

Free to go

Dalvance[®] 
(dalbavancin) for injection
500 mg

Coverage and Reimbursement Information

Payors typically reimburse separately for DALVANCE[®] in the outpatient setting*

- When administered in the emergency department (ED) or an outpatient care setting, DALVANCE is generally covered by major payors, including¹:



Medicaid



Medicare



Most commercial health insurance plans

*Outpatient intravenous treatment can be administered in EDs/observation units, hospital outpatient departments (HOPDs), freestanding infusion centers, physician offices, and hospital-affiliated infusion centers.²

INDICATION AND USAGE

DALVANCE[®] (dalbavancin) for injection is indicated for the treatment of adult and pediatric patients with acute bacterial skin and skin structure infections (ABSSSI) caused by designated susceptible strains of Gram-positive microorganisms: *Staphylococcus aureus* (including methicillin-susceptible and methicillin-resistant isolates), *Streptococcus pyogenes*, *Streptococcus agalactiae*, *Streptococcus dysgalactiae*, *Streptococcus anginosus* group (including *S. anginosus*, *S. intermedius*, *S. constellatus*) and *Enterococcus faecalis* (vancomycin-susceptible isolates).

To reduce the development of drug-resistant bacteria and maintain the effectiveness of DALVANCE and other antibacterial agents, DALVANCE should be used only to treat or prevent infections that are proven or strongly suspected to be caused by susceptible bacteria.

IMPORTANT SAFETY INFORMATION

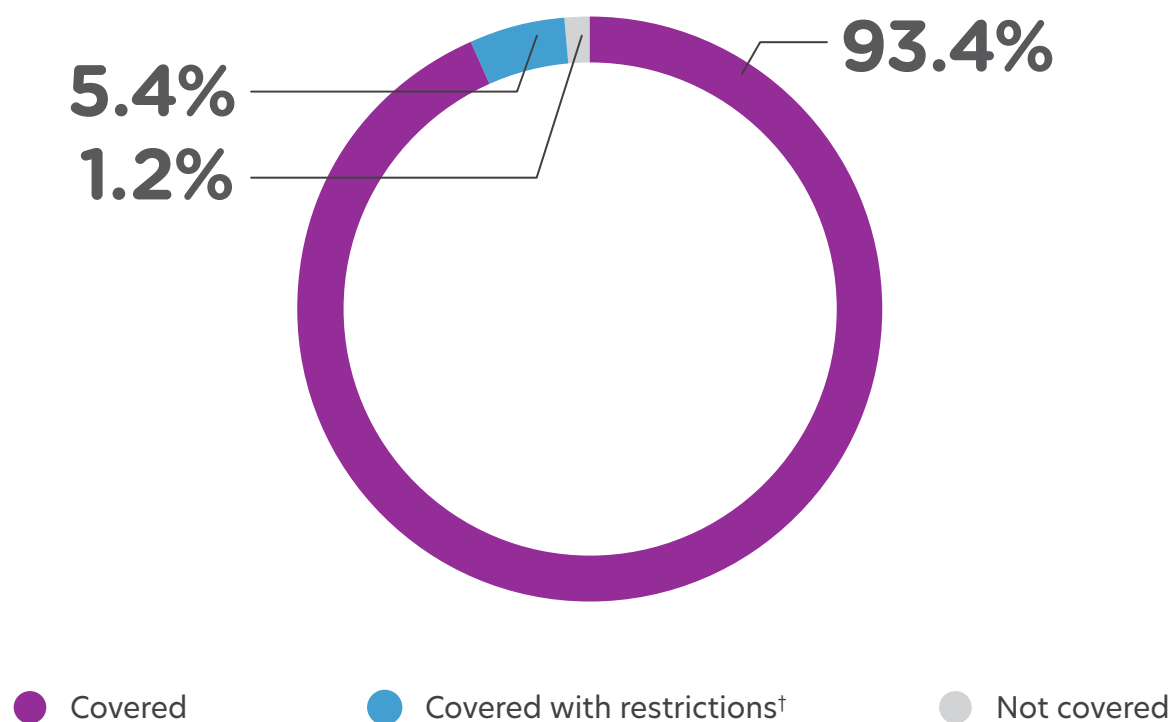
Contraindications

DALVANCE is contraindicated in patients with known hypersensitivity to dalbavancin.

Please see additional Important Safety Information throughout.
Please also see accompanying full Prescribing Information or visit
https://www.rxabbvie.com/pdf/dalvance_pi.pdf

>98% of benefit verifications submitted to Dalvance Connects® approve the use of DALVANCE®¹

Coverage rates by percentage*



*Coverage was based on a total of 5277 patients from 01/01/2022 to 10/02/2022, as reported by Dalvance Connects®. Private commercial insurance accounted for 40.8%, Medicare was 35.5%, Medicaid was 14%, Medicare supplement was 8.2%, and TRICARE was 1.1%.

[†]Covered with restrictions typically means a prior authorization, proof of medical necessity, or step edit may be required.

DALVANCE coverage is typically provided through medical benefits

	Hospital Outpatient Departments + Infusion Centers	Home Health
Medicare	Medicare and Medicare Advantage plans should cover and reimburse for DALVANCE under medical benefits, Parts B and C [‡]	Coverage likely under Part D but will vary based on individual insurance plan
Commercial	Commercial payors should cover and reimburse for DALVANCE under medical benefits	Coverage likely but will vary based on individual insurance plan
Medicaid	Coverage for DALVANCE varies by state ¹	

[‡]9/10 Medicare recipients are enrolled in supplemental coverage or Medicare Advantage.³

Medicare inpatient guidance⁴

- Patients are considered inpatients when they are formally admitted to a hospital with a doctor's order
- The day BEFORE a patient is discharged is the last inpatient day

Based on the Medicare inpatient guidance, hospitals should be able to bill for services rendered in the outpatient setting on the day of discharge.

