

## Pharmacy Prior Approval Request for Sofosbuvir-Velpatasvir (generic for Epclusa)

### Beneficiary Information

1. Beneficiary Last Name: \_\_\_\_\_ 2. First Name: \_\_\_\_\_  
3. Beneficiary ID #: \_\_\_\_\_ 4. Beneficiary Date of Birth: \_\_\_\_\_ 5. Beneficiary Gender: \_\_\_\_\_

### Prescriber Information

6. Prescribing Provider NPI #: \_\_\_\_\_  
7. Requester Contact Information - Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Ext. \_\_\_\_\_

### Drug Information

8. Drug Name: \_\_\_\_\_ 9. Strength: \_\_\_\_\_ 10. Quantity Per 30 Days: 28  
11. Length of Therapy (in days):  12 Weeks

### Clinical Information

1. Is the beneficiary 6 years of age or older with a weight of at least 17kg with a diagnosis of chronic hepatitis C (CHC) with confirmed genotype 1, 2, 3, 4, 5, or 6?  
 Yes  No **Genotype is:** \_\_\_\_\_
2. Are medical records documenting the diagnosis of chronic hepatitis C with genotype and subtype being submitted with this request?  Yes  No **\*\*Lab test results MUST be attached to the PA to be approved.\*\***  
**(documentation of genotype waived if treatment naïve beneficiaries)**
3. Does the beneficiary have a documented quantitative HCV RNA at baseline that was tested within the past 6 months (medical documentation required)?  Yes  No **HCV RNA (IU/ml):** \_\_\_\_\_ **and/or log10 value:** \_\_\_\_\_
4. As the provider, are you reasonably certain that treatment will improve the beneficiary's overall health status?  
 Yes  No
5. Does the beneficiary have FDA-labeled contraindications to sofosbuvir-velpatasvir?  Yes  No
6. Will sofosbuvir-velpatasvir be used in combination with other drugs containing sofosbuvir?  Yes  No

Signature of Prescriber: \_\_\_\_\_ Date: \_\_\_\_\_

#### (Prescriber Signature Mandatory)

I certify that the information provided is accurate and complete to the best of my knowledge, and I understand that any falsification, omission, or concealment of material fact may subject me to civil or criminal liability.

Fax this form to: (866)-399-0929

Pharmacy PA Call Center: (833) 585-4309