DISTRICT OF COLUMBIA ~ DEPARTMENT OF HEALTH~ ADAP

Boceprevir (Victrelis™) for Chronic Hepatitis C Virus (HCV) infection

PRIOR AUTHORIZATION PROGRAM ~ Treatment Renewal

Submit not later than treatment week 10, again by week 14, and finally by week 26

CLIENT'S NAME:_____ ADAP ID:_____

ADAP Policy: Boceprevir is an oral, direct-acting antiviral available through ADAP under this Prior Authorization Program for use in combination with therapy for the treatment of patients chronically infected with hepatitis C virus (HCV) genotype 1.

1. Please provide start date of peginterferon and ribavirin therapy_____

2. Was viral load obtained at treatment Week8? ☐ Yes ☐ No

   Date:_____HCV RNA / viral load:_____ ☐ Undetectable ☐ Detectable

3. Was viral load obtained at treatment Week12? ☐ Yes ☐ No

   Date:_____HCV RNA / viral load_____ ☐ Undetectable ☐ Detectable

4. Was viral load obtained at treatment Week 24? ☐ Yes ☐ No

   Date:_____HCV RNA / viral load_____ ☐ Undetectable ☐ Detectable

5. Has the patient been adherent with HCV therapy? ☐ Yes ☐ No

Dosage and administration: The recommended dose of boceprevir is 800mg orally three times a day (with food or light snack). Treatment regimen requires a 4week lead-in period. For first 4weeks of treatment, patient receives only peginterferon and ribavirin. Then boceprevir therapy is added to the regimen. Patient will receive boceprevir, peginterferon and ribavirin according to recommended guidelines. **For patients without cirrhosis who are previously untreated: HCV RNA is undetected at treatment Week8 and Week24:** patients receive triple therapy for 24weeks (total 28weeks); **if HCV RNA is detected at Week8 and undetected at Week24** continue all medicine through Weeks36, then peginterferon and ribavirin through Weeks48. **For previous partial responders or relapsers: if HCV RNA is undetected at treatment Week8 and treatment Week24** give peginterferon, ribavirin and boceprevir and complete treatment regimen through Week36. **If HCV RNA is undetected at Week8 and detected at Week24,** continue peginterferon, ribavirin and boceprevir through week36, then give peginterferon and ribavirin for 8 additional weeks. **If patient was previous null responder: if HVC RNA is detected or undetected at treatment Week8 and not detected at treatment Week24,** continue peginterferon, ribavirin and boceprevir and finish through treatment Week48. **Treatment futility: if the HCV RNA is ≥ 100 IU per mL at treatment Week 12,** then discontinue triple drug regimen. **If HCV RNA is detectable at treatment Week24,** discontinue triple drug regimen.

Physician's signature:_____**Date:**_____

Physician's Name:_____**Phone:**_____**Fax:**_____
Fax to Clinical Pharmacy Associates: (301) 617-9882 Phone: (301) 617- 0555 ext. 30
Attention: Prior Approval Program

Approval: ☐ Yes ☐ No Date_____ Initials_____ Office use only

Reason for denial_____