

# How to Access STRENSIQ® (asfotase alfa)

Alexion is committed to providing access and educational support to physicians and their offices for patients who have been prescribed STRENSIQ. This overview is intended to provide helpful information around navigating the STRENSIQ Access Process, including benefit investigations, prior authorizations (PAs), navigating appeals and denials (if required), and common reauthorization requirements.

This Guide is intended for educational purposes only and does not represent legal advice.



## 1

### STRENSIQ is Prescribed

You have diagnosed a patient with perinatal/infantile- or juvenile-onset hypophosphatasia (HPP) and have prescribed STRENSIQ. Now what?



## 2

### Benefit Investigation

After you have prescribed STRENSIQ, Alexion's contracted specialty pharmacy, PANTHERx, will conduct a benefit investigation with the patient's health plan.



## 3

### Prior Authorization

Once the benefit investigation is complete, PANTHERx will share the health plan's PA requirements with you. Each patient will have different requirements based on their unique health plan.



## 4

### Prior Authorization Approval

Once all PA requirements have been completed and submitted to the patient's health plan, the PA will either be approved or denied. If approved, PANTHERx will ship STRENSIQ to the patient. If denied, what are the next steps you can take to appeal the decision?



## 5

### Reauthorization

After your patient has begun therapy on STRENSIQ, health plans will require a reauthorization. Reauthorization timelines and requirements will vary based on each patient's unique health plan.

**STRENSIQ® (asfotase alfa) is indicated for the treatment of patients with perinatal/infantile- and juvenile-onset hypophosphatasia (HPP).**

STRENSIQ is a self-administered subcutaneous injection, and health plans often manage STRENSIQ under the pharmacy benefit. The following steps provide an overview of the access process to start patients on STRENSIQ.

**Please see Important Safety Information on [page 6](#) and accompanying full [Prescribing Information](#) for STRENSIQ® (asfotase alfa).**



# 1

## STRENSIQ is Prescribed

### Contact your Regional Account Manager (RAM)

Your RAM is a key point of contact for your office. Your RAM will:

- **Provide a Healthcare Professional (HCP) Starter Kit** that includes key materials for the access process including the Letter of Medical Necessity
  - [AlexionAccessNavigator.com](https://www.alexion.com/healthcare-professionals/alexion-access-navigator) contains the additional access materials referenced in this guide
- **Review the STRENSIQ Access Process** contained in this resource
- **Introduce you to the cross-functional team** that will provide you and your office educational support for the STRENSIQ Access Process. This team consists of a Field Reimbursement Manger (FRM), PANTHERx, the specialty pharmacy that dispenses STRENSIQ, and your OneSource™ Case Manager for Alexion patient services

### Send the completed and signed Prescription Form with any corresponding clinical documentation to PANTHERx.

Contact PANTHERx if you have any questions about the Prescription Form.

 P: 844-787-6747

 F: 844-787-2527

 [pharmacist@pantherxrare.com](mailto:pharmacist@pantherxrare.com)

 [www.pantherxrare.com](http://www.pantherxrare.com)

### Patients are encouraged to enroll in OneSource™. This enables:

- Your patient to access the voluntary complimentary patient support program, which includes disease state education, injection support, and treatment education
- FRMs to provide case-specific educational support
- Eligible patients to enroll in the OneSource™ CoPay Program

Patients can enroll in OneSource™ by sending in a completed **OneSource™ PDF Enrollment Form**, filling in an online form at [AlexionOneSource.com](https://www.alexion.com/healthcare-professionals/alexion-one-source), or calling OneSource™ directly at 888-765-4747. Enrollment can also be facilitated by PANTHERx.



# 2

## Benefit Investigation

### The benefit investigation is conducted by PANTHERx

Once the STRENSIQ prescription has been sent in and verified, PANTHERx will conduct a benefit investigation.

Health plans can have different requirements, so it is important to complete and understand the benefit investigation for the key clinical and coverage criteria that applies to each patient given their unique plan.<sup>1</sup> The benefit investigation will provide you with information that will answer key questions regarding a patient's health plan coverage and requirements:<sup>2</sup>

- PA requirements and specific documentation that must be submitted to obtain approval
- Any additional health plan requirements or guidelines
- Specific reauthorization criteria and timeframe for continuation of therapy

PANTHERx can provide this information to HCPs and their offices. PANTHERx can also provide the benefit investigation and verification information to the FRM for further review with you and your office. (Note: your patient needs to be enrolled in OneSource™ for the FRM to discuss this information with you and your office.)



