

HIV DRUG ASSISTANCE PROGRAM (HDAP) FORMULARY

Nucleoside /Nucleotide Reverse Transcriptase Inhibitors

Abacavir/Lamivudine 600/300mg (Epzicom)	Emtricitabine 200mg (Emtriva)	Lamivudine 150mg (Epivir)	
Lamivudine/Zidovudine 300/150mg (Combivir)	Lamivudine 300mg (Epivir)	Lamivudine 240ml	
(Epivir)	Emtricitabine/Tenofovir 200/300mg (Truvada)	Intelence (100mg) (Etravirine)	Tenofovir DP 300mg
(Viread)			
Abacavir/Lamivudine/Zidovudine 300/150/300mg (Trizivir)	Zidovudine 100mg(Retrovir)	Zidovudine 240ml (Retrovir)	
Zidovudine 300mg (Retrovir)	Didanosine 400mg (Videx EC)	Didanosine 250mg (Videx EC)	
Stavudine 15mg (Zerit)	Stavudine 20mg (Zerit)	Stavudine 30mg (Zerit)	
Stavudine 40mg (Zerit)	Abacavir 300mg (Ziagen)	Abacavir 20mg/ml (Ziagen)	

Non-Nucleoside Reverse Transcriptase Inhibitors

Efavirenz 600mg (Sustiva)	Nevirapine 200mg (Viramune)	Nevirapine 50mg/5ml (Viramune)	Atripla 200/300mg
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Protease Inhibitors:

Indinavir Sulfate 400mg (Crixivan)	Saquinavir Mesylate 200mg (Invirase)	Saquinavir Mesylate 500mg (Invirase)
Lopinavir/Ritonavir 200/50mg (Kaletra Tabs)	Lopinavir/Ritonavir 160ml (Kaletra)	Fosamprenavir Calcium 700mg (Lexiva)
Nelfinavir Mesylate 250mg (Viracept)	Nelfinavir Mesylate 625mg (Viracept)	Ritonavir 100mg (Norvir)
Ritonavir 240ml (Norvir)	Atazanavir Sulfate 150mg(Reyataz)	Atazanavir 200mg(Reyataz)
Atazanavir 300mg (Reyataz)	Darunavir 300mg (Prezista)	Darunavir 400mg
Darunavir 600mg	Tipranavir 250mg (Aptivus)	

Fusion Inhibitor

***Enfuvirtide (T-20) (Fuzeon)**

CCR5 Inhibitors

Selzentry(Maraviroc) 150mg, 300mg

Integrase Inhibitors

Isentress 400mg (Raltegravir)

O. I. Treatments:

Acyclovir (400 mg)	Acyclovir (800 mg)	Dapsone (100mg)
Azithromycin 600mg(Zithromax)	Clarithromycin 500mg (Biaxin)	Clindamycin (150 mg)
Ethambutol HCL 400mg (Myambutol)	Fluconazole 100mg (Diflucan)	Fluconazole 200mg (Diflucan)
Pyrimethamine 25mg Daraprim)	Nystatin (100,000 U/ml)	Leucovorin (5 mg)
Pentamidine IV300mg (NebuPent)	Atovaquone 210ml (Mepron)	Promethazine25 mg(Phenergan)
Paromomycin Sulfate 250mg(Humatin)	Rifabutin 150mg (Mycobutin)	Primaquin (26.3mg)
SMT/TMP DS (Bactrim) (800/160mg)	Itraconazole 100mg (Sporanox)	Sulfadiazine (500 mg)
Valganciclovir HCL 450mg (Valcyte)	Valacyclovir 500mg (Valtrex)	

Miscellaneous Drugs:

Venlafaxine XR 150mg (Effexor XR)	Glipizide 5mg (Glucotrol)	Gemfibrozil 600mg (Lopid)
HCTZ (Hydrochlorothiazide (25mg)	Metformin XR (500mg)	Gabapentin 300mg (Neurontin)
Gabapentin 800mg(Neurontin)	Quinapril 10mg (Accupril)	Pioglitazone 15mg (Actos)
Pioglitazone 30mg (Actos)	Amitriptyline (25 mg)	Pravastatin Sodium 20mg (Pravachol)
Prednisone (10 mg)	Bupropion SR 150mg	(Wellbutrin SR)
Sertraline 100mg (Zoloft)	Phenytoin 100mg(Dilantin)	Novolin 70/30

Note: In addition, the following medicines are available through the Medical Services Fee Schedule:

Amphotericin B (50 mg)	Ganciclovir (500 mg)
Ceftriaxone (Rocephin) (250 mg)	Vancomycin (500 mg)
Cosyntropin (Cortrosyn) (0.25 mg)	Foscarnet sodium (Foscavir) (1,000 mg)

- Non Centers of Excellence providers must obtain prior approval for Fuzeon and Selzentry.

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