

**RUKOBIA (fostemsavir tromethamine, oral)**

<b>Diagnosis Considered for Coverage:</b> <ul style="list-style-type: none"><li>• Human Immunodeficiency Virus (HIV) infection</li></ul>
<b>Coverage Criteria:</b>  <b>For diagnosis listed above:</b> <ul style="list-style-type: none"><li>• Prescriber is an HIV specialist, <b>and</b></li><li>• Provider attestation that patient is treatment-experienced with multidrug-resistant HIV-1, <b>and</b></li><li>• Being used in combination with an optimized HAART regimen, <b>and</b></li><li>• Dose does not exceed 2 tablets per day.</li></ul>
<b>Coverage Duration:</b> one year

Effective Date: 1/31/2024