



SONIA ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

Office of AIDS (OA)
PrEP Assistance Program (PrEP-AP)

Management Memorandum
Memorandum Number: 2019-32

DATE: November 26, 2019

TO: PREP-AP CLINICAL NETWORK PROVIDERS AND PREP-AP ENROLLMENT WORKERS

SUBJECT: **“REVISED MANAGEMENT MEMORANDUM 2019-32”
ADDITIONAL OPTIONS FOR POST-EXPOSURE PROPHYLAXIS
ADDED TO THE PREP-AP FORMULARY: BICTEGRAVIR/TENOFOVIR
ALAFENAMIDE /EMTRICITABINE (BIKTARVY®), RALTEGRAVIR
(ISENTRESS® HD), DARUNAVIR (PREZISTA®), AND RITONAVIR
(NORVIR®)**

Revisions to this memorandum are shown in italicized text

Effective October 4, 2019, the following medications have been added to the PrEP-AP formulary as additional options for non-occupational post-exposure prophylaxis (PEP): bicitegravir/tenofovir alafenamide/emtricitabine (Biktarvy®), raltegravir (Isentress®), darunavir (Prezista®), and ritonavir (Norvir®).

PEP involves taking antiretroviral medications after a potential exposure to HIV to prevent HIV acquisition. PEP must be started within 72 hours after a possible HIV exposure to be effective and should be initiated as soon as possible. PrEP-AP can provide assistance with PEP medications and associated medical services including healthcare provider fees and testing for acute HIV infection, sexually transmitted infections, renal function, and pregnancy.

With the addition of medications listed above, the PrEP-AP formulary now includes the following PEP regimens for people with normal renal function (including pregnant women):

1. Dolutegravir 50mg once daily (Tivicay®) **plus** tenofovir disoproxil fumarate 300mg/emtricitabine 200mg once daily (Truvada®) is the preferred first line regimen for PEP per



the [Centers for Disease Control and Prevention's \(CDC\) Updated PEP Guidelines](#). Both pills should be taken daily for 28-days¹.

2. **Revised:** *Raltegravir (Isentress®) plus Truvada® (once daily) is a preferred first line regimen for PEP in CDC's Updated PEP Guidelines. This regimen is also preferred in people who are early in pregnancy or who may become pregnant while receiving PEP because of concerns of an increased risk of neural tube defects associated with exposure to dolutegravir at conception. Raltegravir can be dosed 1200mg (HD formulation: two 600mg pills) once daily or 400mg twice daily. The 400mg twice daily dosing is recommended in pregnancy.*
3. Bicitgravir 50mg/tenofovir alafenamide 25mg/emtricitabine 200mg once daily (Biktarvy®) is a preferred regimen in the [Pacific AIDS Education & Training Center \(PAETC\) HIV Essentials and Quick Clinical Guides](#).
4. Darunavir 800 mg once daily (Prezista®) and ritonavir 100 mg once daily (Norvir®) **plus** Truvada® (once daily) is an alternative regimen in CDC's Updated PEP Guidelines.

Revised: *Tenofovir alafenamide 25mg/emtricitabine 200mg (Descovy®) can be substituted for Truvada®.*

A separate management memo detailing the process to access each PEP regimen will follow shortly.

ADAP management requests that you the share this information with your clinical leadership team and local prescribers. The PrEP-AP formulary has been updated to reflect the addition of these medications; it can be accessed at the following link: <https://cdphprep-ap.magellanrx.com/member/documents>.

If you have any questions regarding the addition of the medications to the PrEP-AP formulary, please contact Cynthia Reed-Aguayo, ADAP Specialist, at (916) 449-5791.

Thank you,



Sandra Robinson, MBA
ADAP Branch Chief
California Department of Public Health

¹ Although PEP is prescribed for 28 days, antiretroviral medications are often pre-packaged in 30-day bottles that cannot be redistributed by the pharmacy into a smaller number of doses. PrEP-AP will cover a 30-day supply of medication and PrEP-AP clients can discuss with their healthcare if any medication is leftover after a 28-day course.