



# Resources to Address Potential Barriers to Long-Acting Injectable Antiretroviral (L-AI ARV) Therapy

#### Please use the Cabenuva NASTAD-HIVMA-AAHIVM Resources

https://aahivm.org/wp-content/uploads/2021/01/Long-Acting-ARVs- V2 010621 Final.pdf

The ViiVConnect site <a href="https://www.viivconnect.com/injectable/">https://www.viivconnect.com/injectable/</a> for the latest industry information.

Based on Ryan White provider feedback on potential barriers to long acting injectable antiretrovirals (L-AI ARVs), we have gathered the following resources, suggestions, and best practices.

#### **Patient Adherence Issues:**

Area of concern	Suggestions and best practices
Problems with	Use overbook appointment spots or walk-in appointment spots as a failsafe on
tracking patient	rescheduled appointments.
follow-up	A best practice is to create a spreadsheet to track patients on Cabenuva (and shipments) when current appointment systems are unable to set up reminders and follow-up appointments (or flag Cabenuva users).  ViiVConnect provides Cabenuva-specific support services for providers and clients.
Possible issues with patient adherence	A best practice is to incorporate into clinical protocol details regarding patient adherence issues that address comments and or concerns with Cabenuva patient adherence.
Problems with drug delivery	Contact our Pharmacy Benefit Management (PBM) (Ramsell) will ship medications directly to the administration site for uninsured ADAP clients.  The Walgreen's/Alliance Rx Walgreen's Specialty Pharmacy contracted with our Pharmacy Benefit Management (PBM) (Ramsell) will ship medications directly to the administration site for both ADAP insured/uninsured.  The Specialty Pharmacy will handle purchase, receipt, storage, and delivery to the clinics/providers.

	Contact Ramsell for lost and delayed shipments, damaged or unusable medications due to shipping, broken vials noted on or right after delivery or indications that temperature has not been maintained during shipping.  Contact Ramsell if a Cabenuva vial shatters on use or if the product appears discolored or contains particulate matter. Please note, Cabotegravir vial is tinted.  Contact PBM for timeframe available for replacement medication delivery.
Oral medication	For initial oral lead practitioner would place order for initiation of Cabenuva through ViiVConnect. A prescription needs to be sent to TheraCom for Vocabria (cabotegravir) and Edurant (rilpivirine).
	For planned missed injection The current process is to contact ViiVConnect to get information to send the prescription to TheraCom for Vocabria (the cabotegravir portion of the oral medication).
	ViiV contact for questions about the initial oral lead medication before initiation of Cabenuva.
	For the State of Alabama, contact Tammi Stewart, ViiV Reimbursement Manager at <a href="mailto:tammi.s.stewart@ViiVHealthcare.com">tammi.s.stewart@ViiVHealthcare.com</a> or 470-457-0840.
	Ramsell is not responsible for the oral lead in medication. Contact Viiv Connect.

## **Staff Training Issues:**

Area of concern	Suggestions and best practices
Staff training specific to Cabenuva and Z- track injection	Please see the Cabenuva package insert for detailed injection instructions.  There is also an injection video on the Cabenuva website for training purposes.  A best practice would be to document clinic staff training in staff file after injection instruction.
Possible issues with re- scheduling appropriately for the injection	Clinical support staff should be made aware of the +/- seven-day window limitation to schedule for Cabenuva injections. Include front desk staff in training on the importance of rescheduling patients receiving Cabenuva in a timely manner.  If a patient cannot be reached or cancels their appointment – refer to internal processes and include seeking county health department support to locate the patient (through a linkage and engagement specialist or disease intervention specialist).
Target Date Approach	Identify the same date every month (target date). This makes it easier for clients. If a target date needs to be rescheduled it should be rescheduled during the first 7 days of the treatment window, minus 7 days prior to the target date. This will give the client plenty of time to reschedule the appointment if needed.

	*Please note: CAB + RPV can be given up to 7 days before or 7 days after the target date of the monthly injection.
Clinical considerations for Cabenuva temperature control and administration	DO NOT TAKE THE MEDICATION OUT OF THE FRIDGE UNTIL THE PATIENT ARRIVES.  Please wait 15 minutes for the medication to warm up at room temperature prior to injection administration.  Larger needles may be needed to administer the injection to accommodate for body size.

### **Transportation Issues:**

Area of concern	Suggestions and best practices
Transportation access limits ability to present to clinic for follow up	Local areas are to determine how to address transportation needs within their jurisdictions. Transportation issues are not unique to this drug and are handled differently in different areas based on available resources.

### **Medication Costs:**

Area of concern	Suggestions and best practices
Coverage for	Please see the cost sharing and patient assistance information on the NASTAD-
those not eligible	HIVMA-AAHIVM Resource.
for the AIDS Drug Assistance Program (ADAP)	The Patient Assistance Program (PAP) CANNOT BE USED IF THE CLIENT IS ON ADAP.
	To be eligible for PAP, the patient MUST:
	• Live in one of the 50 states, the District of Columbia, or Puerto Rico
	• Have a household income less than or equal to 400 percent of the Federal Poverty Level based on household size
	Not be eligible for Medicaid
	Meet one of the following:
	Have no prescription drug coverage
	• Have a Medicare Part B, Medicare Part D, or Medicare Advantage Plan
	• Have a private insurance plan limited to generic-only coverage, outpatient use only, or therapeutic class exclusion (non-coverage) of drug

The PAP decision will be provided after all information is confirmed.
The PAP is in Section 8 of the ViiV enrollment form.

## Billing:

Area of concern	Suggestions and best practices
Administration costs	Administration costs for the Cabenuva injection range from \$20 to \$25.08 based on current Medicare rates.
	Providers/clinics may bill for Level 1 Evaluation and Management Office Visit and administration fee for the first visit for documented education and the injection.
	For ADAP insured clients enrolled in Health Plus Alabama (HPAL) or Enhanced Plus Blue Rx Medicare Part D plan our PBM (Ramsell) will pay the Rx copay remaining from the client's primary insurer and the dispensing fee.
	There will be no cost to either ADAP uninsured/insured clients.