

New York State

Removal of Prior Authorization for Hepatitis C Medications

Frequently Asked Questions

1. Are insurance companies aware of this change?

Yes, insurance companies (Medicaid Managed Care plans) are aware of this change. On July 23, 2020, the New York State Medicaid Drug Utilization Review (NYS DUR) Board recommended changes to the Medicaid pharmacy prior authorization programs. This included changes for the hepatitis C agents - *In addition to the standard clinical criteria for non-preferred products, all products require prior authorization if there is no evidence of a Federal Drug Administration (FDA)-approved or compendia-supported diagnosis in history or if the patient is being retreated.* The DUR Board does include Medicaid Managed Care (MMC) plan representation. The MMC plans were also notified via an email communication from the NYS Department of Health (DOH) prior to the Medicaid Update.

2. Are providers aware of this new change?

Yes, providers were made aware in the September 2020 NYS Medicaid Update found here: https://www.health.ny.gov/health_care/medicaid/program/update/2020/no14_2020-09.htm

3. Does this change include patients just with straight Medicaid or those enrolled in a managed care plan?

This change impacts both individuals enrolled in NYS Medicaid Fee for Service and any of the NYS Medicaid managed care plans.

4. Does this change effect those in a commercial/private insurance plan?

This change does **not** affect commercial/private insurance.

5. Does this change effect those in Medicare?

No, this change does not impact any Medicare pharmacy rules or requirements.

6. When will the removal of prior authorization (PA) go into effect for NYS Medicaid Fee for Service (FFS)?

The removal of prior authorization, for preferred drugs on initial therapy, in FFS went into effect on October 8, 2020.

7. When will removal of clinical criteria for PA go into effect for the MMC plans?

The NYSDOH is working with the MMC plans and are targeting by the end of the calendar year.

8. In what situations is PA still required?

PA is still required in the following situations:

- Retreatment
- When prescribing a non-preferred drug
- When there is no evidence of a Federal Drug Administration (FDA)-approved or compendia-supported diagnosis in history

9. What are the current clinical criteria for prior authorization for HCV Direct Acting Antivirals in FFS?

The current clinical criteria for prior authorization for HCV Direct Acting Antivirals in FFS are:

- Confirm diagnosis of FDA-approved or compendia-supported indication.
- For patients being retreated require confirmation of patient readiness and adherence
 - Evaluation by using scales or assessment tools readily to determine a patient’s readiness to initiate HCV treatment, specifically drug and alcohol abuse potential. Assessment tools are available to healthcare practitioners at: <https://www.drugabuse.gov/nidamed-medical-health-professionals/screening-tools-resources/chart-screening-tools> OR <https://prepc.org/>.
- The Medicaid FFS Hepatitis C Worksheet can be accessed at: https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PA_Worksheet_Prescribers_HepC.docx

10. What are the current clinical criteria for prior authorization for HCV Direct Acting Antivirals in MMCs?

Each MMC plan has their own set of clinical criteria, which closely mirrors Medicaid FFS. The criteria can be found on their respective web sites. For links to the MMC plan web sites, go to NYS Medicaid Managed Care Pharmacy Benefit Information Center and click on the MMC plan icon.

<https://mmcdruginformation.nysdoh.suny.edu/>

11. What are the current preferred HCV Direct Acting Antivirals on the FFS formulary?

The current preferred DAAs on the FFS formulary are:

- Mavyret™
- ribavirin
- sofosbuvir/velpatasvir (gen Epclusa®)
- Vosevi®

12. Where can I find more information on the NYS Medicaid FFS Preferred Drugs?

For more information on the NYS Medicaid FFS Preferred Drug List, go to:

https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf

13. Where can I find the preferred HCV Direct acting Antivirals for the MMC plans?

Each MMC plan has their own formulary. The formularies can be found on their respective web sites. For links to the MMC plan web sites, go to NYS Medicaid Managed Care Pharmacy Benefit Information Center and click on the MMC plan icon. <https://mmcdruginformation.nysdoh.suny.edu/>

14. If I have questions about prior authorization for HCV medications, who can I contact?

For questions about PA send an email to ppno@health.ny.gov

15. What documentation can a provider share with MMC plans, if told PA is still required?

The Medicaid Update:

https://www.health.ny.gov/health_care/medicaid/program/update/2020/no14_2020-09.htm

16. What should a provider do if they receive a denial for a medication when all criteria for approval have been met?

Providers can reach out to the Medicaid Pharmacy Department via email at: ppno@health.ny.gov . Please include the MMC plan name, patient name, ID, DOB and details of the denial.

17. Where can someone find more information on the NYS Medicaid Pharmacy Programs?

For more information on the NYS Medicaid Pharmacy Programs:

http://www.health.ny.gov/health_care/medicaid/program/pharmacy.htm

18. How can someone find a hepatitis C provider in NYS?

To find a hepatitis C provider in NYS go to: <http://aidev/ProviderDirectory/>

19. Where can someone find out information on the pharmacy benefit carve-out.

Effective April 1, 2021, per a Medicaid Redesign Team budget initiative, Medicaid will move the pharmacy benefit for 4.3 million Medicaid managed care members back to Medicaid fee-for-service (FFS). More information on this initiative can be found at:

https://www.health.ny.gov/health_care/medicaid/redesign/mrt2/pharmacy_carve_out/