Intelence

alafenamide

etravirine

South Carolina

Drug Assistance Program (SC DAP) Formulary

Revised June 1, 2025

(Products are listed in alphabetical order by brand name, if the brand is available)

Brand Name	Generic Name	Drug Class	Additional Information	
ANTIRETROVIRAL DR	UGS			
Abacavir	abacavir	NRTI	Before adding abacavir to the drug regimen, refer to the drug's full prescribing information.	
Abacavir/ Lamivudine	abacavir / lamivudine	NRTI	Before adding an abacavir-containing medication to the drug reg refer to the drug's full prescribing information.	
Abacavir / Lamivudine / Zidovudine	abacavir / lamivudine / zidovudine	NRTI	Before adding an abacavir-containing medication to the drug regimen, refer to the drug's full prescribing information.	
Aptivus	tipranavir	Protease Inhibitor		
Biktarvy	bictegravir / emtricitabine / tenofovir alafenamide fumarate	Combination Treatment	Before prescribing, refer to the drug's full prescribing information.	
Cabenuva	cabotegravir / rilpivirine	Combination Treatment	Additional Information for Cabenuva: Before prescribing, please review information provided at: Additional Information for Cabenuva	
Cimduo	lamivudine/tenofovir disoproxil fumarate	NRTI; NtRTI	Product carries a boxed warning for post-treatment acute exacerbations of hepatitis B.	
Complera	emtricitabine / rilpivirine / tenofovir disoproxil fumarate	Combination Treatment	Indicated as a complete regimen for treatment of HIV-1 infection: 1) In patients 12 years of age and older with no antiretroviral treatment history and with HIV-1 RNA less than or equal to 100,000 copies/mL at the start of therapy and 2) In certain virologically suppressed (HIV-1 RNA <50 copies/mL) patients on a stable antiretroviral regimen at start of therapy in order to replace their current antiretroviral treatment regimen.	
Delstrigo	doravirine / lamivudine/ tenofovir disoproxil fumarate	Combination Treatment	Product carries a boxed warning regarding the risk of post-treatment acute exacerbations of hepatitis B. Contraindicated when co- administered with drugs that are strong CYP3A inducers (decreases in doravirine plasma concentrations may occur which may decrease the product's effectiveness). Refer to the package insert for concurrently administered drugs to avoid. Precautions include new onset or worsening renal impairment, risk of adverse reactions or loss of virologic response due to drug interactions, bone loss and mineralization defects, and Immune Reconstitution Syndrome.	
Descovy	emtricitabine / tenofovir alafenamide	NRTI; NtRTI		
Dovato	dolutegravir / lamivudine	Combination Treatment	Dovato carries a Boxed Warning for patients co-infected with hepati B virus (HBV) and HIV-1. Prior to initiating treatment, patients should be tested for HBV infection. The emergence of HBV variants associat with resistance to lamivudine has been reported in HIV-1-infected patients who have received lamivudine-containing antiretroviral regimens in the presence of concurrent infection with HBV. In addition, severe exacerbations of HBV have been reported in patient co-infected with HIV-1 and HBV who have discontinued lamivudine.	
Edurant	rilpivirine	NNRTI		
Efavirenz	efavirenz	NNRTI		
Emtriva	emtricitabine	NRTI		
Epivir	lamivudine	NRTI		
Evotaz	atazanavir / cobicistat	Protease Inhibitor; Cytochrome P-450 Inhibitor		
Fosamprenavir	fosamprenavir	Protease Inhibitor		
Genvoya	elvitegravir / cobicistat / emtricitabine / tenofovir	Combination Treatment		

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Brand Name	Generic Name	Drug Class	Additional Information
Isentress, Isentress HD	raltegravir	Integrase Inhibitor	
Juluca	doluetegravir / rilpivirine	Combination Treatment	Clinical information regarding dolutegravir: At this point, women with HIV who wish to become pregnant and are currently receiving dolutegravir should be switched to a regimen with a more well-defined safety record in pregnancy. Women with HIV who are of childbearing age and are not interested in having children should be counseled about this information. Women who become pregnant while on dolutegravir need to discuss options with their HIV providers.
Kaletra	lopinavir / ritonavir	Protease Inhibitor	
Lamivudine / Zidovudine	lamivudine / zidovudine	NRTI	
Nevirapine, Nevirapine ER	nevirapine	NRTI	
Norvir	ritonavir	Protease Inhibitor	
Odefsey	emtricitabine / rilpivirine / tenofovir alafenamide fumarate	Combination Treatment	Indicated as a complete regimen for treatment of HIV-1 infection in patients 12 years of age and older as initial therapy in those with no antiretroviral treatment history with HIV-1 RNA less than or equal to 100,000 copies per mL; or to replace a stable antiretroviral regimen in those who are virologically suppressed (HIV-1 RNA less than 50 copies per mL) for at least six months with no history of treatment failure and no known substitutions associated with resistance to individual components of Odefsey.
Pifeltro	doravirine	NNRTI	Contraindicated when co-administered with drugs that are strong cytochrome P450 3A enzyme inducers. Decreases in doravirine plasma concentrations may occur which may decrease the product's effectiveness. Refer to the package insert for concurrently administered drugs to avoid. Other warnings and precautions include risk of adverse reactions or loss of virologic response due to drug interactions and Immune Reconstitution Syndrome.
Prezcobix	darunavir / cobicistat	Protease Inhibitor; Cytochrome P-450 Inhibitor	2
Prezista	darunavir	Protease Inhibitor	
Retrovir	zidovudine	NRTI	
Reyataz	atazanavir	Protease Inhibitor	
Rukobia	fostemsavir	gp120 Attachment Inhibitor	
Selzentry	maraviroc	CCR5 Antagonist	Prior authorization is required for this medication. To initiate the process, please use the link listed below to access the SC DAP Prior Authorization Request Form: <u>SC DAP Prior Authorization Form</u>
Stavudine	stavudine	NRTI	
Stribild	elvitegravir / cobicistat / emtricitabine / tenofovir disoproxil fumarate	Combination Treatment	

