HIV Carve-In Benefit Frequently Asked Questions

**What HIV medications are covered and on formulary for MPC?**
All HIV medications are covered by MPC. MPC does have a list of preferred HIV agents. Non-preferred medications require prior authorization. You can find the medications by visiting [https://www.marylandphysicianscare.com/content/dam/centene/maryland/pdfs/hiv-carve-in-chart.pdf](https://www.marylandphysicianscare.com/content/dam/centene/maryland/pdfs/hiv-carve-in-chart.pdf)

**Where can I go to find MPC’s preferred HIV medications list and non-preferred prior authorization requirements?**
These are posted on the MPC Website section – [HIV-Carve-in Benefit Information](https://www.marylandphysicianscare.com/content/dam/centene/maryland/pdfs/hiv-carve-in-chart.pdf).

**What are the single-pill, complete regimen agents preferred by MPC?**
Biktarvy, Symfi and Symfi Lo are the only preferred single-pill, complete regimen therapies for MPC.

**What medication is covered for PrEP therapy?**
MPC covers Truvada for as preferred PrEP therapy. Prior authorization is not required.

**What is the process for requesting a prior authorization?**
Providers retrieve an authorization form from the MPC Website and fax to ESI at 877-251-5896 or call ESI at 877-251-5896 for most prior authorization requests. Trogarzo and Fuzeon are reviewed by MPC’s Pharmacy Department. Fax authorization requests for these drugs to 1-866-207-7231.

**Does MPC cover a 90 days’ supply of medications?**
All preferred medications can be filled for a 90 day fill. Please note that the script must be written for 90 days in order to be dispensed for 90 days, per Maryland regulations.

**Does MPC charge a member copay for HIV medications?**
MPC does not charge its members a copay for any medications including HIV medications.

**Will clinical documentation be required for prior authorization requests for HIV medication?**
Clinical documentation may be required to support any prior authorization request.

**Is prior authorization required for pediatric members less than 21 years old?**
No, neither preferred agents nor non-preferred agents require prior authorization. All HIV medications are covered.
Does MPC allow an emergency fill override for HIV medications?
In the event of an actual emergency, a pharmacist may use his/her clinical judgment to approve a 30-day emergency fill for preferred medications and 14-day emergency fill for non-preferred medications.