

DISTRICT OF COLUMBIA ~ DEPARTMENT OF HEALTH~ ADAP
Boceprevir (Victrelis®) for Chronic Hepatitis C Virus (HCV) infection
PRIOR AUTHORIZATION PROGRAM ~ Initial Request

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 therapy for the treatment of patients chronically infected with hepatitis C virus (HCV) genotype 1.

1. Is the patient coinfecting with HCV genotype 1? ☐ Yes ☐ No
2. Will the patient receive pegylated interferon and ribavirin therapy? ☐ Yes ☐ No
3. Is the patient pregnant or trying to become pregnant? ☐ Yes ☐ No
Is the female partner of the patient (male) pregnant? ☐ Yes ☐ No
4. Is the patient currently taking any of the following medications? alfuosin, carbamazepine, phenobarbital, phenytoin, rifampin, ergot derivatives, cisapride, St. John's wort, lovastatin, simvastatin, drospirenone, sildenafil or tadalafil, pimoide, oral midazolam or triazolam, efavirenz, atazanavir/ritonavir, darunavir/ritonavir, or lopinavir/ritonavir? ☐ Yes ☐ No
5. Has the patient received prior interferon and ribavirin therapy? ☐ Yes ☐ No
If yes, please characterize the response*: ☐ partial responder, ☐ relapser or ☐ null responder
6. Has the patient received prior therapy with boceprevir or have a history of hypersensitivity to boceprevir? ☐ Yes ☐ No
7. Does the patient have decompensated cirrhosis? ☐ Yes ☐ No

Recommended 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 \geq 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 _____

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* A **partial responder** is defined as patient who had a HCV RNA level drop by at least 2 log IU/mL at treatment Week12, yet had detectable HCV RNA levels at Week24. A **relapser** is defined as a patient who had HCV RNA levels become undetectable during treatment, and then become detectable after the cessation of treatment. The **null responder** occurs in patients with HCV RNA levels that did not decrease by at least 2 log IU/mL at treatment Week12.