDICARE BUY-AND-BILL REIMBURSEMENT

### J codes are used to buy-and-bill for Medicare reimbursement



- Until a permanent J code is established, a miscellaneous code (J3490) may be used
- Until the average sales price (ASP) is calculated, reimbursement will be set at 103% of wholesale acquisition cost (WAC)\*
- It's important to note that when filing claims for SUNLENCA under J3490, additional information will be needed for processing and determined prior to billing
  - Additional information may vary by payer

Healthcare providers and facilities can also bill Medicare for professional services associated with drug administration.



Medicare typically pays 80% of the allowed charges for most covered Part B drugs and the associated drug administration, and the remaining 20% is typically paid by the beneficiary as coinsurance. Medicare-eligible patients are also responsible for paying a deductible amount, which may be covered by supplemental insurance.

\*Medicare allowable will be 106% of ASP once the ASP is established.

**For more information, see [Sample Claim Forms for Buy-and-Bill Acquisition on the following pages.](#)**

### IMPORTANT SAFETY INFORMATION (cont'd)

#### Pregnancy and lactation

- **Pregnancy:** There is insufficient human data on the use of SUNLENCA during pregnancy. An Antiretroviral Pregnancy Registry (APR) has been established.
- **Lactation:** Individuals infected with HIV-1 should be instructed not to breastfeed, due to the potential for HIV-1 transmission.

Please see additional Important Safety Information throughout and click for full [Prescribing Information](#) for SUNLENCA.

# SAMPLE CLAIM FORMS

The sample claim forms are for reference only and relevant to the Medicare SUNLENCA® buy-and-bill process. Commercial claim forms may look different.

## CMS 1500: HCP Office

### Box 19

SUNLENCA, route of administration, NDC, dosage (guidelines will vary by payer)

### Box 21

Applicable diagnosis codes

### Box 24D

Approved product and administrator coding. Until permanent J code is approved for SUNLENCA, state miscellaneous code here.

