



Department of Vermont Health Access
NOB 1 South, 280 State Drive
Waterbury, VT 05671-1010

Hep C

FORM#28
R: 01.20
Agency of Human Services

HEPATITIS C TREATMENT Prior Authorization Request Form

For beneficiaries to receive coverage for Hepatitis C Treatment, it will be necessary for the prescriber to complete and fax this prior authorization request to Change Healthcare. Please complete this form in its entirety and sign and date below. Incomplete requests will be returned for additional information. For questions, please contact the Change Healthcare Help Desk at 1-844-679-5363.

Submit request via: Fax: 1-844-679-5366

Prescribing physician:

Name: _____
Physician NPI: _____
Phone#: _____
Fax#: _____
Address: _____
Contact Person at Office: _____

Beneficiary:

Name: _____
Medicaid ID#: _____
Patient's Phone#: _____
Date of Birth: _____ Sex: _____
Pharmacy Name: _____
Pharmacy NPI: _____
Pharmacy Phone: _____ Pharmacy Fax: _____

Hepatitis C treatment PA requests will be approved for members who meet the following guidelines. This PA form will cover up to twelve weeks of therapy. This form outlines the various regimens and clinical situations for which they will be considered medically necessary by Vermont Medicaid, as well as the required supporting documentation. The PA must be approved prior to the 1st dose. Documentation of adherence (viral load changes or progress notes with a documented compliance discussion with details on compliance to date) will be required for continuation of therapy beyond 12 weeks & must be submitted with the PA request prior to completing the third month of therapy.

*****Pediatric Regimens: DAA formulations that are FDA-approved for pediatric use may be approved for those under the age of eighteen when used in accordance with current AASLD guidelines, including indication and age. Prior authorization is still required prior to the first dose.**

<input type="checkbox"/>	Genotype 1a
<input type="checkbox"/>	Treatment naïve, no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 1 (HIV neg only) or 2 (only if HIV positive) or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin ONLY), not cirrhotic → Regimen 1 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin ONLY), compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin + NS3 protease inhibitor (telaprevir, boceprevir, simeprevir), no prior NS5A, no sofosbuvir), no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin + NS3 protease inhibitor (telaprevir, boceprevir, simeprevir), no prior NS5A, no sofosbuvir), compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (Non-NS5A inhibitor, sofosbuvir-containing regimen), no cirrhosis → Regimen 2
<input type="checkbox"/>	Treatment experienced (Non-NS5A inhibitor, sofosbuvir-containing regimen), with compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2
<input type="checkbox"/>	Treatment experienced, any NS5A inhibitor but NO NS3/4A protease inhibitor (prior therapy ONLY with daclatasvir+sofosbuvir, ledipasvir+sofosbuvir or sofosbuvir +velpatasvir), no cirrhosis or compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 3 or 7
<input type="checkbox"/>	Treatment experienced, any NS5A inhibitor (ledipasvir (Harvoni), velpatasvir (Epclusa/Vosevi), elbasvir (Zepatier), dasabuvir (Viekira), daclatasvir (Daklinza) including those given with a NS3/4A protease inhibitor, but NOT including glecaprevir/pibrentasvir (Mavyret) or sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures), non-cirrhotic or compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, non-cirrhotic → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 8
<input type="checkbox"/>	Treatment experienced, sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 15
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5 OR, if multiple negative baseline characteristics 9 or 14

<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), no cirrhosis → Regimen 7
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), compensated cirrhosis (Child-Pugh Class A ONLY) and/or multiple negative based line characteristics → Regimen 13
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 9
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment experienced, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 10
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A → Regimen 6 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A, ribavirin ineligible** → Regimen 4
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Genotype 1b
<input type="checkbox"/>	Treatment naïve, no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 1 (HIV neg only) or 2 (only if HIV positive) or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin ONLY), no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin ONLY), compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin + NS3 protease inhibitor (telaprevir, boceprevir, simeprevir), no prior NS5A, no sofosbuvir), no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin + NS3 protease inhibitor (telaprevir, boceprevir, simeprevir), no prior NS5A, no sofosbuvir), compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (Non-NS5A inhibitor, sofosbuvir-containing regimen), no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (Non-NS5A inhibitor, sofosbuvir-containing regimen), with compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced, any NS5A inhibitor but NO NS3/4A protease inhibitor (prior therapy ONLY with daclatasvir+sofosbuvir, ledipasvir+sofosbuvir or sofosbuvir +velpatasvir), no cirrhosis or compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 3 or 7
<input type="checkbox"/>	Treatment experienced, any NS5A inhibitor (ledipasvir (Harvoni), velpatasvir (Epclusa/Vosevi), elbasvir (Zepatier), dasabuvir (Viekira), pibrentasvir (Mavyret) and daclatasvir (Daklinza), including those given with a NS3/4A protease inhibitor but NOT including pibrentasvir (Mavyret) or sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, non-cirrhotic or compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, non-cirrhotic → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 8
<input type="checkbox"/>	Treatment experienced, sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 15
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5 OR, if multiple negative baseline characteristics 9 or 14
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), no cirrhosis → Regimen 7
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), compensated cirrhosis (Child-Pugh Class A ONLY) and/or multiple negative based line characteristics → Regimen 13
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 9
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment experienced, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 10
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A → Regimen 6 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A, ribavirin ineligible** → Regimen 4
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)

