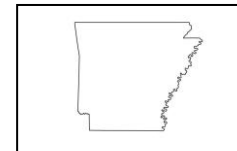


# Hepatitis C: State of Medicaid Access Report Card

## Arkansas



Grade	Recommendations to Improve Patient Access
<b>D</b>	<ul style="list-style-type: none"> <li>Remove prior authorization for HCV treatment.</li> <li>Remove substance use restriction.</li> <li>Remove requirement that only hepatologists, gastroenterologists, infectious disease specialists, or physicians working directly under those providers may prescribe.</li> <li>Remove retreatment restriction.</li> <li>Remove additional restrictions as described in report card.</li> </ul>

### State Overview

As of August 2023, 834,989 individuals were enrolled in Medicaid and CHIP.<sup>1</sup> It is estimated that as of 2016, 21,800 people were living with HCV in Arkansas.<sup>2</sup> Arkansas does not contract with any managed care organization (MCOs) for most of its Medicaid population. A small number of enrollees may participate in the PASSE program, which involves state contracted MCOs for specific high-needs populations.<sup>3</sup> Arkansas Medicaid also funds ARHOME, a program that provides private coverage to eligible beneficiaries by paying the premium for qualified health plans.<sup>4</sup> In January 2023, Arkansas Medicaid posted a request for information for a Medicaid Managed Care Solution.<sup>5</sup>

The Arkansas Medicaid Preferred Drug List designates Mavyret, sofosbuvir/velpatasvir, and Zepatier as preferred medications.<sup>6</sup>

Deductions		Policy
Prior Authorization	-8	Prior authorization is required for all HCV treatment regimens. <sup>7</sup>
Fibrosis Restrictions		Effective November 2023, Arkansas Medicaid does not impose fibrosis restrictions. <sup>8</sup>
Substance Use Restrictions	-12	Arkansas Medicaid imposes substance use restrictions. Arkansas Medicaid requires a six-month sobriety period prior to treatment or enrollment in a drug rehabilitation program. <sup>9</sup>
Prescriber Restrictions	-8	Arkansas Medicaid imposes prescriber restrictions. "All PA requests must be from a hepatologist, gastroenterologist, infectious disease specialist, or a prescriber working under the direct supervision of one of these specialty physicians." <sup>10</sup>
Retreatment Restrictions	-8	Arkansas Medicaid imposes retreatment restrictions. Retreatment may be conditioned on an individual's previous adherence to treatment. <sup>11</sup>
Access in Managed Care		The PASSE program imposes the same requirements as FFS. <sup>12</sup>
Additional Restrictions	-4	Arkansas Medicaid imposes additional restrictions as follows <sup>13</sup> : <ul style="list-style-type: none"> <li>Documentation of genotype.</li> <li>Documentation of adherence assessment for continuation of treatment. "Adherence with prescribed therapy is a condition for payment of continuation therapy for up to the allowed timeframe for each HCV genotype. The recipient's Medicaid drug history will be reviewed prior to approval."</li> </ul>
<b>Total Deductions</b>	<b>-40</b>	<b>Total Score [100-Deductions]</b> <b>60</b>
		<b>Grade</b> <b>D</b>

## Contact Your State Officials

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### Medicaid Office<sup>14</sup>: Janet Mann, Director, State Medicaid, Department of Human Services

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### Drug Review Committee<sup>15</sup>: Cindi Pearson, Pharmacy Administrator

Donaghey Plaza South, P.O. Box 1437, Slot S-415, Little Rock, AR 72203-1437; Telephone: 501-683-4120; Email Address: [cinnamon.pearson@dhs.arkansas.gov](mailto:cinnamon.pearson@dhs.arkansas.gov)

## Key Sources

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**Preferred Drug List:** [Magellan Rx Management, Arkansas Medicaid Preferred Drug List \(Jan. 1, 2024\).](#)

**Clinical Criteria:** [Arkansas Medicaid Prescription Drug Program, Prior Authorization Criteria \(Jan. 1, 2024\).](#)

**Prior Authorization Form:** [Arkansas Medicaid Prescription Drug Program, Hepatitis C Virus \(HCV\) Medication Therapy Request Sheet \(Nov. 16, 2023\).](#)

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<sup>1</sup> Centers for Medicare & Medicaid Services, Medicaid & CHIP in Arkansas, <https://perma.cc/9PPM-V9XM>.

<sup>2</sup> HepVu, Local Data: Arkansas State Profile, <https://perma.cc/RMY6-786X>.

<sup>3</sup> Arkansas Department of Human Services, PASSE: Provider-led Arkansas Shared Savings Entity, <https://humanservices.arkansas.gov/divisions-shared-services/medical-services/healthcare-programs/passe/>.

<sup>4</sup> Arkansas Department of Human Services, ARHOME, <https://humanservices.arkansas.gov/divisions-shared-services/medical-services/helpful-information-for-clients/>.

<sup>5</sup> Arkansas Department of Human Services, Announcements: Medicaid Managed Care Solution, <https://humanservices.arkansas.gov/announcements/medicaid-managed-care-solution/>.

<sup>6</sup> Preferred Drug List.

<sup>7</sup> Prior Authorization Form.

<sup>8</sup> Prior Authorization Form.

<sup>9</sup> Prior Authorization Form.

<sup>10</sup> Prior Authorization Form.

<sup>11</sup> Prior Authorization Form.

<sup>12</sup> Arkansas Department of Human Services, Beneficiary Support, <https://perma.cc/P42Z-BFDN>.

<sup>13</sup> Prior Authorization Form.

<sup>14</sup> State of Arkansas, Meet the Secretary, <https://perma.cc/SC8R-HXQX>.

<sup>15</sup> State of Arkansas, Arkansas Medicaid DRC, [https://arkansas.magellanrx.com/provider/docs/other/ARRx\\_DUR\\_DRC\\_bylaws.pdf](https://arkansas.magellanrx.com/provider/docs/other/ARRx_DUR_DRC_bylaws.pdf).