



Grade	Summary
<p style="font-size: 2em; font-weight: bold; color: #8B4513;">A-</p>	<p><b>Liver Damage (Fibrosis) Restrictions:</b> Fee-For-Service (FFS) does not have liver damage requirements. A number of Managed Care Organizations (MCOs) have updated their published criteria to reflect no liver damage requirements or otherwise incorporate by reference the applicable California Department of Health Care Services policy: Aetna Better Health of California, Alameda Alliance for Health, California Health and Wellness, CalOptima, CalViva, Central California Alliance for Health, Contra Costa Health Plan, Health Net, Health Plan of San Joaquin, Inland Empire Health Plan, Kaiser Permanente, Kern Family Health Care, Partnership Healthplan of California, San Francisco Health Plan, and Santa Clara Family Health Plan. However, Anthem, Care1st Health Plan, CenCal Health, Community Health Group, Gold Coast Health Plan, Health Plan of San Mateo, LA Care Health Plan, Molina Healthcare of California, and UnitedHealthcare Community Plan of California do not make criteria publicly available.</p> <p><b>Sobriety Restrictions:</b> FFS and MCOs do not have sobriety requirements. Anthem, Care1st Health Plan, CenCal Health, Community Health Group, Gold Coast Health Plan, Health Plan of San Mateo, LA Care Health Plan, Molina Healthcare of California, and UnitedHealthcare Community Plan of California do not make criteria publicly available.</p> <p><b>Prescriber Restrictions:</b> FFS and MCOs do not have prescriber requirements.</p> <p><b>Recommendations to Improve Patient Access:</b></p> <ul style="list-style-type: none"> <li>• Maintain parity across FFS and MCOs.</li> <li>• Increase transparency regarding hepatitis C coverage requirements among MCOs.</li> </ul> <p><i>Grade Rationale: In July 2018, DHCS published a revised policy on hepatitis C medications which removed liver damage requirements as a barrier to access and which continues to ensure that there are no sobriety or prescriber restrictions in FFS. Many MCOs adhere to DHCS policy. Because several MCOs do not provide their coverage criteria publicly, a “minus” has been added to the state’s “A” grade.</i></p>

## Background

As of May 2018, California had 12,040,183 individuals enrolled in Medicaid (known as Medi-Cal) and the Children’s Health Insurance Program.<sup>2</sup> Medi-Cal operates a Fee-For-Service (FFS) program and employs six managed care models: Two-Plan, County Organized Health Systems (COHS), Geographic Managed Care (GMC), Regional Model (RM), Imperial and San Benito (county).<sup>3</sup> Most beneficiaries, 84 percent, are enrolled in a Managed Care Organization (MCO) that operates in one of the above managed care systems.<sup>4</sup> The remaining 16 percent participate in the FFS program.<sup>5</sup> In 2015, the Department of Health Care Services published a revised policy for the treatment of hepatitis C and sent a letter to all MCOs informing them that this hepatitis C coverage criteria applied across the whole program.<sup>6</sup> All beneficiaries—whether enrolled in FFS or MCO—are subject to the same hepatitis C prior authorization (PA) criteria. The FFS hepatitis C coverage criteria was updated in July 2018 to reflect up-to-date guidelines.<sup>7</sup>

## State of Medicaid Hepatitis C Treatment Access

California has recently expanded hepatitis C treatment access. In July 2018, the state issued an updated policy removing liver damage restrictions. This updated policy, consistent with the previous policy, does not impose sobriety or prescriber restrictions.<sup>8</sup> MCOs are required to apply FFS hepatitis C coverage criteria.<sup>9</sup>

California imposes other PA requirements. A beneficiary must be evaluated for readiness to initiate treatment and must be able and willing to strictly adhere to prescribed treatment protocols.<sup>10</sup> Prescribers must educate patients regarding potential risks and benefits of hepatitis C therapy and the potential for resistance and failed therapy if medication is not taken as prescribed.<sup>11</sup> Beneficiaries must be at least the minimum age approved by the federal Food and Drug Administration to qualify for treatment.<sup>12</sup> California imposes quantity limits; a prescription is dispensed in quantities of 28 days at a time.<sup>13</sup> Some MCOs dispense in quantities of 14 days. Prescribers must apply for therapy to be reauthorized/continued. If a patient has not been adherent to the treatment protocol, reauthorization may be denied.