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Brand Name	Generic Name	Drug Class	Additional Information
Sunlenca	lenacapavir	Capsid Inhibitor	Prior authorization is required for this medication. To initiate the process, please use the link listed below to access the SC DAP Prior Authorization Request Form: <u>SC DAP Prior Authorization Form</u> Please note: Gilead Sciences has a limited network of specialty pharmacies which can dispense this medication. Please check with the pharmacy before trying to fill.
Symfi	efavirenz / lamivudine / tenofovir disoproxil fumarate	Combination Treatment	Product carries a boxed warning for post-treatment acute exacerbations of hepatitis B.
Symtuza	darunavir / cobicistat / emtricitabine / tenofovir alafenamide	Combination Treatment	
Tivicay	dolutegravir	Integrase Inhibitor	Clinical information regarding dolutegravir: At this point, women with HIV who wish to become pregnant and are currently receiving dolutegravir should be switched to a regimen with a more well-defined safety record in pregnancy. Women with HIV who are of childbearing age and are not interested in having children should be counseled about this information. Women who become pregnant while on dolutegravir need to discuss options with their HIV providers.
Triumeq	abacavir / dolutegravir / lamivudine	Integrase Inhibitor; NRTI	Before adding an abacavir-containing medication to the drug regimen, refer to the full prescribing information. Clinical information regarding dolutegravir: At this point, women with HIV who wish to become pregnant and are currently receiving dolutegravir should be switched to a regimen with a more well-defined safety record in pregnancy. Women with HIV who are of childbearing age and are not interested in having children should be counseled about this information. Women who become pregnant while on dolutegravir need to discuss options with their HIV providers.
Trogarzo	lbalizumab-uiyk	Anti-CD4 Monoclonal Antibody; Monoclonal Antibody; Post-Attachment Inhibitor; Monoclonal Antibody	Prior authorization is required for this medication. To initiate the process, please use the link listed below to access the SC DAP Prior Authorization Request Form: <u>SC DAP Prior Authorization Form</u> Please note: Theratechnologies has a limited network of specialty pharmacies which can dispense this medication. Please check with the pharmacy before trying to fill.
Truvada	emtricitabine / tenofovir disoproxil fumarate	NRTI; NtRTI	
Tybost	cobicistat	Cytochrome P-450 Inhibitor	Tybost should not be used with cobicistat-containing drugs such as Evotaz, Prezcobix, or Stribild. Tybost in combination with lopinavir/ritonavir or regimens containing ritonavir is not recommended due to similar effects of Tybost and ritonavir on CYP3A. Refer to the product's full prescribing information at the link below:
			Tybost Package Insert

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Brand Name	Generic Name	Drug Class	Additional Information
Viracept	nelfinavir	Protease Inhibitor	
Viread	tenofovir	Antihepadnaviral, NRTI (Anti-HBV); NtRTI	
OPPORTUNISTIC AND	CO-INFECTION DRUGS		
Acyclovir	acyclovir	Antiviral	
Amoxicillin	amoxicillin	Antibiotic	
Augmentin	amoxicillin clavulanate	Antibiotic	
Cipro	ciprofloxacin, oral	Antibiotic	
Clarithromycin	clarithromycin	Antibiotic	
Cleocin	clindamycin	Antibiotic	
Clotrimazole	clotrimazole	Antifungal	
Clotrimazole / betamethasone	clotrimazole / betamethasone topical	Antifungal	
Dapsone	dapsone	Antibiotic	
Diflucan	fluconazole	Antifungal	
Doxycycline hyclate	doxycycline hyclate	Antibiotic	
Doxycycline monohydrate	doxycycline monohydrate	Antibiotic	
Famciclovir	famciclovir	Antiviral	
Ketoconazole	ketoconazole tablets, topical	Antifungal	
Leucovorin	leucovorin	Opportunistic Infection	
Levofloxacin	levofloxacin, oral	Antibiotic	
Mepron	atovaquone	Antiprotozoal	
Metronidazole	metronidazole, oral	Antibiotic	
Moxifloxacin	moxifloxacin, oral	Antibiotic	
Nystatin	nystatin	Antifungal	
Nystatin/triamcin acetonide	nystatin / triamcinolone topical	Antifungal	
Relenza	zanamivir	Antiviral	
Ribavirin	ribavirin	Antiviral	
Sporanox	itraconazole	Antifungal	
Sulfadiazine	sulfadiazine	Antibiotic	
Sulfamethoxazole / trimethoprim	sulfamethoxazole / trimethoprim	Antibiotic	
Tamiflu	oseltamivir	Antiviral	
Trimethoprim	trimethoprim	Antibiotic	
Valcyte	valganciclovir	Antiviral	
Valtrex	valacyclovir	Antiviral	
Vfend	voriconazole, oral	Antifungal	
Zithromax	azithromycin	Antibiotic	