<input type="checkbox"/>	Genotype 2
<input type="checkbox"/>	Treatment naïve, no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 1 (HIV neg only) or 2 (only if HIV positive) or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (sofosbuvir + ribavirin), with or without cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (direct acting antiviral, including NS5A inhibitors EXCEPT glecaprevir/pibrentasvir (Mavyret) or sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures), with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, no cirrhosis → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 8
<input type="checkbox"/>	Treatment experienced, sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 15
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A → Regimen 6 (low dose ribavirin# if Child-Pugh Class C) or if RBV ineligible**ONLY → Regimen 4
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5 OR, if multiple negative baseline characteristics 9 or 14
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), no cirrhosis → Regimen 7
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), compensated cirrhosis (Child-Pugh Class A ONLY) and/or multiple negative baseline characteristics → Regimen 13
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 9
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment experienced, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 10
<input type="checkbox"/>	Genotype 3
<input type="checkbox"/>	Treatment naïve, no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 1 (HIV neg only) or 2 (only if HIV positive) or 5 (Y93H negative) or 6 (Y93H positive)
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), no cirrhosis, Y93H neg → Regimen 3 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), no cirrhosis, Y93H positive → Regimen 3 or 6
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 3 or 6
<input type="checkbox"/>	Treatment experienced (sofosbuvir + ribavirin +/- PEG-IFN), with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 3
<input type="checkbox"/>	Treatment experienced (direct acting antiviral, including NS5A inhibitors EXCEPT glecaprevir/pibrentasvir (Mavyret) or sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures), with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 7 or if prior NS5A failure and cirrhosis → Regimen 8
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, no cirrhosis → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 8
<input type="checkbox"/>	Treatment experienced, sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 15
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A → Regimen 6 (low dose ribavirin# if Child-Pugh Class C) or, if RBV ineligible ONLY** → Regimen 4
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, no cirrhosis → Regimen 2 or 5

<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5 OR, if multiple negative baseline characteristics 9 or 14
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), no cirrhosis → Regimen 7
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), compensated cirrhosis (Child-Pugh Class A ONLY) and/or multiple negative baseline characteristics → Regimen 13
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 9
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment experienced, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 10
<input type="checkbox"/>	Genotype 4
<input type="checkbox"/>	Treatment naïve, no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 1 (HIV neg only) or 2 (only if HIV positive) or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), compensated cirrhosis, Child-Pugh Class A ONLY → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (any direct acting antiviral including NS5A EXCEPT glecaprevir/pibrentasvir (Mavyret) or sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures), with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, no cirrhosis → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 8
<input type="checkbox"/>	Treatment experienced, sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, with or without compensated cirrhosis (Child-Pugh A ONLY) → Regimen 15
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A → Regimen 6 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A, ribavirin ineligible** → Regimen 4
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5 OR, if multiple negative baseline characteristics 9 or 14
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), no cirrhosis → Regimen 7
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), compensated cirrhosis (Child-Pugh Class A ONLY) and/or multiple negative based line characteristics → Regimen 13
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 9
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment experienced, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 10
<input type="checkbox"/>	Genotype 5
<input type="checkbox"/>	Treatment naïve, no cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, no cirrhosis, HIV positive → Regimen 2 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY, HIV negative → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY, HIV positive → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), without cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (any DAA including NS5A EXCEPT glecaprevir/pibrentasvir (Mavyret) or sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures), with or without compensated cirrhosis (Child-Pugh A ONLY) → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, no cirrhosis → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 8