Additionally, missed hepatitis C medical appointments may result in denial of treatment authorization. The Medi-Cal Formulary includes the following Direct-Acting Antivirals (DAAs): Epclusa, Harvoni, Mavyret, Sovaldi, Viekira Pak, and Zepatier.<sup>14</sup> MCOs can establish their own PDLs.

California is transparent regarding its hepatitis C coverage requirements. The state responded to the NVHR/CHLPI survey on hepatitis C coverage requirements.

## Liver Damage (Fibrosis) Restrictions

As of July 2018, FFS has eliminated minimum liver damage requirements, and beneficiaries can qualify for the treatment regardless of liver damage.<sup>15</sup>

Many MCOs have coverage criteria that match the FFS policy and do not impose liver damage restrictions.<sup>16</sup> Anthem, Care1st Health Plan, CenCal Health, Community Health Group, Gold Coast Health Plan, Health Plan of San Mateo, LA Care Health Plan, Molina Healthcare of California, and UnitedHealthcare Community Plan of California do not make criteria publicly available.

## Sobriety Restrictions

FFS does not have any sobriety restrictions.<sup>17</sup> Among MCOs that make criteria publicly available, there are no sobriety restrictions.<sup>18</sup> Anthem, Care1st Health Plan, CenCal Health, Community Health Group, Gold Coast Health Plan, Health Plan of San Mateo, LA Care Health Plan, Molina Healthcare of California, and UnitedHealthcare Community Plan of California do not make criteria publicly available.

## Provider Restrictions

California does not impose any prescriber restrictions.<sup>19</sup> This applies to FFS and MCO beneficiaries.<sup>20</sup>

## Points of Contact for Questions & Concerns about California's State of Hepatitis C Medicaid Access

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<sup>1</sup> HepVu, California State Profile: <https://hepvu.org/state/california/>

<sup>2</sup> Medicaid and CHIP in California, By-State, <https://www.medicaid.gov/medicaid/by-state/stateprofile.html?state=california>

<sup>3</sup> Medi-Cal Managed Care, California Department of Health Care Services (Accessed June 2017): <http://www.dhcs.ca.gov/services/Pages/Medi-CalManagedCare.aspx>; See also: Medi-Cal Managed Care Program Fact Sheet – Managed Care Models, California Department of Health Care Services (November 2014): <http://www.dhcs.ca.gov/provgovpart/Documents/MMCDModelFactSheet.pdf>; See also: Total Medicaid MCOs, Henry J. Kaiser Family Foundation, March 2017: <http://kff.org/other/stally-indicator/total-medicaid-mcos/> (Accessed June 2017)

<sup>4</sup> Share of Medicaid Population Covered Under Different Delivery Systems, Medicaid Managed Care Market Tracker, Henry J. Kaiser Family Foundation, June 2016 (Accessed June 2017): <http://www.kff.org/medicaid/state-indicator/share-of-medicaid-population-covered-under-different-delivery-systems/?currentTimeframe=0&sortModel=%7B%22collid%22:%22Location%22,%22sort%22:%22asc%22%7D>

<sup>5</sup> Ibid. Share of Medicaid Population Covered Under Different Delivery Systems

<sup>6</sup> Hepatitis C Treatment Plan Policy Update, All Medi-Cal Managed Care Health Plans, Department of Health Care Services, Health and Human Services Agency, State of California, June 29, 2015 (Accessed June 2017):

<http://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2015/APL15-016.pdf>

<sup>7</sup> Treatment Policy for the Management of Chronic Hepatitis C, California Department of Health Care Services (DHCS), Updated: July 1, 2018: [http://www.dhcs.ca.gov/Documents/DHCS\\_Hep\\_C\\_Policy\\_7\\_1\\_18.pdf](http://www.dhcs.ca.gov/Documents/DHCS_Hep_C_Policy_7_1_18.pdf) (Accessed August 2018)

