

PrEP (Pre Exposure Prophylaxis) Coverage – Questions to ask your insurance company

In order to know whether or not your insurance company covers the cost of Truvada® (tenofovir disoproxil fumarate 300 mg/emtricitabine 200 mg) or its generic version for HIV prevention (not HIV treatment) you need to call your insurance company with your plan number to ask very specific questions:

- **Is Truvada® (tenofovir disoproxil fumarate 300 mg/emtricitabine 200 mg) or a generic version covered by my plan?**

You may need to give them the drug identification number (DIN) as this is easiest way for them to look up in their system.

Drug identification numbers (DIN)

Truvada		02274906
Apo-Emtricitabine-Tenofovir	200mg/300mg	02452006
Jamp Emtricitabine/Tenofovir Disoproxil Fumarate	200mg/300mg	02487012
Mylan-Emtricitabine/ Tenofovir Disoproxil Fumarate	200mg/300mg	02443902
PMS-Emtricitabine-Tenofovir	200mg/300mg	02461110
Sandoz Emtricitabine-Tenofovir	200mg/300mg	02487853
Teva- Emtricitabine/Tenofovir	200mg/300mg	02399059

- **Does the plan require me to enroll in Pharmacare (the provincial drug program) at some point?**

Some plans won't tell you from the beginning that signing up for Pharmacare is needed, but they may stop paying if you hit a certain dollar amount unless they have received proof that you are enrolled in Pharmacare and/or you have Exceptional Drug (EDS, with Manitoba Health) approval for the medication. The insurance company may request that you send in a letter indicating the amount of your Pharmacare deductible.

Currently EDS approval for Truvada® is only given when it is for chronic HIV treatment and Post Exposure Prophylaxis (PEP) for 28 days, but not for PrEP (Pre Exposure Prophylaxis).

- **What percentage or portion of the total cost of Truvada® (or its generic version) is covered by my plan?**

For example, some companies will say they cover 80% so you will have to pay the other 20%. Other plans don't cover Truvada® or its generic version at all.

- **Is there a maximum dollar amount the plan will cover each year? Or is there a maximum dollar amount the plan will cover over my lifetime?**

- **Does the benefit year run on the calendar year?**

Some plans will follow the Pharmacare year (April 1- March 31) rather than the calendar year (Jan 1 – Dec 31)

- **Is there a maximum dispensing fee the plan will pay?**

A dispensing fee is the additional charge pharmacies require for their service, and those can be as high as \$30 per medication. Some plans will only pay part of the dispensing fee so you are required to pay any difference. You can contact other pharmacies to ask about their dispensing fee for Truvada® or a generic version.

- **Does my plan require that Truvada® or its generic version have a *prior approval request* submitted to be considered an eligible drug?**

Some plans have their own list of medications that need prior approval and may include having both you and the prescriber (your doctor or another health care provider) complete separate paperwork to be submitted to the insurance company, in advance of being considered for coverage by their plan.

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