



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

HIV Combinations - Expedited Authorization Effective: January 1, 2021 (Medicaid)

Effective January 1, 2021, Molina Healthcare will add expedited authorization (EA) criteria for the following HIV combination drugs. These EA's allow pharmacies to submit a claim for continuation of therapy without a prior authorization.

| Product | Code | Criteria |
|--|-------------|--|
| Descovy (<i>emtricitabine/tenofovir alafenamide</i>) | 85000000006 | Continuation of pre-exposure prophylaxis |
| HIV combinations Biktarvy® (<i>bictegravir/emtricitabine/tenofovir alafenamide</i>) | 85000000007 | Continuation of antiviral treatment. |
| Delstrigo™ (<i>doravirine/lamivudine/tenofovir disoproxil</i>) | | |
| Descovy® (<i>emtricitabine/tenofovir alafenamide</i>) | | |
| Dovato (<i>dolutegravir/lamivudine</i>) | | |
| efavirenz/lamivudine/tenofovir disoproxil | | |
| Juluca (<i>dolutegravir/rilpivirine</i>) | | |
| Symtuza® (<i>darunavir/cobicistat/emtricitabine/tenofovir alafenamide</i>) | | |
| Temixys™ (<i>lamivudine/tenofovir disoproxil</i>) | | |

Thank you for your continued service to Molina members.

Pharmacy network participation varies by plan.

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