<sup>8</sup> Ibid. Treatment Policy for the Management of Chronic Hepatitis C

<sup>9</sup> Hepatitis C Treatment Plan Policy Update

<sup>10</sup> Treatment Policy for the Management of Chronic Hepatitis C

<sup>11</sup> Treatment Policy for the Management of Chronic Hepatitis C

<sup>12</sup> Treatment Policy for the Management of Chronic Hepatitis C

<sup>13</sup> Treatment Policy for the Management of Chronic Hepatitis C

<sup>14</sup> Contract Drug List, California Department of Health Care Services (Accessed June 2017): [http://files.medi-cal.ca.gov/pubdoco/publications/masters-mtp/part2/drugsdpl1a\\_p00.doc](http://files.medi-cal.ca.gov/pubdoco/manual/man_query.asp?wSearch=(%23filename+drugsctl*.doc+OR+%23filename+drugsctl*.zip)&wFLogo=Contract+Drugs+List&wFLogoH=52&wFLogoW=516&wAlt=Contract+Drugs+List&wPath=N; See also Prescription Drugs Listed Alphabetically (Part 1 through 4): <a href=)

<sup>15</sup> Treatment Policy for the Management of Chronic Hepatitis C

<sup>16</sup> Pharmacy Prior Authorization – Non-Formulary and Prior Authorization Guidelines, Aetna Better Health of California (Accessed August 2018):

[https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California\\_PA%20Guidelines%20Chart\\_%208.1.18.pdf](https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California_PA%20Guidelines%20Chart_%208.1.18.pdf); Treatment Policy for the Management of Chronic Hepatitis C, Alameda Alliance for Health (Accessed August 2018):

[https://www.alamedaalliance.org/~media/files/modules/publications/pharmacy/dhcs\\_hep\\_c\\_policy\\_7\\_1\\_18.pdf](https://www.alamedaalliance.org/~media/files/modules/publications/pharmacy/dhcs_hep_c_policy_7_1_18.pdf); Clinical Policy: Hepatitis C Treatments, California Health & Wellness (Accessed August 2018):

[https://www.cahealthwellness.com/content/dam/centene/cahealthwellness/pdfs/CA.PPA.03\\_Hepatitis\\_C\\_Treatments\\_2017-12.pdf](https://www.cahealthwellness.com/content/dam/centene/cahealthwellness/pdfs/CA.PPA.03_Hepatitis_C_Treatments_2017-12.pdf); Hepatitis C, CalOptima (Accessed August 2018):

[https://www.caloptima.org/~media/Files/CalOptimaOrg/508/Providers/Pharmacy/Medi-Cal/MedicationGuidelines/2018-06\\_HepatitisC\\_508.ashx](https://www.caloptima.org/~media/Files/CalOptimaOrg/508/Providers/Pharmacy/Medi-Cal/MedicationGuidelines/2018-06_HepatitisC_508.ashx); Clinical Policy: Hepatitis C Treatments, Health Net (Accessed August 2018):

[https://www.healthnet.com/static/general/unprotected/html/national/pa\\_guidelines/587.pdf](https://www.healthnet.com/static/general/unprotected/html/national/pa_guidelines/587.pdf); Pharmacy Prior Authorization Criteria, Central California Alliance for Health (Accessed August 2018):

[https://www.ccah-alliance.org/Form%20Library/403-D-Prior-Auth-Criteria\\_V14.pdf](https://www.ccah-alliance.org/Form%20Library/403-D-Prior-Auth-Criteria_V14.pdf); Preferred Drug List, Contra Costa Health Plan (Accessed August 2018):

<https://cchealth.org/healthplan/pdf/pdl.pdf>; Clinical Policy: Hepatitis C Treatments, Health Net (Accessed August 2018):

[https://www.healthnet.com/static/general/unprotected/html/national/pa\\_guidelines/587.pdf](https://www.healthnet.com/static/general/unprotected/html/national/pa_guidelines/587.pdf); HPSJ Medication Coverage Policy, Health Plan of San Joaquin (Accessed August 2018):

<https://www.hpsj.com/wp-content/uploads/2018/05/Infectious-Disease-Hepatitis-C-2018-02.pdf>; Drug Class Prior Authorization Criteria (Hepatitis C), Inland Empire Health Plan (Accessed August 2018):

<https://www3.iehp.org/en/providers/pharmaceutical-services/clinical-information/pa-drug-treatment-criteria/>; 2018 California Medi-Cal Managed Care Formulary, Kaiser Permanente (Accessed August 2018):

[https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California\\_PA%20Guidelines%20Chart\\_%208.1.18.pdf](https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California_PA%20Guidelines%20Chart_%208.1.18.pdf); 2018 Drug Formulary, Kern Family Health Care (Accessed August 2018):

