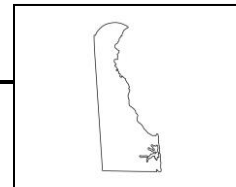


# Hepatitis C: State of Medicaid Access Report Card

## Delaware

Estimated Number of Individuals Living with Hepatitis C: 6,300<sup>1</sup>



Grade	Summary
<p><b>A-</b></p>	<p><b>Liver Damage (Fibrosis) Restrictions:</b> Fee-For Service (FFS), AmeriHealth Caritas Delaware (AmeriHealth), and Highmark Health Options (Highmark) do not impose liver damage requirements.</p> <p><b>Sobriety Restrictions:</b> FFS, AmeriHealth, and Highmark require screening and counseling for substance use.</p> <p><b>Prescriber Restrictions:</b> FFS, AmeriHealth, and Highmark do not appear to impose prescriber restrictions.</p> <p><b>Recommendations to Improve Patient Access:</b></p> <ul style="list-style-type: none"> <li>Remove prior authorizations for preferred agents.</li> <li>Remove alcohol and substance use language on patient consent form.</li> <li>Maintain parity across FFS and MCOs and transparency regarding hepatitis C coverage criteria.</li> </ul> <p><i>Grade Rationale: Delaware has significantly improved access to hepatitis C treatment access, including by ensuring parity across FFS and MCOs. Because FFS and AmeriHealth include language in the patient consent form that treatment will be terminated if alcohol and substances are not avoided, a “minus” has been added to the state’s “A” grade.</i></p>

### Background

As of May 2021, Delaware had 267,045 individuals enrolled in its Medicaid and Children’s Health Insurance Program (CHIP).<sup>2</sup> Delaware operates a Fee-For-Service (FFS) program known as Diamond Health Partners (DHP) and also contracts with two Managed Care Organizations (MCOs): AmeriHealth Caritas Delaware and Highmark Health Options (Blue Cross and Blue Shield of Delaware).<sup>3</sup> 97 percent of Medicaid beneficiaries are in the MCO program named the Diamond State Health Plan (DSHP). The remaining six percent participate in the FFS program.<sup>4</sup>

### State of Medicaid Hepatitis C Treatment Access

Delaware has recently expanded hepatitis C treatment access. Facing litigation from the Center for Health Law and Policy Innovation of Harvard Law School, Delaware Community Legal Aid Society, Inc. and Tycko & Zavareei LLP., the FFS program is implementing a phased-in removal of liver damage restrictions.<sup>5</sup> Prior to December 31, 2016, FFS required severe liver damage (F3 or greater) for patients to qualify for treatment. As of January 1, 2017, patients with at least moderate liver damage (F2 or greater) can qualify.<sup>6</sup> Beginning January 1, 2018, any patient can receive prior authorization (PA) if they meet the other coverage requirements.<sup>7</sup> However, a beneficiary can qualify for immediate treatment if a medical necessity is documented by: showing extrahepatic symptoms that affect activities of daily living (ADL) or diagnosis of at least one of the following co-morbidities: HIV, hepatitis B, Lymphoma, awaiting for post solid organ transplant, documentation of labs or biopsy showing fast progressing fibrosis or other medical necessity defined in Appendix H of the Division of Medicaid and Medical Assistance Provider Policy Manual.<sup>8</sup>

In addition to documenting liver damage, the PA requires several attachments. A patient must sign and submit the *Informed Consent* form.<sup>9</sup> This form requires a beneficiary to agree to avoid alcohol and illicit substance use during treatment. A failure to abide by all parts of the *Informed Consent Form* can result in a termination of hepatitis C treatment.<sup>10</sup> If a beneficiary is actively using illicit substances or alcohol or has a history of use, a prescriber must document counseling about the risks of substance and alcohol use and offer a referral for substance use disorder treatment.<sup>11</sup> Patients co-infected with HIV must have undetectable viral load or a CD4 count of at least 350.<sup>12</sup> FFS does not appear to impose any prescriber restrictions.<sup>13</sup>

In FFS, treatment duration is limited to 12 weeks<sup>14</sup> and the Preferred Drug List (PDL) includes the following preferred Direct-Acting Antiviral (DAA) regimens: Mavyret and sofosbuvir/velpatasvir and non-preferred: Harvoni, Sovaldi, Vosevi, Zepatier.<sup>15</sup>