Please see Important Safety Information on [page 6](#) and accompanying full [Prescribing Information](#) for STRENSIQ® (asfotase alfa).



# 3

## Prior Authorization

### Prior authorization (PA)

Health plans often require a PA (also known as a precertification or coverage determination) for use of STRENSIQ for the treatment of patients with perinatal/infantile- and juvenile-onset HPP. PAs are very common for orphan drugs that treat rare diseases.<sup>3</sup>

Requirements vary by plan. Please verify the current requirements for STRENSIQ for HPP for each individual plan through the benefit investigation. For OneSource™ enrolled patients, FRMs can provide patient/case-specific PA and reauthorization criteria education and support based on the patient’s insurance coverage.

#### Step 1: Compile the PA requirements

- Review the patient’s health plan coverage requirements obtained during the benefit investigation and according to the plan’s product coverage policy
- Gather all the needed/requested information to submit to the health plan
- Ensure that the information is accurate and complete prior to submission

**PANTHERx will coordinate with you and your office to ensure required documentation for the PA is completed and included prior to submission to the health plan.**

#### Step 2: Submit all PA Information

- Submit the PA information requested through the appropriate health plan process and provide current office contact information with your submission

**Once the PA has been submitted, PANTHERx will check the PA status with the health plan on a periodic basis to confirm receipt and monitor status. Payor response time will vary by health plan.**

OneSource™ can communicate with enrolled patients to review their explanation of benefits, their financial obligation, and out-of-pocket (OOP) costs.



# 4

## Prior Authorization Approval

### PA approved

**If a PA is approved,** PANTHERx will confirm PA is approved with the health plan and will coordinate next steps for shipment. Upon approval, PANTHERx will also verify a patient’s out-of-pocket financial responsibilities. PANTHERx coordinates dispensing process for patients regardless of OneSource™ enrollment status.

### PA denied

**If a PA is denied,** you will need to determine the reason and the best course of action. Each health plan has specific options and timeframes to consider if there is a denial. Contact the health plan directly to obtain information on its appeals process.

#### For patients enrolled in OneSource™:

- **The FRM** can provide educational support to navigate the denial and appeal process
- **OneSource™** can communicate with your patient to educate them on their role in the process

#### For all patients:

- **PANTHERx** can facilitate coordination for the denial response

Please see Important Safety Information on [page 6](#) and accompanying full [Prescribing Information](#) for STRENSIQ® (asfotase alfa).

## 4 Prior Authorization Approval (continued)

### Navigating the denial and appeal process

#### Obtain the denial letter and determine the denial reason:

The patient may receive a letter directly from their plan. It is important to get a copy of the actual denial letter. Review the denial letter and summary of benefits to determine the specific denial reason.

#### Determine the best course of action:

There are multiple avenues that can be explored including: a resubmission, requesting a peer-to-peer review, or submitting an appeal.

#### Keep mindful of timelines and specific health plan requirements:

Be sure to review the health plan's appeal process and timelines to determine specific requirements to appeal this decision.

#### Follow up:

PANTHERx will follow-up with your office and the patient's health plan to coordinate next steps.

Additional resources for HCPs and their offices include a **Sample Appeal Letter Template for STRENSIQ**, a **Compendia of Clinical References for HPP**, and a resource about **Peer-to-Peer Medical Reviews**. These resources can be found at [www.AlexionAccessNavigator.com/Strensiq](http://www.AlexionAccessNavigator.com/Strensiq).

## 5 Reauthorization

### Reauthorization

After a patient has received a PA, the patient may need a reauthorization (also known as a renewal of authorization) after a specified time period.<sup>2</sup> This is often required to confirm that a therapy continues to be medically necessary for a patient and that they have responded to therapy.

Information about reauthorization criteria, timing, and requirements can be found in a patient's medical policy or during the PA process. The process and specific requirements for requesting reauthorization will vary depending on the patient's health plan, PBM benefits, or the medical/clinical policy.

Information needed for reauthorizations may include plan-specific requirements, baseline measurements, supporting documentation, ongoing treatment rationale, and patient outcomes.

For OneSource™ enrolled patients, your FRM and OneSource™ Case Manager can provide educational support to you and your office around the reauthorization process. PANTHERx can provide educational support for the reauthorization process for all patients, regardless of OneSource™ enrollment status.

