

1. Is the request for a product containing abacavir (e.g. Triumeq, abacavir, abacaviabacavir/lamivudine/zidovudine, Epzicom, or Ziagen)?
  - a. Yes – Go to question 9
  - b. No- -Go to question 10
  
2. Has the provider submitted documentation that the member is HLA-B\*5701 negative?
  - a. Yes – Approve
  - b. No – Deny Cat 5 *Abacavir is contraindicated in patients with a prior hypersensitivity reaction to abacavir and in HLA-B\*5701–positive patients. All patients should be screened for the HLA-B\*5701 allele prior to initiating therapy with abacavir or reinitiation of therapy with abacavir.*
  
3. Is the request for Selzentry (maraviroc)?
  - a. Yes- Go to question 11
  - b. No – Go to question 12
  
4. Has the provider submitted documentation that the member has CCR5-tropic HIV infection?
  - a. Yes – May approve up to 1 year- renewal requires that member has been adherent with medication regimen. If not, request recent tropism testing as tropism can shift if member is non-adherent to this medication.
  - b. Deny Cat 5 – *Must submit CCR5 tropism testing or deny for not medically appropriate if member has dual/mixed or CXCR4-tropic HIV.*
  
5. Is the request for Biktarvy, Complera, Odefsey, Genvoya, or Stribild?
  - a. Yes- Go to question 13
  - b. No- Forward to pharmacist / Medical director for review of clinical appropriateness.
  
6. Has the provider submitted documentation supporting that the member is antiretroviral treatment-naïve AND  
For Odefsey, Complera, Stribild, and Genvoya has an HIV RNA concentration of 100,000 copies/mL or less at treatment initiation  
For Odefsey and Complera is the CD4 count greater than 200 cell/mm3?
  - a. Yes – Approve for 1 year
  - b. No- Go to question 14

7. Has the provider submitted documentation supporting that the member is treatment-experienced AND
  - For Biktarvy: request is to replace the current antiretroviral regimen in patients who are virologically-suppressed (HIV-1 RNA less than 50 copies/mL) on a stable antiretroviral regimen for at least 3 months with no history of treatment failure or no known resistance to any of the components.
  - For Odefsey, Complera, Stribild, and Genvoya: request is for switching from 1<sup>st</sup> or 2<sup>nd</sup> regimen, member has displayed consistent viral suppression (HIV RNA less than 50 copies/mL) for at least 6 months prior to switching; no history of virologic failure; no current or past history of resistance to any of the individual components.
    - a. Yes – Approve for 1 year with renewal monitoring for adherence
    - b. No – Forward to pharmacist or medical director for review of clinical appropriateness.