<input type="checkbox"/>	Treatment experienced, sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 15
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A → Regimen 6 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A, ribavirin ineligible** → Regimen 4
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5 OR, if multiple negative baseline characteristics 9 or 14
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), no cirrhosis → Regimen 7
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), compensated cirrhosis (Child-Pugh Class A ONLY) and/or multiple negative based line characteristics → Regimen 13
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 9
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment experienced, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 10
<input type="checkbox"/>	Genotype 6
<input type="checkbox"/>	Treatment naïve, no cirrhosis, HIV negative → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, no cirrhosis, HIV positive → Regimen 2 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY, HIV negative → Regimen 1 or 5
<input type="checkbox"/>	Treatment naïve, compensated cirrhosis, Child-Pugh Class A ONLY, HIV positive → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), without cirrhosis → Regimen 1 or 5
<input type="checkbox"/>	Treatment experienced (PEG-IFN + ribavirin), compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5
<input type="checkbox"/>	Treatment experienced (any DAA including NS5A EXCEPT glecaprevir/pibrentasvir (Mavyret) or sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures), with or without compensated cirrhosis (Child-Pugh A ONLY) → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, no cirrhosis → Regimen 7
<input type="checkbox"/>	Treatment experienced, glecaprevir/pibrentasvir (Mavyret) failures, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 8
<input type="checkbox"/>	Treatment experienced, sofosbuvir/velpatasvir/voxilaprevir (Vosevi) failures, with or without compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 15
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A → Regimen 6 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Decompensated cirrhosis, no prior sofosbuvir or NS5A, ribavirin ineligible** → Regimen 4
<input type="checkbox"/>	Decompensated cirrhosis, prior sofosbuvir or NS5A treatment failure → Regimen 11 (low dose ribavirin# if Child-Pugh Class C)
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, no cirrhosis → Regimen 2 or 5
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve or experienced but with no direct acting antiviral (DAA) experience, compensated cirrhosis (Child-Pugh Class A ONLY) → Regimen 2 or 5 OR, if multiple negative baseline characteristics 9 or 14
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), no cirrhosis → Regimen 7
<input type="checkbox"/>	Re-infection of allograft liver after transplant, previous treatment with direct acting antivirals (DAAs), compensated cirrhosis (Child-Pugh Class A ONLY) and/or multiple negative based line characteristics → Regimen 13
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment naïve, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 9
<input type="checkbox"/>	Re-infection of allograft liver after transplant, treatment experienced, decompensated cirrhosis (Child-Pugh Class B and C only) → Regimen 10

REGIMENS:

1. Mavyret (glecaprevir/pibrentasvir) 100/40 mg; three (3) tablets daily for 56 days (8 weeks)
2. Mavyret (glecaprevir/pibrentasvir) 100/40 mg; three (3) tablets daily for 84 days (12 weeks)
3. Mavyret (glecaprevir/pibrentasvir) 100/40 mg; three (3) tablets daily for 112 days (16 weeks)
4. Epclusa (sofosbuvir/velpatasvir) 400/100 mg daily for 168 days (24 weeks)
5. Epclusa (sofosbuvir/velpatasvir) 400/100 mg daily for 84 days (12 weeks)
6. Epclusa (sofosbuvir/velpatasvir) 400/100 mg daily + weight-based ribavirin for 84 days (12 weeks)
7. Vosevi (sofosbuvir/velpatasvir/voxilaprevir) 400/100/100 mg, one tablet daily for 84 days (12 weeks)
8. Vosevi (sofosbuvir/velpatasvir/voxilaprevir) 400/100/100 mg, one tablet daily + weight-based ribavirin for 84 days (12 weeks)
9. Epclusa (sofosbuvir/velpatasvir) 400/100 mg daily + low dose ribavirin[#] for 84 days (12 weeks)
10. Epclusa (sofosbuvir/velpatasvir) 400/100 mg daily + low dose ribavirin[#] for 168 days (24 weeks)
11. Epclusa (sofosbuvir/velpatasvir) 400/100 mg daily + weight-based ribavirin for 168 days (24 weeks)
12. Mavyret (glecaprevir/pibrentasvir) 300/120 mg; three (3) tablets daily + weight-based ribavirin for 112 days (16 weeks)
13. Vosevi (sofosbuvir/velpatasvir/voxilaprevir) 400/100/100 mg, one tablet daily + low dose ribavirin[#] for 84 days (12 weeks)
14. Mavyret (glecaprevir/pibrentasvir) 100/40 mg; three (3) tablets daily + low dose ribavirin[#] for 84 days (12 weeks)
15. Vosevi (sofosbuvir/velpatasvir/voxilaprevir) 400/100/100 mg, one tablet daily + weight-based ribavirin for 168 days (24 weeks)

