DPH

South Carolina Drug Assistance Program (SC DAP) Formulary

Revised July 1, 2024

Brand Name	Generic Name	Drug Class	Additional Information
ANTIRETROVIRAL DRI	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 regimen, 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 hepatitis B virus (HBV) and HIV-1. Prior to initiating treatment, patients should be tested for HBV infection. The emergence of HBV variants associated 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 patients co- infected with HIV-1 and HBV who have discontinued lamivudine.
Edurant	rilpivirine	NNRTI	

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Epivir la	emtricitabine amivudine	NRTI	
F	amivudine		
Evotaz a		NRTI	
	atazanavir / cobicistat	Protease Inhibitor; Cytochrome P-450 Inhibitor	
Fosamprenavir f	osamprenavir	Protease Inhibitor	
Fuzeon e	enfuvirtide	Fusion Protein Inhibitor	Prior authorization required for an individual's first ADAP prescription for this drug.
Genvoya e	elvitegravir / cobicistat / emtricitabine / tenofovir alafenamide	Combination Treatment	
Intelence e	etravirine	NNRTI	
Isentress, Isentress HD r	raltegravir	Integrase Inhibitor	
Juluca d	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 lo	opinavir / ritonavir	Protease Inhibitor	
Lamivudine / la Zidovudine	amivudine / zidovudine	NRTI	
Nevirapine, Nevirapine ER	nevirapine	NRTI	
Norvir r	ritonavir	Protease Inhibitor	
Odefsey t	emtricitabine / rilpivirine / enofovir alafenamide ^f umarate	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 d	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 d	darunavir / cobicistat	Protease Inhibitor; Cytochrome P-450 Inhibitor	
Prezista d	darunavir	Protease Inhibitor	



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Retrovir	zidovudine	NRTI	
Reyataz	atazanavir	Protease Inhibitor	
Rukobia	fostemsavir	gp120 Attachment Inhibitor	
Selzentry	maraviroc	CCR5 Antagonist	Prior authorization required for an individual's first ADAP prescription for this drug.
Stavudine	stavudine	NRTI	
Stribild	elvitegravir / cobicistat / emtricitabine / tenofovir disoproxil fumarate	Combination Treatment	
Symfi, Symfi Lo	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	Ibalizumab-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: Trogarzo will be dispensed from the Theratechnologies' approved network specialty pharmacy: CVS Specialty Customer Care 800-237-2767 phone 800-323-2445 fax <u>customer.servicefax@cvshealth.com</u> .
Truvada	emtricitabine / tenofovir disoproxil fumarate	NRTI; NtRTI	

SOUTH CAROLINA DEPARTMENT OF

PUBLIC HEALTH

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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
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	



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Tamiflu	oseltamivir	Antiviral	
Trimethoprim	trimethoprim	Antibiotic	
Valcyte	valganciclovir	Antiviral	
Valtrex	valacyclovir	Antiviral	
Vfend	voriconazole, oral	Antifungal	
Zithromax	azithromycin	Antibiotic	

ANTICONVULSANTS Neurontin gabapentin Anticonvulsant

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					
Promethazine	promethazine	Antiemetic			
Ondansetron	ondansetron	Antiemetic			

ANTILIPEMIC AGENTS		
Crestor	rosuvastatin	Antilipemic Agent
Pravastatin	pravastatin	Antilipemic Agent
Zocor	simvastatin	Antilipemic Agent

ANTITUBERCULOSIS AGENTS			
Myambutol	ethambutol	Antitubercular Agent	
Mycobutin	rifabutin	Antitubercular Agent	

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HIV-ASSOCIATED I	LIPODYSTROPHY		
			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:
			SC DAP Prior Authorization Form
Egrifta SV	tesamorelin	Growth Hormone Releasing Factor	Please note: Egrifta will be dispensed from the Theratechnologies' approved network specialty pharmacy:
			CVS Specialty Customer Care
			800-237-2767 phone
			800-323-2445 fax
			customer.servicefax@cvshealth.com
ORAL STEROIDS			
Prednisone	prednisone, oral	Steroid	

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

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