[https://www.kernfamilyhealthcare.com/files/KFHC\\_DrugFormulary\\_Pocket\\_201806250955.pdf](https://www.kernfamilyhealthcare.com/files/KFHC_DrugFormulary_Pocket_201806250955.pdf); Letter from Partnership Healthplan of California to Prescriber, dated July 1, 2018 (Accessed August 2018):

<http://www.partnershiphp.org/Providers/Pharmacy/Documents/TAR/HepC%20Packet%20Final%2007.03.2018.pdf>; Prior Authorization Criteria, San Francisco Health Plan (Accessed August 2018):

[http://www.sfhph.org/files/providers/formulary/Prior\\_Auth\\_Criteria.pdf](http://www.sfhph.org/files/providers/formulary/Prior_Auth_Criteria.pdf); and Prior Authorization Requirements, Santa Clara Family Health Plan (Accessed August 2018):

<https://www.scfhp.com/sites/default/files/cmcpriorauth.pdf>

<sup>17</sup> Treatment Policy for the Management of Chronic Hepatitis C

<sup>18</sup> Pharmacy Prior Authorization – Non-Formulary and Prior Authorization Guidelines, Aetna Better Health of California (Accessed August 2018):

[https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California\\_PA%20Guidelines%20Chart\\_%208.1.18.pdf](https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California_PA%20Guidelines%20Chart_%208.1.18.pdf); Treatment Policy for the Management of Chronic Hepatitis C, Alameda Alliance for Health (Accessed August 2018):

[https://www.alamedaalliance.org/~media/files/modules/publications/pharmacy/dhcs\\_hep\\_c\\_policy\\_7\\_1\\_18.pdf](https://www.alamedaalliance.org/~media/files/modules/publications/pharmacy/dhcs_hep_c_policy_7_1_18.pdf); Clinical Policy: Hepatitis C Treatments, California Health & Wellness (Accessed August 2018):

[https://www.cahealthwellness.com/content/dam/centene/cahealthwellness/pdfs/CA.PPA.03\\_Hepatitis\\_C\\_Treatments\\_2017-12.pdf](https://www.cahealthwellness.com/content/dam/centene/cahealthwellness/pdfs/CA.PPA.03_Hepatitis_C_Treatments_2017-12.pdf); Hepatitis C, CalOptima (Accessed August 2018):

[https://www.caloptima.org/~media/Files/CalOptimaOrg/508/Providers/Pharmacy/Medi-Cal/MedicationGuidelines/2018-06\\_HepatitisC\\_508.ashx](https://www.caloptima.org/~media/Files/CalOptimaOrg/508/Providers/Pharmacy/Medi-Cal/MedicationGuidelines/2018-06_HepatitisC_508.ashx); Clinical Policy: Hepatitis C Treatments, Health Net (Accessed August 2018):

[https://www.healthnet.com/static/general/unprotected/html/national/pa\\_guidelines/587.pdf](https://www.healthnet.com/static/general/unprotected/html/national/pa_guidelines/587.pdf); Pharmacy Prior Authorization Criteria, Central California Alliance for Health (Accessed August 2018):

[https://www.ccah-alliance.org/Form%20Library/403-D-Prior-Auth-Criteria\\_V14.pdf](https://www.ccah-alliance.org/Form%20Library/403-D-Prior-Auth-Criteria_V14.pdf); Preferred Drug List, Contra Costa Health Plan (Accessed August 2018):

<https://cchealth.org/healthplan/pdf/pdl.pdf>; Clinical Policy:

