

**ALABAMA ADAP FORMULARY OFFERS 75 MEDICATIONS** 9-2012

Anti-HIV (also called antiretroviral) medications are used to control the reproduction of the HIV virus and to slow the progression of HIV related disease. Anti-HIV medications approved by the U.S. Food and Drug Administration (FDA) fall into five classes which are currently offered on Alabama's ADAP Formulary.

Anti-HIV medications do not cure HIV infection and individuals taking these medications can still transmit HIV to others.

**Alabama ADAP Program Guidelines****Eligibility Criteria**

1. Medical Eligibility Criteria Western Blot + test
2. Financial Criteria Total Gross Income at or below 250% of the Federal Poverty Level (FPL)
3. Alabama Resident (PO Box is not accepted)
4. No third party payer, (i.e. Medicaid, Medicare Part D, All Kids, Private Insurance paying >50% cost of medications).
5. Remain compliant with ADAP Client Eligibility Renewal (CER) 2x/year.

**Generic formulations will be dispensed when available** unless the Clinician specifically requests the Brand formulation when ordering ADAP medications.

NOTE: Prior approval is noted on the formulary for several medications. Please contact the ADAP Coordinator for assistance when necessary. (1-866-574-9964)

**A 30-day supply of each medication is shipped each month on a regular schedule** from the ADAP Central Pharmacy to the ordering Clinic for the Client or designee to pick up.

**Pre-approval must be obtained from the ADAP Coordinator for any medications to be shipped to an alternate site.** Permission to ship medications outside of the Clinic will be limited to a pre-approved Physician's order for home delivery due to a Client's poor medical condition limiting travel to the clinic for medication pick up.

**Failure to pick up ADAP HIV medications for three (3) consecutive months will result in the immediate termination of ADAP enrollment due to non-compliance with medication adherence.**

To Access Alabama's comprehensive ADAP enrollment guidelines and forms go to [www.adph.org](http://www.adph.org) or call the ADAP Eligibility office at 1-866-574-9964 to speak with an Eligibility Specialist for further information.

### Group 1

#### **NNRTI/NRTI Fixed Dose Combination Drugs (3)**

##### **“Multi-Class Combination Drugs”**

Fixed dose combination tablets contain 2 or more anti-HIV medications that can be from 1 or more drug classes.

<i>Brand Name</i>	<i>generic name</i>	<i>Abbreviation</i>
<b>Atripla</b>	<b>efavirenz + emtricitabine + tenofovir DF</b>	<b>EFV + FTC + TDF or ATR</b>
<b>Complera</b>	<b>emtricitabine + rilpivirine + tenofovir disoproxil fumarate</b>	
<b>Stribild</b>	<b>elvitegravir + cobicistat + emtricitabine + tenofovir disoproxil fumarate</b>	

### Group 2

#### **CCR-5 Co-Receptor Inhibitor (1)**

An entry Inhibitor blocks HIV entry into cells; therefore, the virus cannot enter the cell to begin viral replication.

<i>Brand Name</i>	<i>generic name</i>	<i>Abbreviation</i>
<b>Selzentry**</b>	<b>maraviroc **PA**</b>	<b>MVC</b>

**\*\*PA\*\* Tropism Assay testing required prior to a prescription being processed by the ADAP Pharmacy. Call ADAP at 1-866-574-9964 or go to [www.adph.org](http://www.adph.org) for Tropism Assay pre-approval instructions and forms.**

### Group 3

#### **Fusion Inhibitors (1)**

Fusion inhibitors work by blocking HIV entry into cells. Fusion inhibitors are to be used in treatment experienced patients.

<i>Brand Name</i>	<i>generic name</i>	<i>Abbreviation</i>
<b>Fuzeon**</b>	<b>enfuvirtide **PA**</b>	<b>T-20</b>

**\*\*PA\*\* This medication requires pre-approval prior to a prescription being processed by the ADAP Pharmacy. Go to [www.adph.org](http://www.adph.org) for pre-approval instructions and forms or call ADAP at 1-866-574-9964.**

#### **Group 4**

##### **Integrase Inhibitors (1)**

*Integrase inhibitors disable integrase, a protein that HIV uses to insert its viral genetic material into the genetic material of an infected cell.*

<i>Brand Name</i>	<i>generic name</i>	<i>Abbreviation</i>
<b>Isentress</b>	<b>raltegravir</b>	<b>RAL</b>

#### **Group 5**

##### **Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTI) (5)**

*NNRTIs bind to and disable reverse transcriptase, a protein that HIV needs to make more copies of itself.*

<i>Brand Name</i>	<i>generic name</i>	<i>Abbreviation</i>
<b>Intelence</b>	<b>etravirine</b>	<b>ETV</b>
<b>Rescriptor</b>	<b>delavirdine mesylate</b>	<b>DLV</b>
<b>Sustiva</b>	<b>efavirenz</b>	<b>EFV</b>
<b>Viramune</b>	<b>nevirapine</b>	<b>NVP</b>

<b>Edurant</b>	<b>rilpivirine</b>	
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**Group 6****Nucleoside/Nucleotide Analog Reverse Transcriptase Inhibitors****(NRTI) (12)**