ANTICONVULSAN	rs		
Neurontin	gabapentin	Anticonvulsant	

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ANTIDEPRESSANTS			
Amitriptyline	amitriptyline	Antidepressant	
Celexa	citalopram	Antidepressant	
Cymbalta	duloxetine	Antidepressant	
Effexor XR	venlafaxine	Antidepressant	
Lexapro	escitalopram	Antidepressant	
Paxil	paroxetine	Antidepressant	
Prozac	fluoxetine	Antidepressant	
Remeron	mirtazapine	Antidepressant	
Trazodone	trazodone	Antidepressant	
Wellbutrin XL, SR	bupropion	Antidepressant	
Zoloft	sertraline	Antidepressant	
ANTIEMETIC AGENTS	S		
Promethazine	promethazine	Antiemetic	
Ondansetron	ondansetron	Antiemetic	
ANTILIPEMIC AGENT	S		
Crestor	rosuvastatin	Antilipemic Agent	
Pravastatin	pravastatin	Antilipemic Agent	
Zocor	simvastatin	Antilipemic Agent	
ANTITUBERCULOSIS	AGENTS		
Myambutol	ethambutol	Antitubercular Agent	
Mycobutin	rifabutin	Antitubercular Agent	
HIV-ASSOCIATED LIP	ODYSTROPHY		
Egrifta SV	tesamorelin	Growth Hormone Releasing Factor	Prior authorization is required for this medication. To initiate the process, please use the link listed below to access the SC DAP Prior Authorization Request Form: <u>SC DAP Prior Authorization Form</u> Please note: Theratechnologies has a limited network of specialty pharmacies which can dispense this medication. Please check with the pharmacy before trying to fill.
ORAL STEROIDS			
Prednisone	prednisone, oral	Steroid	
SUBSTANCE ABUSE [DISORDER AGENTS		
Acamprosate	acamprosate (generics)	substance abuse disorder	
	oral film (Belbuca)	substance abuse disorder	
Buprenorphine	tablet (generics) patch (Butrans, generics)	substance abuse disorder	
Buprenorphine Buprenorphine / Naloxone		substance abuse disorder	
Buprenorphine /	patch (Butrans, generics) oral film (Suboxone, generics)		

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TOBACCO CESSATIO	TOBACCO CESSATION PRODUCTS					
South Carolina Tobacco Quitline: 1-800-QUIT-NOW						
Bupropion SR	bupropion SR tablets	Tobacco Cessation				
NicoDerm CQ	nicotine patch	Tobacco Cessation	Tobacco users have a better chance at quitting with a treatment regimen inclusive of medications and counseling. Visit the link below			
Nicorette	nicotine polacrilex gum, lozenge	Tobacco Cessation	for information regarding tobacco cessation:			
Nicotrol	nicotine inhaler, spray	Tobacco Cessation	Tobacco Cessation			
Varenicline	varenicline tablets	Tobacco Cessation				

SC DAP DISPENSING GUIDELINES

Drug Coverage: A prescription is required for any ADAP formulary drug, regardless of whether the product is a prescription drug or an over-the-counter drug.

Generic Drugs: Generic formulations of ADAP formulary drugs are dispensed when determined as most cost-effective.

Quantity: Drug quantities of one-month supplies (as authorized by the prescriber) of ADAP formulary drugs are dispensed.

Formulary Acronyms:

NNRTI: Non-Nucleoside Reverse Transcriptase Inhibitor NRTI: Nucleoside Reverse Transcriptase Inhibitor NtRTI: Nucleotide Reverse Transcriptase Inhibitor

Prior Authorization: The physician should complete the SC DAP Prior Authorization (PA) Form. Fax the completed PA request form and Supporting Documentation to SGRX at 313-264-0985 (fax). After approval of a client's initial prescription for a drug requiring prior authorization, it is not necessary to submit an additional prior authorization request for that drug for that individual. The PA request form is located at:

SC DAP Prior Authorization Form