Hepatitis C Treatments, Health Net (Accessed August 2018): [https://www.healthnet.com/static/general/unprotected/html/national/pa\\_guidelines/587.pdf](https://www.healthnet.com/static/general/unprotected/html/national/pa_guidelines/587.pdf); HPSJ Medication Coverage Policy, Health Plan of San Joaquin (Accessed August 2018): <https://www.hpsj.com/wp-content/uploads/2018/05/Infectious-Disease-Hepatitis-C-2018-02.pdf>; Drug Class Prior Authorization Criteria (Hepatitis C), Inland Empire Health Plan (Accessed August 2018): <https://www3.iehp.org/en/providers/pharmaceutical-services/clinical-information/pa-drug-treatment-criteria/>; 2018 California Medi-Cal Managed Care Formulary, Kaiser Permanente (Accessed August 2018): [https://healthy.kaiserpermanente.org/static/health/pdfs/formulary/cal/2018\\_ca\\_Medi-Cal\\_Managed\\_Care\\_Formulary.pdf](https://healthy.kaiserpermanente.org/static/health/pdfs/formulary/cal/2018_ca_Medi-Cal_Managed_Care_Formulary.pdf); 2018 Drug Formulary, Kern Family Health Care (Accessed August 2018): [http://www.kernfamilyhealthcare.com/files/KFHC\\_DrugFormulary\\_Pocket\\_201806250955.pdf](http://www.kernfamilyhealthcare.com/files/KFHC_DrugFormulary_Pocket_201806250955.pdf); Letter from Partnership Healthplan of California to Prescriber, dated July 1, 2018 (Accessed August 2018): <http://www.partnershiphp.org/Providers/Pharmacy/Documents/TAR/HepC%20Packet%20Final%2007.03.2018.pdf>; Prior Authorization Criteria, San Francisco Health Plan (Accessed August 2018): [http://www.sfhph.org/files/providers/formulary/Prior\\_Auth\\_Criteria.pdf](http://www.sfhph.org/files/providers/formulary/Prior_Auth_Criteria.pdf); and Prior Authorization Requirements, Santa Clara Family Health Plan (Accessed August 2018): <https://www.scfhp.com/sites/default/files/cmcpriorauth.pdf>

<sup>19</sup> Treatment Policy for the Management of Chronic Hepatitis C

<sup>20</sup> Pharmacy Prior Authorization – Non-Formulary and Prior Authorization Guidelines, Aetna Better Health of California (Accessed August 2018):

