

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

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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 [annual FPL](#) (e.g., 400% of the FPL for 2025 for a family of two residing in Georgia is \$84,600 [$\$21,150 \times 4.00$]).

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 abbvie.com/PatientAccessSupport.com	Kaletra and Norvir	600% FPL for Kaletra
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.. ¹	800-652-6227 (uninsured PAP) portal.jnjwithme.com/patient-assistance	Edurant, 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	844-588-3288 ViiVconnect.com	Cabenuva, Dovato, Epivir, Juluca, Retrovir, Rukobia, Selzentry, Tivicay, and Triumeq	500% FPL

Pharmaceutical Company Cost- savings Assistance Programs

COMPANY	CONTACT INFORMATION	ASSISTANCE
AbbVie	800-441-4987 abbvie.com/patients/patient-support/patient-assistance/savings-card.html	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	866-836-0114 JnJwithMe.com	Edurant, Intelence, Prezcobix, Symtuza & Prezista: Unspecified annual limits apply.
Merck & Co.	800-727-5400 merckconnect.com/isentress/coupons merckconnect.com/doravirine/coupons	Isentress, Isentress HD, Delstrigo, & Pifeltro: \$6,800 per year
Theratechnologies	833-238-4372 trogarzo.com/hcp/patient-support/	Trogarzo: \$7,500 per year
ViiV Healthcare ¹	844-588-3288 ViiVconnect.com	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

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.

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