

Hepatitis C: State of Medicaid Access Report Card

Arizona



Grade	Recommendations to Improve Patient Access
B	<ul style="list-style-type: none"> Remove retreatment restriction. Ensure transparency and parity across FFS and MCOs regarding HCV coverage criteria. Remove additional restrictions as described below.

State Overview

As of September 2022, 2,257,808 individuals were enrolled in Medicaid and CHIP. ¹ It is estimated that as of 2016, 61,500 people were living with HCV in Arizona.² Arizona Medicaid, also known as Arizona Health Care Cost Containment System (AHCCCS), contracts with seven managed care organizations (MCOs): Arizona Complete Health, Banner-University Family Care, Care1st Health Plan, Mercy Care, Molina Complete Care, Health Choice Arizona, and UnitedHealthcare Community Plan.³

The Arizona Medicaid Preferred Drug List designates Mavyret and sofosbuvir/velpatasvir as preferred HCV treatment regimens.⁴

Deductions		Policy
Prior Authorization		Arizona Medicaid does not require prior authorization for initial treatment with preferred regimens. ⁵
Fibrosis Restrictions		Arizona Medicaid does not impose fibrosis restrictions. ⁶
Substance Use Restrictions		Arizona Medicaid does not impose substance use restrictions. ⁷
Prescriber Restrictions		Arizona Medicaid does not impose prescriber restrictions. ⁸
Retreatment Restrictions	-8	Arizona Medicaid imposes retreatment restrictions. Retreatment is not available when initial treatment fails as a result of non-adherence. Additionally, based on a quantity limit of 168 tablets in a lifetime, Arizona Medicaid only covers one course of treatment for Mavyret and two courses of treatment for sofosbuvir/velpatasvir. ⁹
Access in Managed Care	-8	Care1st Health Plan, ¹⁰ Banner-University Family Care, ¹¹ and Health Choice Arizona ¹² have updated their formularies to indicate that prior authorization is no longer required for preferred drugs as of Oct. 1, 2022, but all three ¹³ still either list or link ¹⁴ to older criteria ¹⁵ that still appear to impose prior authorization requirements, including prescriber restrictions and additional restrictions. Arizona Complete Health, ¹⁶ Mercy Care, ¹⁷ Molina Complete Care, ¹⁸ and UnitedHealthcare ¹⁹ maintain prior authorization requirements for all regimens, including prescriber restrictions and additional restrictions. ²⁰ Additionally, Arizona Complete Health requires a 3-month sobriety period for anyone who “had a Substance Use Disorder in the past 12 months,” ²¹ while Mercy Care prohibits treatment if an individual has been engaged in “substance abuse activity” within the past three months and is not enrolled in a substance use treatment program. ²²
Additional Restrictions	-2	Arizona Medicaid imposes additional restrictions as follows: ²³ <ul style="list-style-type: none"> Prohibits refills for “lost or stolen medications absent good cause.”
Total Deductions	-18	Total Score [100-Deductions] 82
		Grade B

Contact Your State Officials

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Key Sources

Preferred Drug List: [AHCCCS Acute – Long Term Care Drug List \(Jan. 1, 2023\)](#).

Clinical Criteria: [AHCCCS, Hepatitis C Virus \(HCV\) Prior Authorization Requirements for Direct Acting Antiviral \(DAA\) Medication Treatment \(Oct. 1, 2021\)](#)²⁶

¹ Centers for Medicare & Medicaid Services, Medicaid & CHIP in Arizona: <https://perma.cc/PFB6-WND3>.

² HepVu, Local Data: Arizona (Jan. 2022): <https://perma.cc/NY9R-B2LC>.

³ Arizona Health Care Cost Containment System, Available Health Plans: <https://perma.cc/C2C8-MUA4>.

⁴ Preferred Drug List.

⁵ Preferred Drug List. See also AHCCCS, Medical Policy Manual Memo (Oct. 19, 2022), <https://perma.cc/2HA7-7JU7>.

⁶ Preferred Drug List.

⁷ Preferred Drug List.

⁸ Preferred Drug List.

⁹ Clinical Criteria.

¹⁰ Care1st, Pharmacy: Preferred Drug Lists, <https://perma.cc/67ZN-KFXB>.

¹¹ Banner University Health Plan, AHCCCS Long Term Care Drug List (Oct. 1, 2022), <https://perma.cc/4ZD9-TCF8>.

¹² Health Choice Arizona, Provider Prescription Drugs, <https://perma.cc/829W-PF8V>.

¹³ Care1st Health Plan Arizona Medicaid Comprehensive Preferred Drug List (Oct. 1, 2022), <https://perma.cc/2LVJ-SSZE>.

¹⁴ Banner University Health Plans, Pharmacy: Medicaid (Oct. 1, 2022), <https://www.banneruhp.com/materials-and-services/pharmacy>.

¹⁵ Health Choice Arizona, Provider Prescription Drugs, <https://perma.cc/829W-PF8V>.

¹⁶ Arizona Complete Health, Complete Care Plan: Comprehensive Preferred Drug List (Sept. 1, 2022), <https://perma.cc/F68V-MYPT>.

¹⁷ Mercy Care, Preferred Drug List (Oct. 1, 2022), <https://perma.cc/T4TA-XSY3>.

¹⁸ Molina Complete Care, Frequently Used Forms (linking to AHCCCS Drug List dated January 1, 2021), <https://perma.cc/AW8K-5QAP>.

¹⁹ UnitedHealthcare, Clinical Pharmacy Clinical Guidelines & Policies – UnitedHealthcare Community Plan of Arizona, <https://perma.cc/TBY8-X2PU>.

²⁰ UnitedHealthcare Community Plan of Arizona – Clinical Pharmacy Guidelines (Sept. 1, 2022), <https://perma.cc/7TH8-LFWK>.

²¹ Arizona Complete Health, Clinical Policy: Mavyret & Sofosbuvir/Velpatasvir (Aug. 2021), <https://perma.cc/ZZ5R-TBFF>.

²² Mercy Care, Medicaid Hepatitis C Medications (Apr. 2020), <https://perma.cc/2SAR-8HUK>.

²³ Clinical Criteria.

²⁴ National Association of Medicaid Directors, Medicaid Directors: <https://perma.cc/RK6K-TFKK>.

²⁵ Arizona Health Care Cost Containment System, Pharmacy Information: <https://perma.cc/JMA7-TSPL>.

²⁶ As of this writing, AHCCCS has not yet published an up-to-date clinical criteria document reflecting the removal of prior authorization. AHCCCS confirmed that the policy update is in progress. This report card will be reevaluated once the updated criteria is available.