

Sunlenca (lenacapavir) Effective 07/01/2023

Plan	 ☐ MassHealth UPPL ⊠ Commercial/Exchange 	Program Type	 Prior Authorization Quantity Limit Step Therapy
Benefit	☑ Pharmacy Benefit☑ Medical Benefit		
Specialty Limitations	This medication has been designated specialty and must be filled at a contracted specialty pharmacy.		
	Medical an	S	
Contact	All Plans	Phone: 877-519-1908	Fax: 855-540-3693
Information	Non-Specialty Medications		
	All Plans	hone: 800-711-4555	Fax: 844-403-1029
Exceptions	N/A		

Overview

Sunlenca is indicated for the treatment of HIV-1 infection, in combination with other antiretrovirals, in heavily treatment-experienced adults with multidrug-resistant HIV-1 infection failing their current antiretroviral regimen due to resistance, intolerance, or safety considerations

Coverage Guidelines

Authorization may be granted for members new to the plan who are currently receiving treatment with Sunlenca, excluding when the product is obtained as samples or via manufacturer's patient assistance programs.

OR

Authorization may be granted for treatment when all the following criteria are met:

- 1. Member has a diagnosis HIV-1 infection
- 2. Member is 18 years of age or older
- 3. Provider attestation that the member is treatment experienced with multidrug-resistant HIV and has received at least two prior systemic therapies from different classes (e.g., nucleoside reverse transcriptase inhibitors, non-nucleoside reverse transcriptase inhibitors, protease inhibitors, integrase inhibitors)

Continuation of Therapy

Reauthorization will be granted for a covered indication when there is no evidence of unacceptable toxicity or disease progression while on the current regimen.

Limitations

1. Initial approvals and reauthorizations will be granted for 12 months

References

1. Sunlenca (lenacapavir) [prescribing information]. Foster City, CA: Gilead Sciences Inc; December 2022.

Review History

Mass General Brigham Health Plan includes Mass General Brigham Health Plan, Inc. and Mass General Brigham Health Insurance Company.

04/12/2023 – Reviewed and Created for April P&T; Effective 7/1/23