

# TEN THINGS TO CONSIDER WHEN YOU BUY AND BILL SUBLOCADE™ (BUPRENORPHINE EXTENDED-RELEASE)\*

INSUPPORT™ created this checklist to help healthcare providers (HCPs) identify some considerations for buying and billing SUBLOCADE.

## 1. SOME HEALTH PLANS ALLOW ONLY BUY-AND-BILL ACCESS FOR SUBLOCADE

Certain health insurance plans, such as fee-for-service Medicare, require HCPs to buy and bill SUBLOCADE. HCPs can consider the payer mix within their practice or facility and identify which plans require this access option.

## 2. SUBLOCADE IS A CONTROLLED SUBSTANCE WITH SPECIAL STORAGE, HANDLING, AND DISPOSAL REQUIREMENTS

The Prescribing Information for SUBLOCADE describes the US Food and Drug Administration's requirements for storage, handling, and disposal of the medication. There are US Drug Enforcement Administration (DEA) requirements for storage of a controlled substance that must be followed. There may be additional regulations and requirements that must be followed. HCPs should review federal, state, and local rules about storing controlled substances. Visit [https://www.dea diversion.usdoj.gov/pubs/manuals/sec/sec\\_req.htm](https://www.dea diversion.usdoj.gov/pubs/manuals/sec/sec_req.htm) to review a manual from the DEA for suggested security measures for HCPs who store controlled substances within their facilities.

## 3. VERIFY HEALTH INSURANCE BENEFITS PRIOR TO ADMINISTERING SUBLOCADE TO IDENTIFY ISSUES THAT CAN IMPACT PATIENT ACCESS

Conduct a complete verification of a patient's health insurance plan benefits to uncover key information needed to access SUBLOCADE. For example, a plan may require the HCP to request a prior authorization and fill out a specific form before it will cover SUBLOCADE. It is helpful to confirm that a plan will support buy-and-bill access for SUBLOCADE under the patient's medical plan benefit prior to administering the drug to the patient. Patients and HCPs can enroll in INSUPPORT™ to receive assistance with benefits investigation.

### **WARNING: RISK OF SERIOUS HARM OR DEATH WITH INTRAVENOUS ADMINISTRATION; SUBLOCADE RISK EVALUATION AND MITIGATION STRATEGY**

- Serious harm or death could result if administered intravenously. SUBLOCADE forms a solid mass upon contact with body fluids and may cause occlusion, local tissue damage, and thrombo-embolic events, including life threatening pulmonary emboli, if administered intravenously.
- Because of the risk of serious harm or death that could result from intravenous self-administration, SUBLOCADE is only available through a restricted program called the SUBLOCADE REMS Program. Healthcare settings and pharmacies that order and dispense SUBLOCADE must be certified in this program and comply with the REMS requirements.

\*This list may not be comprehensive.

See accompanying full Prescribing Information, including **BOXED WARNING**, and Medication Guide or go to [www.sublocade.com](http://www.sublocade.com).

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**Sublocade™**  
(buprenorphine extended-release)  
injection for subcutaneous use   
100mg•300mg

#### 4. CODING REQUIREMENTS FOR SUBLOCADE™ (BUPRENORPHINE EXTENDED-RELEASE) AND ITS INJECTION PROCEDURE VARY BY PAYER

Certain health insurance plans, such as Medicaid, require HCPs to include the 11-digit National Drug Code on medical claims along with the drug-specific Q code for SUBLOCADE. Plan-specific coding guidance can be obtained during a benefits investigation. For additional information, visit <https://www.insupport.com/specialty-product/resources-tools> and review the Billing and Coding Guide for SUBLOCADE.

#### 5. MANAGED CARE CONTRACTS ARE A CRITICAL PART OF APPROPRIATE REIMBURSEMENT

When considering buy and bill, HCPs should understand reimbursement rates for SUBLOCADE from payers. Call each payer to discuss and/or review current contracts to understand how SUBLOCADE will be reimbursed.

#### 6. DESIGNATE A STAFF PERSON TO BE A SUBLOCADE CHAMPION TO IMPROVE ACCOUNTABILITY

Designating a staff person to perform a daily comparison of charge entries against an inventory control log helps to ensure SUBLOCADE is accurately accounted for each patient.

#### 7. THERE ARE WAYS TO BE PREPARED BEFORE SUBMITTING A CLAIM\*

Contact your INSUPPORT™ Field Reimbursement Specialist (FRS) to review the Billing and Coding Guide for SUBLOCADE.

#### 8. INSUPPORT OFFERS FINANCIAL SUPPORT FOR ELIGIBLE COMMERCIALY INSURED PATIENTS†

Do not let a patient's financial concerns about the out-of-pocket costs of therapy prevent them from accessing care with SUBLOCADE. INSUPPORT offers a copay assistance program for SUBLOCADE that may assist eligible patients with copays for their SUBLOCADE injections. Restrictions apply. Contact INSUPPORT or your FRS for more information.

#### 9. MANY CLAIMS DENIALS CAN BE APPEALED

Contact the payer to confirm the process required to appeal a denied claim. INSUPPORT can also provide assistance with claims appeals.

#### 10. CONSIDER STORING DIFFERENT DOSAGES OF SUBLOCADE SEPARATELY

Some patients prescribed SUBLOCADE may need a dosage adjustment during treatment. Sorting SUBLOCADE by different dosage strengths and keeping stock organized may be helpful.

\*This assistance does not relieve HCP of duty to ensure accuracy of supplied information.

†The INSUPPORT Copay Assistance Program is valid ONLY for patients with private insurance who are prescribed SUBLOCADE for on-label use. Patients with government insurance are not eligible for the Copay Assistance Program, including, but not limited to, Medicare, Medicaid, Medigap, VA, DoD, TRICARE, CHAMPVA, or any other federally or state-funded government-assisted program. Other restrictions apply. Visit [insupport.com](https://www.insupport.com) to view complete Terms & Conditions. Copay assistance to eligible patients may not be sufficient to cover the entire cost of copay.

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(buprenorphine extended-release)  
injection for subcutaneous use ©  
100mg-300mg