**For more general information about reauthorization, please refer to the Reauthorization Guide at [www.AlexionAccessNavigator.com/Strensiq](http://www.AlexionAccessNavigator.com/Strensiq)**

# Your Alexion partners for the STRENSIQ® (asfotase alfa) access journey

The following is an overview of the team and resources that can provide educational support to you and your office during this process.

Get to know our team of specialists who can help with reimbursement, provide clinical resources, and more.



## ALEXION MAIN POINT OF CONTACT

Regional Account Manager (RAM)

RAMs can facilitate clinical discussions with HCPs based on approved FDA prescribing information for Alexion medications and promote these products to serve patients.

Name: [ \_\_\_\_\_ ]

Phone: [ \_\_\_\_\_ ]

Email: [ \_\_\_\_\_ ]



## HCP ACCESS SUPPORT

Field Reimbursement Manager (FRM)

FRMs can provide educational support to HCPs and their offices on navigating insurance requirements, including the general payor landscape and common PA criteria. For OneSource™ enrolled patients, FRMs can provide plan-specific information on policies, PA and reauthorization requirements, and patient-specific denial and appeal educational support.

Name: [ \_\_\_\_\_ ]

Phone: [ \_\_\_\_\_ ]

Email: [ \_\_\_\_\_ ]



## PATIENT ACCESS SUPPORT

OneSource™ Case Manager

Your patient's dedicated case manager can answer patient's questions about HPP and STRENSIQ, help them prepare for their injections, help them avoid interruptions in treatment during insurance changes, travel plans or other life events, and provide access to the rare disease community through events and meetings.

Name: [ \_\_\_\_\_ ]

Phone: [ \_\_\_\_\_ ]

Email: [ \_\_\_\_\_ ]



This specialty pharmacy dispenses STRENSIQ and provides:

- Help coordinating your patient's prescription
- Shipments and ongoing refills
- Instructions for self-administration
- 24/7 support

P: 844-787-6747

F: 844-787-2527

[pharmacist@pantherxrare.com](mailto:pharmacist@pantherxrare.com)

[www.pantherxrare.com](http://www.pantherxrare.com)



OneSource™ is a free, personalized patient support program offered by Alexion. After enrolling in OneSource™, your patient will be matched with a dedicated OneSource™ Case Manager who can provide personalized support, including access to:

- Education on their disease and treatment
- Connections to other people impacted by HPP
- Information on copay support and financial assistance programs
- Treatment support

P: 888-765-4747

[OneSource@Alexion.com](mailto:OneSource@Alexion.com)

[www.AlexionOneSource.com](http://www.AlexionOneSource.com)



Alexion Access Navigator is a dedicated resource website for US HCPs and their offices that contains downloadable access and reimbursement materials for STRENSIQ.



Scan this QR code to view helpful reimbursement and access resources for STRENSIQ.

[www.AlexionAccessNavigator.com/Strensiq](http://www.AlexionAccessNavigator.com/Strensiq)

Please see Important Safety Information on [page 6](#) and accompanying full [Prescribing Information](#) for STRENSIQ® (asfotase alfa).

## INDICATION

STRENSIQ® (asfotase alfa) is indicated for the treatment of patients with perinatal/infantile- and juvenile-onset hypophosphatasia (HPP).

## IMPORTANT SAFETY INFORMATION

### WARNINGS AND PRECAUTIONS

- **Hypersensitivity Reactions**, including anaphylaxis, have been reported in STRENSIQ-treated patients. Signs and symptoms consistent with anaphylaxis included difficulty breathing, choking sensation, nausea, periorbital edema, and dizziness. These reactions have occurred within minutes after subcutaneous administration of STRENSIQ and have been observed more than 1 year after treatment initiation. Other hypersensitivity reactions have also been reported in STRENSIQ-treated patients, including vomiting, fever, headache, flushing, irritability, chills, skin erythema, rash, pruritus and oral hypoesthesia.

Inform patients and/or caregivers of the signs and symptoms of hypersensitivity reactions and have them seek immediate medical care should signs and symptoms occur. If a severe hypersensitivity reaction occurs, discontinue STRENSIQ treatment and initiate appropriate medical treatment. Consider the risks and benefits of re-administering STRENSIQ to individual patients following a severe reaction. If the decision is made to re-administer the product, monitor patients for a reoccurrence of signs and symptoms of a severe hypersensitivity reaction.