[https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California\\_PA%20Guidelines%20Chart\\_%208.1.18.pdf](https://www.aetnabetterhealth.com/california/assets/pdf/pharmacy/Aetna%20Better%20Health%20California_PA%20Guidelines%20Chart_%208.1.18.pdf); Treatment Policy for the Management of Chronic Hepatitis C, Alameda Alliance for Health (Accessed August 2018): [https://www.alamedaalliance.org/~media/files/modules/publications/pharmacy/dhcs\\_hep\\_c\\_policy\\_7\\_1\\_18.pdf](https://www.alamedaalliance.org/~media/files/modules/publications/pharmacy/dhcs_hep_c_policy_7_1_18.pdf); Medicaid Approved Formulary Drug List, Anthem (Accessed August 2018): [https://mss.anthem.com/Documents/CACA\\_CAID\\_PDL\\_ENG.pdf](https://mss.anthem.com/Documents/CACA_CAID_PDL_ENG.pdf); Clinical Policy: Hepatitis C Treatments, California Health & Wellness (Accessed August 2018): [https://www.cahealthwellness.com/content/dam/centene/cahealthwellness/pdfs/CA.PPA.03\\_Hepatitis\\_C\\_Treatments\\_2017-12.pdf](https://www.cahealthwellness.com/content/dam/centene/cahealthwellness/pdfs/CA.PPA.03_Hepatitis_C_Treatments_2017-12.pdf); Hepatitis C, CalOptima (Accessed August 2018): [https://www.caloptima.org/~media/Files/CalOptimaOrg/508/Providers/Pharmacy/Medi-Cal/MedicationGuidelines/2018-06\\_HepatitisC\\_508.ashx](https://www.caloptima.org/~media/Files/CalOptimaOrg/508/Providers/Pharmacy/Medi-Cal/MedicationGuidelines/2018-06_HepatitisC_508.ashx); Care1st Medi-Cal Formulary Search, Care1st Health Plan (Accessed August 2018): [https://online.care1st.com/ca/mcal\\_formulary](https://online.care1st.com/ca/mcal_formulary); Pharmacy- Formulary, CenCal Health (Accessed August 2018): <https://www.cencalhealth.org/~media/files/pdfs/pharmacy/phformularyaug2018.pdf?ja=en>; Pharmacy Prior Authorization Criteria, Central California Alliance for Health (Accessed August 2018): [https://www.ccah-alliance.org/Form%20Library/403-D-Prior-Auth-Criteria\\_V14.pdf](https://www.ccah-alliance.org/Form%20Library/403-D-Prior-Auth-Criteria_V14.pdf); Medi-Cal, Community Health Group (Accessed August 2018): <https://www.chgsd.com/medi-cal.aspx>; Preferred Drug List, Contra Costa Health Plan (Accessed August 2018): <https://cchealth.org/healthplan/pdf/pdl.pdf>; 2018 Formulary, Gold Coast Health Plan (Accessed August 2018): [https://www.goldcoasthealthplan.org/media/57825/gchp\\_formulary\\_2018-07.pdf](https://www.goldcoasthealthplan.org/media/57825/gchp_formulary_2018-07.pdf); Clinical Policy: Hepatitis C Treatments, Health Net (Accessed August 2018): [https://www.healthnet.com/static/general/unprotected/html/national/pa\\_guidelines/587.pdf](https://www.healthnet.com/static/general/unprotected/html/national/pa_guidelines/587.pdf); Medication Coverage Policy, Health Plan of San Joaquin (Accessed August 2018): <https://www.hpsj.com/wp-content/uploads/2018/05/Infectious-Disease-Hepatitis-C-2018-02.pdf>; 2018 Formulary, Health Plan of San Mateo (Accessed August 2018): [https://www.hpsm.org/docs/default-source/member-manuals/healthworx\\_formulary.pdf?sfvrsn=fa41c6f3\\_13](https://www.hpsm.org/docs/default-source/member-manuals/healthworx_formulary.pdf?sfvrsn=fa41c6f3_13); Drug Class Prior Authorization Criteria (Hepatitis C), Inland Empire Health Plan (Accessed August 2018): <https://www3.iehp.org/en/providers/pharmaceutical-services/clinical-information/pa-drug-treatment-criteria/>; 2018 California Medi-Cal Managed Care Formulary, Kaiser Permanente (Accessed August 2018): [https://healthy.kaiserpermanente.org/static/health/pdfs/formulary/cal/2018\\_ca\\_Medi-Cal\\_Managed\\_Care\\_Formulary.pdf](https://healthy.kaiserpermanente.org/static/health/pdfs/formulary/cal/2018_ca_Medi-Cal_Managed_Care_Formulary.pdf); 2018 Drug Formulary, Kern Family Health Care (Accessed August 2018): [http://www.kernfamilyhealthcare.com/files/KFHC\\_DrugFormulary\\_Pocket\\_201806250955.pdf](http://www.kernfamilyhealthcare.com/files/KFHC_DrugFormulary_Pocket_201806250955.pdf); Medi-Cal Formulary, L.A. Care (Accessed August 2018): <https://www.lacare.org/sites/default/files/universal/1-2018%20MCLA%20Formulary.pdf>; Preferred Drug List (Formulary), Molina Health Care of California (Accessed August 2018): <http://www.molinahealthcare.com/members/ca/en-US/PDF/Medi-Cal/formulary.pdf>; Letter from Partnership Healthplan of California to Prescriber, dated July 1, 2018 (Accessed August 2018): <http://www.partnershiphp.org/Providers/Pharmacy/Documents/TAR/HepC%20Packet%20Final%2007.03.2018.pdf>; Prior Authorization Criteria, San Francisco Health Plan (Accessed August 2018): [http://www.sfhph.org/files/providers/formulary/Prior\\_Auth\\_Criteria.pdf](http://www.sfhph.org/files/providers/formulary/Prior_Auth_Criteria.pdf); and Prior Authorization Requirements, Santa Clara Family Health Plan (Accessed August 2018): <https://www.scfhp.com/sites/default/files/cmcpriorauth.pdf>; Preferred Drug List, UnitedHealthcare Community Plan of California (Accessed August 2018): <https://www.uhccommunityplan.com/content/dam/communityplan/plandocuments/findadrug/CA-PDL/CA-PDL.pdf>

<sup>21</sup> Department of Health Care Services Contacts (Accessed June 2017): [http://www.dhcs.ca.gov/Pages/dhcs\\_contact.aspx](http://www.dhcs.ca.gov/Pages/dhcs_contact.aspx)

<sup>22</sup> DUR: Board Meetings, California Department of Health Care Services: [http://files.medi-cal.ca.gov/pubdoco/dur/dur\\_coe.asp](http://files.medi-cal.ca.gov/pubdoco/dur/dur_coe.asp) (Accessed June 2017)