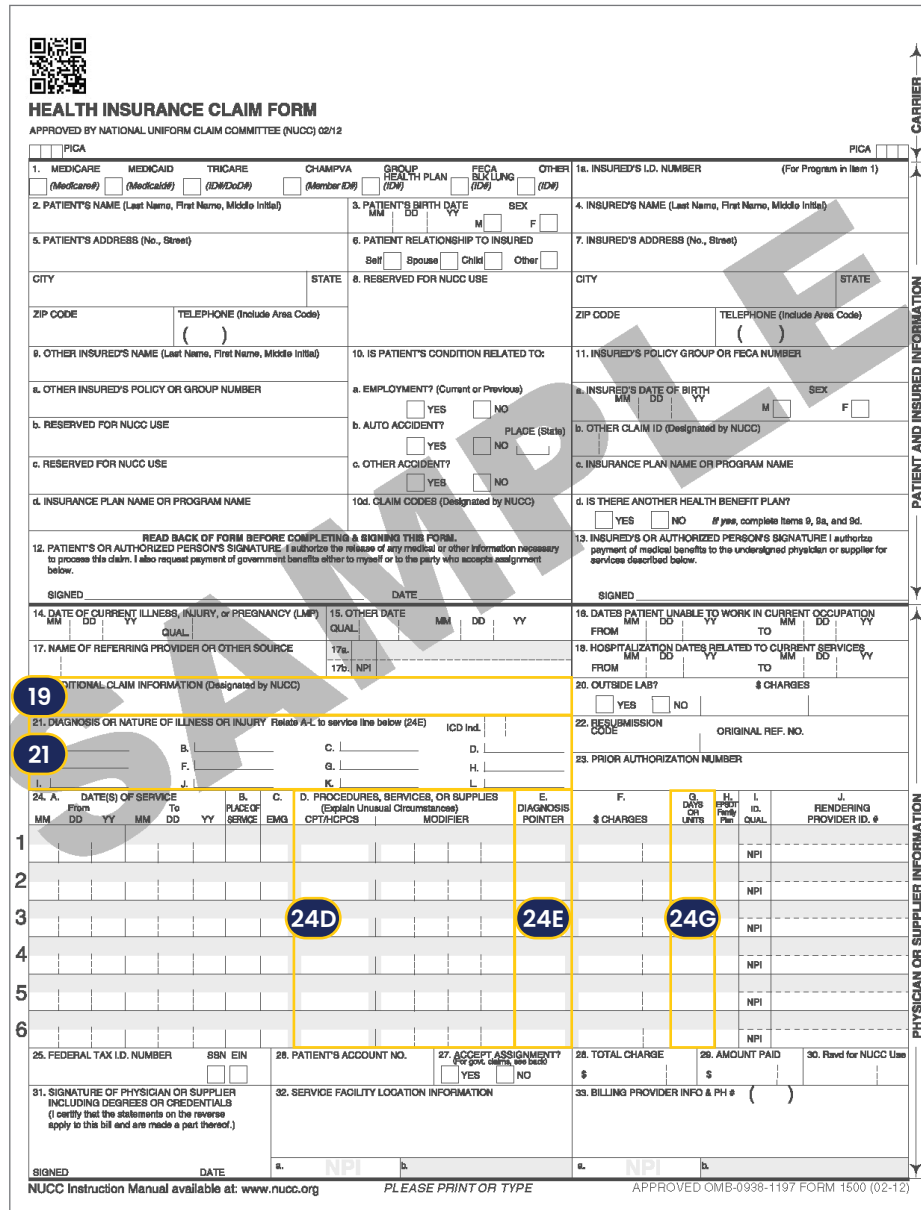
### Box 24E

Record ICD-10-CM code from Box 21

### Box 24G

Appropriate units used

- On a separate line, enter units of waste (if applicable) and any associated modifier (indicate unit to mg conversion for SUNLENCA)



