

Pharmaceutical Company Patient Assistance Programs and Cost-sharing Assistance Programs: **HIV Treatment**

April 2023

What is a Patient Assistance Program?

Patient assistance programs (PAPs) are run by, or in association with, pharmaceutical companies to provide free or low-cost medications to people who meet certain eligibility requirements, including federal poverty level (FPL)-based income limits. The FPL is a specific dollar amount that changes annually and is based on the number of people in the household and whether the household is in Alaska, Hawaii, or the continental U.S. PAPs typically set their income limits at a percentage point above the <u>annual FPL</u> (e.g., 400% of the FPL for 2023 for a family of two residing in Alabama is \$78,880 [\$19,720 X 4.00]).

In addition to income requirements, PAPs are typically limited to individuals who do not have, or may not qualify for, other forms of insurance or assistance programs providing prescription drug coverage (e.g., ADAPs). Some company PAPs may be open to certain insured people with low incomes (e.g., Medicare beneficiaries) to help with affordability challenges associated with out-of-pocket medication cost requirements.

Manufacturer PAPs maintain their own eligibility criteria, electronic enrollment portals, and printable/fillable applications. Additionally, many PAPs offer expedited verification processes and first-time fills via a retail pharmacy in support of rapid antiretroviral therapy initiation. People living with HIV (or providers on their behalf) are strongly encouraged to use the toll-free numbers for the relevant PAPs if expedited verification is required.

The table on Page 2 provides an overview of PAP contact information, drugs covered, financial eligibility, and other pertinent details.

What is a Cost-Sharing Assistance Program?

A cost-sharing assistance program (CAP) is a program operated by pharmaceutical companies to provide assistance with cost-sharing requirements (including deductibles, co-payments and co-insurance) associated with prescription drug fills/refills for clients with private health insurance. Pharmaceutical company CAPs cannot be used by individuals covered by Medicaid or Medicare. Additionally, ADAP clients should be sure to check with their ADAP program before enrolling in a pharmaceutical company CAP. The table on **Page 3** provides an overview of CAP contact information and assistance offered.



Pharmaceutical Company Patient Assistance Programs

COMPANY	CONTACT INFORMATION	DRUGS COVERED	FINANCIAL ELIGIBILITY
AbbVie	800-222-6885 <u>abbvie.com/patients/patient-</u> <u>support/patient-assistance.html</u>	Kaletra and Norvir	600% FPL for Kaletra; no income limits for Norvir
Gilead Sciences	800-226-2056 gileadadvancingaccess.com	Biktarvy, Complera, Descovy, Emtriva, Genvoya, Odefsey, Stribild, Sunlenca, Truvada, and Tybost	500% FPL
Johnson & Johnson Patient Assistance Foundation, Inc, and Janssen Pharmaceuticals. ¹	800-652-6227 (uninsured PAP) jjpaf.org 800-652-6227 (insured PAP) newprograminfo.com	Edurant, Intelence, Prezcobix, Prezista, and Symtuza	300% FPL
Merck & Co.	800-727-5400 merckhelps.com	Isentress, Isentress HD, Delstrigo, and Pifeltro	400% FPL
Theratechnologies	833-238-4372 trogarzo.com/hcp/ patient-support/	Trogarzo	Not disclosed; contact manufacturer
ViiV Healthcare ^{2,3}	844-588-3288 <u>ViiVconnect.com</u>	Combivir, Cabenuva, Dovato, Epivir, Epzicom, Juluca, Lexiva, Retrovir, Rukobia, Selzentry, Tivicay/Tivicay PD, Triumeq, Triumeq PD, Trizivir, Viracept, and Ziagen	500% FPL

¹ The Johnson & Johnson Patient Assistance Foundation PAP is for <u>uninsured patients</u>. The Janssen Pharmaceuticals PAP is for <u>insured patients</u> – including those who have a commercial or employer-sponsored insurance plan or government insurance, such as Medicare or Medicaid – who are facing affordability challenges. The financial eligibility is the same for both the JJPAF and Janssen PAPs.



² In addition to financial eligibility requirement, applicant must be uninsured or have no prescription drug coverage (including ADAP); or have a Medicare Part B, Medicare Part D, or Medicare Advantage Plan, and have spent at least \$600 or more on out-of-pocket prescription expenses during the current calendar year; have a private insurance plan limited to generic-only coverage, outpatient use only, or therapeutic class exclusion (non-coverage) of drug.

³ ViiVConnect stopped accepting new PAP applications for the following products in July 2022: Combivir, Epzicom, Lexiva, Selzentry (25 mg and 75 mg only) Tivicay (10 mg and 25 mg only), Trizivir, and Ziagen. These antiretroviral drug products are to be discontinued by the company

Pharmaceutical Company Cost-Sharing Assistance Programs

COMPANY	CONTACT INFORMATION	ASSISTANCE	
AbbVie	800-441-4987 <u>abbvie.com/patients/patient-</u> <u>support/patient-assistance/savings-card.html</u>	Kaletra: \$400 maximum per month/\$4,800 per year Norvir: \$100 maximum per month/\$1,200 per year	
Gilead Sciences	800-226-2056 gileadadvancingaccess.com	Sunlenca: \$9,600 per year Biktarvy, Descovy, Genvoya, & Truvada: \$7,200 per year Complera, Odefsey, & Stribild: \$6,000 per year Emtriva: \$300 per month, \$3,600 per year Tybost: \$50 maximum per month, \$600 per year	
Janssen Pharmaceuticals	877-227-3728 janssencarepath.com	Symtuza: \$12,500 per year Edurant, Intelence, Prezcobix, & Prezista: \$7,500 per year	
Merck & Co.	800-727-5400 <u>merckhelps.com</u>	Isentress, Isentress HD, Delstrigo, & Pifeltro: \$6,800 per year	
Theratechnologies	833-238-4372 trogarzo.com/hcp/ patient-support/	Trogarzo: \$7,500 per year	
ViiV Healthcare¹	844-588-3288 <u>ViiVconnect.com</u>	Cabenuva: \$13,000 per year (medical and pharmacy benefit cost- sharing; up to \$100 per treatment copay assistance associated with provider administration) Triumeq, Triumeq PD & Rukobia: \$7,500 per year Dovato & Juluca: \$6,250 per year Tivicay & Tivicay PD: \$5,000 per year Lexiva, Selzentry, Ziagen, Trizivir, and Viracept: \$4,800 per year	

¹ These antiretroviral drug products will be discontinued by the company beginning January 1, 2024: Combivir, Epzicom, Lexiva, Selzentry (25 mg and 75 mg only), and Tivicay (10 mg and 25 mg only). Trizivir and Ziagen are being discontinued beginning November 27, 2023.



Other Programs Providing Medication Assistance for People Living with HIV/AIDS

HarborPath

Harborpath.org

HarborPath is a non-profit organization that operates a special patient assistance program for individuals on ADAP waiting lists. An individual is eligible for the HarborPath ADAP waiting list program only if they have been deemed eligible for ADAP in their state and is verified to be on an ADAP waiting list in that state.

Patient Advocate Foundation

copays.org

The Patient Advocate Foundation offers a cost-sharing and insurance premium assistance program for insured individuals whose annual income is less than 400% FPL. The yearly maximum award is \$7,500 to help cover the out-of-pocket costs incurred for HIV treatment (the award is not drug-specific). Patients must reapply every 12 months.

This publication was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under cooperative agreement #U69HA26846 as part of an award totaling \$500,000 with zero percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government