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions

Hypersensitivity Reactions

Serious hypersensitivity (anaphylactic) and skin reactions have been reported with glycopeptide antibacterial agents, including DALVANCE. Exercise caution in patients with known hypersensitivity to glycopeptides due to the possibility of cross-sensitivity. If an allergic reaction occurs, treatment with DALVANCE should be discontinued.

Please see additional Important Safety Information throughout. Please also see accompanying full Prescribing Information or visit https://www.rxabbvie.com/pdf/dalvance_pi.pdf

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions (continued)

Infusion-related Reactions

Rapid intravenous infusion of DALVANCE can cause reactions, including flushing of the upper body, urticaria, pruritus, rash, and/or back pain.

Hepatic Effects

ALT elevations with DALVANCE treatment were reported in clinical trials.



Helping your patients...

The Dalvance Connects® Copay Assistance Program

The Dalvance Connects® Copay Assistance Program may assist eligible patients with their out-of-pocket costs for DALVANCE®, up to a maximum benefit of \$2000 per calendar year.

*Based on Lash Group patient claims data, January 2022 to October 2022.¹



Expanded eligibility†

Any patient is eligible who:



¹This is not insurance. Subject to change or discontinuation by AbbVie at any time.

[‡]Includes a practice-based or freestanding infusion center, HOPD, or home infusion service.



SCAN HERE TO DOWNLOAD THE PATIENT ENROLLMENT FORM

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions (continued)

Clostridioides difficile-associated Diarrhea

Clostridioides difficile-associated diarrhea (CDAD) has been reported with nearly all systemic antibacterial agents, including DALVANCE, with severity ranging from mild diarrhea to fatal colitis. Evaluate if diarrhea occurs.

Development of Drug-resistant Bacteria

Prescribing DALVANCE in the absence of a proven or strongly suspected bacterial infection or a prophylactic indication is unlikely to provide benefit to the patient and increases the risk of the development of drug-resistant bacteria.

Please see additional Important Safety Information throughout. Please also see accompanying full Prescribing Information or visit https://www.rxabbvie.com/pdf/dalvance_pi.pdf

Connect to comprehensive reimbursement support services

DALVANCE CONNECTS®



Real-time benefit verification



Billing and coding information



Claim appeal support

1.855.387.2824 | DalvanceConnects.com | DalvanceConnects@lashgroup.com
8 AM-8 PM ET, Monday-Friday, excluding holidays



SCAN HERE TO DOWNLOAD THE HCP ENROLLMENT FORM

myAbbVie Assist Patient Assistance

If your patient has limited or no health insurance, myAbbVie Assist may be able to help at 1-800-222-6885 or AbbVie.com/myAbbVieAssist.

IMPORTANT SAFETY INFORMATION (continued)

Adverse Reactions

The most common adverse reactions in adult patients treated with DALVANCE in Phase 2/3 trials were nausea (5.5%), headache (4.7%), and diarrhea (4.4%). The most common adverse reaction that occurred in more than 1% of pediatric patients was pyrexia (1.2%).

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J-code helps facilitate payment

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500 mg



Code	Description	Billing Units	NDC
J0875 ¹	Injection, dalbavancin, 5 mg	Reported as 100 units for a single-use vial	57970-100-01

Vial shown not actual size.

Discover more at DALVANCECONNECTS.com or call 1.855.387.2824

IMPORTANT SAFETY INFORMATION (continued)

Use in Specific Populations

- There are no adequate and well-controlled studies with DALVANCE use in pregnant or nursing women. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for DALVANCE and any adverse effects on the breast-fed child from DALVANCE or from the underlying maternal condition.
- In patients with renal impairment whose known creatinine clearance (CL_{cr}) is less than 30 mL/min and who are not receiving regularly scheduled hemodialysis, the recommended regimen of DALVANCE is 1125 mg, administered as a single dose, or 750 mg followed one week later by 375 mg. No dosage adjustment is recommended for patients receiving regularly scheduled hemodialysis, and DALVANCE can be administered without regard to the timing of hemodialysis. There is insufficient information to recommend dosage adjustment for pediatric patients younger than 18 years of age with CL_{cr} less than 30 mL/min/1.73m².
- Caution should be exercised when prescribing DALVANCE to patients with moderate or severe hepatic impairment (Child-Pugh Class B or C) as no data are available to determine the appropriate dosing in these patients.

Please see additional Important Safety Information throughout.
Please also see accompanying full Prescribing Information or visit
https://www.rxabbvie.com/pdf/dalvance_pi.pdf

References: **1.** Data on file. Allergan, Inc. **2.** Tice AD, Rehm SJ, Dalovisio JR, et al. Practice guidelines for outpatient parenteral antimicrobial therapy. IDSA guidelines. *Clin Infect Dis*. 2004;38(12):1651-1672. doi:10.1086/420939 **3.** Kaiser Family Foundation. A snapshot of sources of coverage among Medicare beneficiaries in 2018. Accessed October 5, 2022. <https://www.kff.org/medicare/issue-brief/a-snapshot-of-sources-of-coverage-among-medicare-beneficiaries-in-2018/> **4.** Centers for Medicare and Medicaid Services. Are you a hospital inpatient or outpatient? Accessed June 8, 2021. <https://www.medicare.gov/media/11101>

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