**HEALTH INSURANCE CLAIM FORM**  
APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

**Box 19:** 21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate A-L to service line below [24E])

**Box 21:** 19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)

**Box 24D:** 24. A. DATE(S) OF SERVICE From To

**Box 24E:** 24. B. PLACE OF SERVICE (EMG, CPT/HCPBS, MODIFIER)

**Box 24G:** 24. G. CHARGES

## CMS 1450: Hospital Outpatient

### Locator 42

Suggested revenue coding for each line item billed

### Locator 43

Descriptor for each line item

- Provide brand and generic names

### Locator 44

Appropriate HCPCS code and CPT code

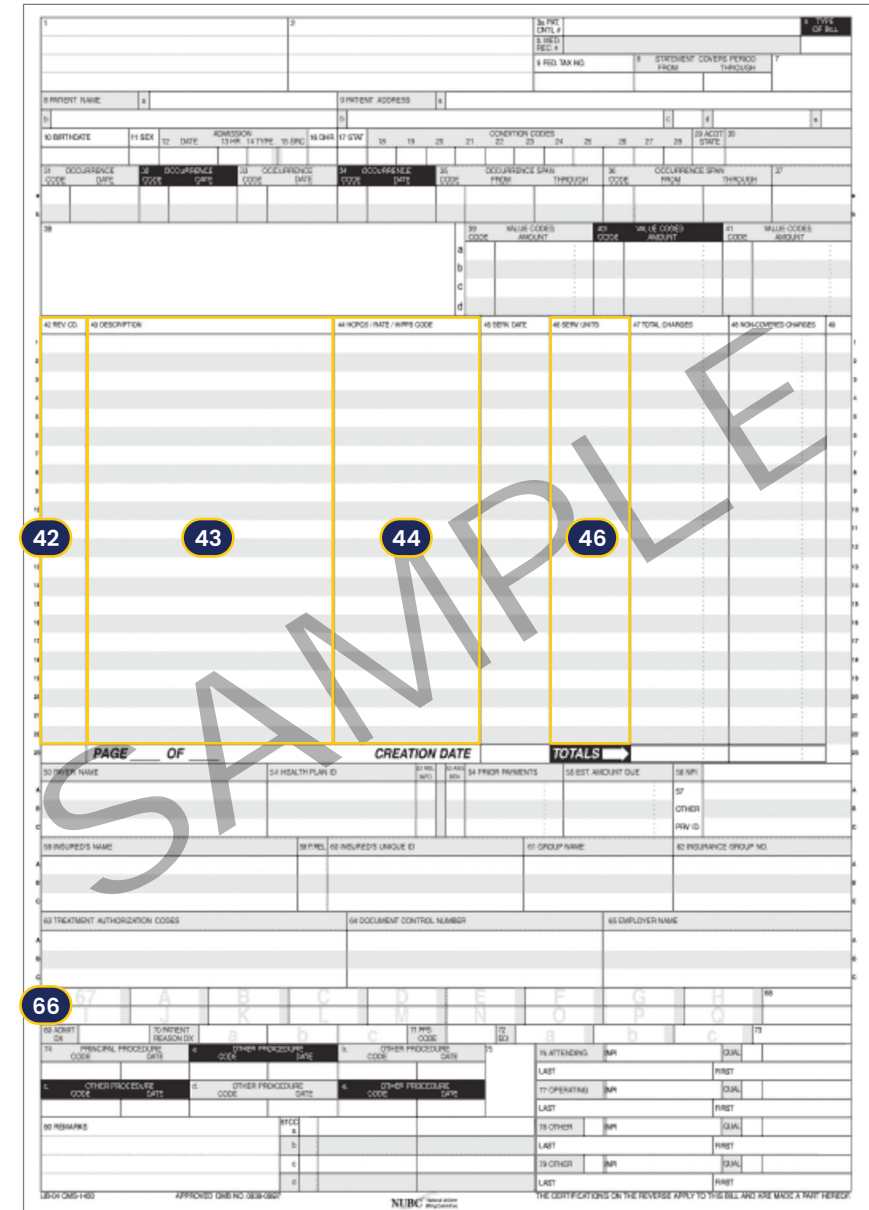
### Locator 46

Appropriate units used

- On a separate line, enter units of waste (if applicable) and any associated modifier (indicate unit to mg conversion for SUNLENCA) and include in Locator 44

### Locator 66

Applicable diagnosis codes



**Locator 42:** 42. REVENUE CODE

**Locator 43:** 43. DESCRIPTION

**Locator 44:** 44. HCPCS / RATE / NDC CODE

**Locator 46:** 46. UNITS

**Locator 66:** 66. DIAGNOSIS

Information provided in this resource is for informational purposes only and does not guarantee that codes will be appropriate or that coverage and reimbursement will result. Customers should consult with their payers for all relevant coverage, coding, and reimbursement requirements. It is the sole responsibility of the provider to select proper codes and ensure the accuracy of all claims used in seeking reimbursement. This resource is not intended to be legal advice or substitute for a provider's independent judgment.

## IMPORTANT SAFETY INFORMATION (cont'd)

### Contraindications

- Coadministration:** Concomitant administration of SUNLENCA is contraindicated with strong CYP3A inducers.

Please see additional Important Safety Information throughout and click for full Prescribing Information for SUNLENCA.

## COMMONLY USED BILLING CODES

### Quick reference of commonly used codes for SUNLENCA<sup>®</sup>

<b>Current Procedure Technology (CPT<sup>®</sup>) code for reporting the injection of a provider-administered prescription drug</b>	96372 Therapeutic, prophylactic, or diagnostic injection (specify SUNLENCA); subcutaneous or intramuscular
<b>Healthcare Common Procedure Coding System (HCPCS) code for reporting a provider-administered prescription drug</b>	J3490 Drugs unclassified injection (This code will be used until a permanent code is assigned for SUNLENCA)
<b>National Drug Code (NDC) Codes (10-digit)</b>	SUNLENCA Tablets NDC 61958-3001-1 (4-count) SUNLENCA Tablets NDC 61958-3001-2 (5-count) SUNLENCA Injection Kit NDC 61958-3002-1 SUNLENCA Vial NDC 61958-3004-1
<b>NDC (11-digit)</b>	SUNLENCA Tablets NDC 61958-3001-01 (4-count) SUNLENCA Tablets NDC 61958-3001-02 (5-count) SUNLENCA Injection Kit NDC 61958-3002-01 SUNLENCA Vial NDC 61958-3004-01
<b>International Classification of Disease ICD-10 diagnosis codes</b>	Z21 Asymptomatic HIV infection status B20 Human immunodeficiency virus disease (HIV)