- **Lipodystrophy**: Localized lipodystrophy, including lipoatrophy (depression in the skin) and lipohypertrophy (enlargement or thickening of tissue), has been reported at injection sites after several months in patients treated with STRENSIQ in clinical trials. Advise patients to follow proper injection technique and to rotate injection sites.
- **Ectopic Calcifications**: Patients with HPP are at increased risk for developing ectopic calcifications. Events of ectopic calcification, including ophthalmic (conjunctival and corneal) and renal (nephrocalcinosis, nephrolithiasis), have been reported in the clinical trial experience with STRENSIQ. There was insufficient information to determine whether or not the reported events were consistent with the disease or due to STRENSIQ. No visual changes or changes in renal function were reported resulting from the occurrence of ectopic calcifications. Ophthalmology examinations and renal ultrasounds are recommended at baseline and periodically during treatment with STRENSIQ to monitor for signs and symptoms of ophthalmic and renal ectopic calcifications and for changes in vision or renal function.
- **Possible Immune-Mediated Clinical Effects**: In clinical trials, most STRENSIQ-treated patients developed anti-asfotase alfa antibodies and neutralizing antibodies which resulted in reduced systemic exposure of asfotase alfa. In postmarketing reports, some STRENSIQ-treated patients with initial

therapeutic response subsequently developed recurrence and worsening in disease-associated laboratory and radiographic biomarkers (some in association with neutralizing antibodies) suggesting possible immune-mediated effects on STRENSIQ's pharmacologic action resulting in disease progression. The effect of anti-asfotase alfa antibody formation on the long-term efficacy of STRENSIQ is unknown. There are no marketed anti-asfotase alfa antibody tests. If patients experience progression of HPP symptoms or worsening of disease-associated laboratory and imaging biomarkers after a period of initial therapeutic response to STRENSIQ, consider obtaining anti-asfotase alfa antibody testing by contacting STRENSIQ Medical Information at Alexion at 1-888-765-4747 or by email at [medinfo@alexion.com](mailto:medinfo@alexion.com). Close clinical follow up is recommended.

### ADVERSE REACTIONS

Overall, the most common adverse reactions ( $\geq 10\%$ ) reported were injection site reactions (63%). Other common adverse reactions included lipodystrophy (28%), ectopic calcifications (14%), and hypersensitivity reactions (12%). Possible immune-mediated clinical effects have been identified during post-approval use of STRENSIQ.

### DRUG INTERACTIONS

#### Drug Interference with Laboratory Tests:

- Laboratory tests utilizing alkaline phosphatase (ALP) as a detection reagent could result in erroneous test results for patients receiving treatment due to the presence of asfotase alfa in clinical laboratory samples. Inform laboratory personnel that the patient is being treated with STRENSIQ and discuss use of an alternative testing platform which does not utilize an ALP-conjugated test system.
- Elevated serum ALP measurements detected through clinical laboratory testing are expected in patients receiving STRENSIQ due to circulating concentrations of asfotase alfa and may be unreliable for clinical decision making.

### SPECIAL POPULATIONS

- **Pregnancy & Lactation**: There are no available data on STRENSIQ use in pregnant women, the presence of STRENSIQ in human milk, or the effects on the breastfed infant or on milk production, to inform a drug associated risk.

**Please see accompanying full [Prescribing Information for STRENSIQ® \(asfotase alfa\)](#).**

**References:** 1. Academy of Managed Care Pharmacy. Prior authorization. Concept series: What is prior authorization and why is it an essential managed care tool? July 18, 2019. Accessed March 16, 2021. <https://www.amcp.org/about/managed-care-pharmacy-101/concepts-managed-care-pharmacy/prior-authorization> 2. Drella M. Frequently asked questions about pharmacy prior authorization [blog]. Outsource Strategies International. December 2, 2019. Accessed March 16, 2021. <https://www.outsourcestrategies.com/blog/frequently-asked-questions-about-pharmacy-prior-authorization.html> 3. Yehia F. Utilization controls for orphan drugs: prior authorization does not correlate with lower drug use [dissertation]. Johns Hopkins Sheridan Libraries. April 17, 2020. Accessed September 29, 2021. <https://jscholarship.library.jhu.edu/handle/1774.2/62594>



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