low dose ribavirin = 600 mg/day and increase as tolerated

‡ Genotype 1a polymorphisms at amino acid positions 28, 30, 31, or 93

The following documentation must be submitted with initial request for consideration of approval:

OTHER: Please provide clinical rationale for choosing a regimen that is beyond those found within the current guidelines, or for selecting regimens, including pediatric regimens, other than those outlined above.

Other drug regimen: Please specify all drugs and include the dose and duration for each. Provide weight for pediatric patients.

<input type="checkbox"/> Active HCV infection verified by viral load within the last year <input type="checkbox"/> An infection for at least 6 months has been documented or can be reasonably inferred	<input type="checkbox"/> HCV Genotype verified by lab Genotype: (circle) 1a 1b 2 3 4 5 6 <input type="checkbox"/> Metavir fibrosis score: _____ Date: _____ Method(s) used: _____ Note: Fib4 > 1.45 or APRI > 1 requires additional testing to determine if cirrhosis is present.
<input type="checkbox"/> Prescriber is, or has consulted with, a gastroenterologist, hepatologist. Consult must be w/in the past year with documentation of recommended regimen. Specialist requirement will NOT apply for patients who are treatment naïve, non-cirrhotic (Metavir score must be less than 4 or Ishak score less than 5 or other equivalent test), HBV negative, and HIV negative.	
<input type="checkbox"/> Patient is co-infected with HIV <input type="checkbox"/> Patient is co-infected with HBV	<input type="checkbox"/> Sovaldi: Current medication list that does NOT include: carbamazepine, phenytoin, phenobarbital, oxcarbazepine, rifabutin, rifampin, rifapentine, St. John's Wort, or tipranavir/ritonavir <input type="checkbox"/> Harvoni or generic Ledipasvir/sofosbuvir: Current medication list that does NOT include: carbamazepine, phenytoin, phenobarbital, oxcarbazepine, rifabutin, rifampin, rifapentine, St. John's Wort, ritonavir, tipranavir, Stribild, Crestor, H2 receptor antagonists above the following daily doses: famotidine 80 mg, ranitidine/nizatidine 600 mg or cimetidine 1600 mg; or PPIs above the following daily doses: esomeprazole 20 mg, lansoprazole or 30 mg, omeprazole 20 mg, pantoprazole 40 mg, rabeprazole 20 mg <input type="checkbox"/> Epclusa or generic Sofosbuvir/velpatasvir: Current medication list does not include: all meds listed under Sovaldi plus efavirenz, topotecan or rosuvastatin at doses > 10 mg <input type="checkbox"/> Mavyret: Medication list does NOT include atazanavir or rifampin <input type="checkbox"/> Vosevi: Medication list does NOT include rifampin

For ANY regimen that includes ribavirin

- For women of childbearing potential** (and male patients with female partners of childbearing potential):

- Patient is not pregnant (or a male with a pregnant female partner) and not planning to become pregnant during treatment or within 6 months of stopping
- Agreement that partners will use two forms of effective non-hormonal contraception during treatment and for at least 6 months after stopping
- Verification that monthly pregnancy tests will be performed throughout treatment

For Ribavirin-Ineligible:**

- History of severe or unstable cardiac disease
- Pregnant women and men with pregnant partners
- Diagnosis of hemoglobinopathy (e.g., thalassemia major, sickle cell anemia)
- Hypersensitivity to RBV
- Baseline platelet count < 70,000 cells/mm³
- ANC < 1500 cells/mm³
- Hb < 12 gm/ml in women or <13 g/dl in men
- Other: _____

By completing this form, I hereby certify that the above request is true, accurate and complete. That the request is medically necessary, does not exceed the medical needs of the member, and is clinically supported in your medical records. I also understand that any misrepresentations or concealment of any information requested in the prior authorization request may subject me to audit and recoupment.

Provider Signature: _____ **Date of Submission:** _____

***MUST MATCH PROVIDER LISTED ABOVE**