### Place of service

Office	11
Independent clinic	49
Off-campus outpatient hospital	19
On-campus outpatient hospital	22

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## PRODUCT PACKAGING

### The injection vial kit includes:



- 2 vials
- 2 vial access devices
- 2 syringes and injection needles
- Instructions for use

Store tablets and injections at a controlled room temperature (20 °C–25 °C, 68 °F–77 °F). Keep the vials in the original carton until just prior to preparation in order to protect from light.

### The oral initiation kit includes:



- 4-tablet blister pack or 5-tablet blister pack
- Welcome card (5-tablet blister packs only)

Only one initiation blister pack will be provided based on which initiation option you've chosen for the patient.

Store tablets and injections at a controlled room temperature (20 °C–25 °C, 68 °F–77 °F). Dispense and store tablets only in original blister pack.

## IMPORTANT SAFETY INFORMATION (cont'd)

### Warnings and precautions

- **Immune reconstitution syndrome**, including the occurrence of autoimmune disorders with variable time to onset, has been reported in patients treated with combination antiretroviral (ARV) therapy.
- **Long-acting properties and potential associated risks with SUNLENCA:** Residual concentrations of SUNLENCA may remain in the systemic circulation of patients for up to 12 months or longer. SUNLENCA may increase exposure, and potential risk of adverse reactions, to drugs primarily metabolized by CYP3A initiated within 9 months after last injection. Counsel patients regarding the dosing schedule because nonadherence could lead to loss of virologic response and development of resistance. If virologic failure occurs, switch to an alternative regimen if possible. If discontinuing SUNLENCA, begin alternate suppressive ARV regimen within 28 weeks from last injection.
- **Injection site reactions** may occur, and nodules and indurations may be persistent.

Please see additional Important Safety Information throughout and click for full [Prescribing Information](#) for SUNLENCA.





## SUNLENCA® SPECIALTY PHARMACY

SUNLENCA can be ordered through the following designated specialty pharmacy:



Phone: 1-877-602-5889

Fax: 1-877-733-3199

Website: [www.cvsspecialty.com](http://www.cvsspecialty.com)

SUNLENCA can also be ordered through the following authorized Specialty Distributors (buy-and-bill). These authorized distributors include:



Phone: 1-866-677-4844

Website: [specialtyonline.cardinalhealth.com](http://specialtyonline.cardinalhealth.com)



Phone: 1-800-746-6273

Website: [asdorder.amerisourcebergen.com](http://asdorder.amerisourcebergen.com)

The list of authorized distributors is updated periodically and subject to change. Please visit [gilead.com/purpose/medication-access/authorized-distributors](http://gilead.com/purpose/medication-access/authorized-distributors) for updates.

## ADDITIONAL SUPPORT FOR ACQUIRING SUNLENCA

### Reimbursement Managers



For additional support with understanding general access and acquisition topics, please call 877-290-6025 to schedule an appointment with a Reimbursement Manager.

### Gilead Advancing Access® Program



For information on patient support offerings, visit [GileadAdvancingAccess.com/hcp](http://GileadAdvancingAccess.com/hcp) or call 1-800-226-2056, Monday through Friday, 9 AM to 8 PM EST.

Advancing Access can address patient-specific questions for patients enrolled in the Advancing Access program.

### IMPORTANT SAFETY INFORMATION (cont'd)

#### Adverse reactions

- **Most common adverse reactions** (incidence  $\geq 3\%$ , all grades) are injection site reactions (65%) and nausea (4%).

**Please see additional Important Safety Information throughout and click for full Prescribing Information for SUNLENCA.**

#### References

1. SUNLENCA. Prescribing information. Gilead Sciences, Inc.; 2022.
2. DeMarzo A. Pharmacy's role in the prior authorization process. PriorAuthTraining.org. Published December 28, 2020. Accessed September 16, 2022. <https://www.priorauthtraining.org/pharmacys-role-in-the-prior-authorization-process/>



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