*NRTIs are faulty versions of building blocks that HIV needs to make more copies of itself. When HIV uses an NRTI instead of a normal building block, reproduction of the virus is stalled.*

*Brand Name    generic name*

*Abbreviation*

<i>Brand Name</i>	<i>generic name</i>	<i>Abbreviation</i>
<b>Combivir</b>	<b>zidovudine + lamivudine</b>	<b>ZDV + 3TC or CBV</b>
<b>Emtrivia</b>	<b>emtricitabine</b>	<b>FTC</b>
<b>Epivir</b>	<b>lamivudine</b>	<b>3TC</b>
<b>Epzicom</b>	<b>abacavir sulfate + lamivudine</b>	<b>ABC + 3TC</b>
<b>Retrovir</b>	<b>zidovudine</b>	<b>AZT or ZDV</b>
<b>Trizivir</b>	<b>abacavir + zidovudine + lamivudine</b>	<b>ABC + ZDV + 3TC</b>
<b>Truvada</b>	<b>tenofovir DF + emtricitabine</b>	<b>TDF + FTC or TVD</b>
<b>Videx</b>	<b>didanosine (buffered versions)</b>	<b>ddI</b>
<b>Videx EC</b>	<b>didanosine (delayed – release capsules)</b>	<b>ddI EC</b>
<b>Viread</b>	<b>tenofovir disoproxil fumarate DF</b>	<b>TDF or Pis (POC)</b>
<b>Zerit</b>	<b>stavudine</b>	<b>d4t</b>
<b>Ziagen</b>	<b>abacavir</b>	<b>ABC</b>

**Group 7****Protease Inhibitors (PIs) (10)**

*PIs disable protease, a protein that HIV needs to make more copies of itself.*

*Brand Name    generic name*

*Abbreviation*

<i>Brand Name</i>	<i>generic name</i>	<i>Abbreviation</i>
<b>Agenerase</b>	<b>amprenavir</b>	<b>APV</b>
<b>Aptivus</b>	<b>tipranavir</b>	<b>TPV</b>
<b>Crixivan</b>	<b>Indinivir sulfate</b>	<b>IDV</b>

Invirase	saquinavir mesylate	SQV-HGC
Kaletra	lopinavir + ritonavir	LPV/RTV or LPV/r
Lexiva	fosamprenavir	FPV
Norvir	ritonavir	RTV
Prezista	darunavir <b>**400mg and 600mg will be dispensed beginning Oct 1, 2008</b>	DRV or PRZ
Reyataz	atazanavir sulfate	ATV
Viracept	nelfinavir sulfate	NFV

### Group 8

#### “A1” OI Treatments (29)

*This class is used to treat opportunistic infections (OIs) commonly associated with HIV Disease.*

<i>Brand Name</i>	<i>generic name</i>
Ancobon	flucytosine
Bactrim DS	sulfamethoxazole/trimethoprim DS
Biaxin	clarithromycin
Cleocin	clindamycin
Dapsone	-----
Daraprim	pyrimethamine
Deltasone	prednisone
Diflucan	fluconazole
Famvir	famciclovir
Foscavir	foscarnet
Fungizone	amphotericin B
INH	isoniazid
Megace	megestrol
Mepron	atovaquone
Myambutol	ethambutol
Mycobutin	rifabutin
NebuPent	pentamidine
Probenecid	-----
Procrit <b>**PA**</b>	epoetin alfa <b>**PA**</b>

Pyrazinamide (PZA)	-----
Sporonox	itraconazole
Sulfadiazine - Oral	-----
Valcyte	valganciclovir
Valtrex	valacyclovir
VFEND	voriconazole
Vistide	cidofovir
Wellcovorin	leucovorin
Zithromax	azithromycin
Zovirax	acyclovir

**\*\*PA\*\* This medication requires pre-approval prior to prescription being processed by the ADAP central pharmacy. For Pre-approval instructions and forms go to [www.adph.org](http://www.adph.org) or call ADAP at 1-866-574-9964.**

### **Group 9 “Other Medications” (13)**

**NOTE: \*\*Medications in this group may be removed from the formulary at any time to ensure that Alabama’s ADAP continues to maintain adequate funding to provide Anti-HIV medications for enrollees; or in the event there is a need to re-instate the ADAP waiting list.**

#### **Hepatitis B treatments**

*Brand Name*

*generic name*

Baraclude	entecavir
Hepsera	adedefovir

#### **Hepatitis C treatments**

*Brand Name*

*generic name*

Intron-A	interferon alfa-2b
Pegasys	peg-interferon alfa-2a
Peg-Intron	peg-interferon alfa-2b
Rebetol	ribavirin
Rebetron	ribavirin/interferon alfa-2b
Roferon-A	interferon alfa-2a

#### **Vaccines**

*Brand Name*

*generic name*

Gardasil- IM	-----
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<b>Havrix- IM</b>	<b>hepatitis A virus vaccine-injection</b>
<b>Pneumovax 23- IM</b>	<b>pneumococcal vaccine- injection</b>
<b>Recombivax HB-IM</b>	<b>hepatitis B virus vaccine- injection</b>
<b>Twinrix- IM</b>	<b>hepatitis A and B virus vaccine-injection</b>