AmeriHealth does not impose liver damage requirements. AmeriHealth’s sobriety (screening and counseling) requirements follow FFS standards.<sup>16</sup>

Highmark requires a diagnosis of chronic hepatitis C and an HCV RNA level within the past 3 months. Highmark does not impose liver damage requirements. Highmark’s sobriety (screening and counseling) requirements follow FFS standards.<sup>17</sup>

## Liver Damage (Fibrosis) Restrictions

FFS, AmeriHealth, and Highmark do not impose liver damage requirements.<sup>18,19,20</sup> AmeriHealth and Highmark require documentation of fibrosis level.<sup>21,22</sup>

## Sobriety Restrictions

FFS, AmeriHealth, and Highmark require that if a beneficiary is actively using illicit substances or alcohol or has a history of use, the prescriber must document counseling about the risks of substance and alcohol use and offer a referral for substance use disorder treatment.<sup>23,24,25</sup> FFS and AmeriHealth require submission of a signed patient *Informed Consent* form that states that a beneficiary agrees to avoid alcohol and illicit substances during treatment. Failure to abide by all parts of the *Consent Form* can result in termination of hepatitis C treatment.<sup>26,27</sup>

## Prescriber Restrictions

FFS, AmeriHealth, and Highmark do not appear to impose any prescriber restrictions.<sup>28,29,30</sup>

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

### Medicaid<sup>31</sup>: Stephen Groff, Director, Division of Medicaid & Medical Assistance

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### Pharmacy and Therapeutics (P&T) Committee<sup>32</sup>: Delaware Medicaid and Medical Assistance Program

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<sup>1</sup> HepVu, Delaware State Profile: <https://hepvu.org/local-data/delaware/>

<sup>2</sup> Medicaid.gov; Medicaid & CHIP in Delaware: <https://www.medicaid.gov/medicaid/by-state/stateprofile.html?state=delaware>

<sup>3</sup> State of Delaware, Health and Social Services (DHSS), Division of Medicaid and Medical Assistance, DHSS Authorizes Four Medicaid Accountable Care Organizations, [https://www.dhss.delaware.gov/dhss/pressreleases/2020/medcareorg\\_092220.html](https://www.dhss.delaware.gov/dhss/pressreleases/2020/medcareorg_092220.html)

<sup>4</sup> Kaiser Family Foundation (KFF), State Health Facts, Share of Medicaid Population Covered under Different Delivery Systems (collected as part of the Medicaid Managed Care Market Tracker) Accessed November 2021, <http://kff.org/medicaid/state-indicator/share-of-medicaid-population-covered-under-different-delivery-systems/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22:%22sort%22:%22asc%22%7D>

<sup>5</sup> Press Release: In Face of Class Action Lawsuit, Delaware Medicaid Removes Unlawful Restrictions to the Cure for the Hepatitis C Virus, Ctr. for Health Law & Policy Innovation of Harvard Law School (June 8, 2016):

<http://www.chlpi.org/in-face-of-class-action-lawsuit-delaware-medicaid-removes-unlawful-restrictions-to-the-cure-for-the-hepatitis-c-virus/>

<sup>6</sup> Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021),

[https://medicaidpublications.dhss.delaware.gov/dotnetnuke/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core\\_Download&EntryId=536&language=en-US&PortalId=0&TabId=94](https://medicaidpublications.dhss.delaware.gov/dotnetnuke/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core_Download&EntryId=536&language=en-US&PortalId=0&TabId=94)

<sup>7</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>8</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>9</sup> Delaware DMMA Informed Consent Form for Hepatitis C Therapy:

[https://medicaidpublications.dhss.delaware.gov/dotnetnuke/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core\\_Download&EntryId=536&language=en-US&PortalId=0&TabId=94ay](https://medicaidpublications.dhss.delaware.gov/dotnetnuke/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core_Download&EntryId=536&language=en-US&PortalId=0&TabId=94ay)

<sup>10</sup> Ibid. Delaware DMMA Informed Consent Form for Hepatitis C Therapy

<sup>11</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>12</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>13</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>14</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>15</sup> Delaware Medical Assistance Program (DMAP), Preferred Drug List (PDL) (Updated 3/23/2021):

[https://medicaidpublications.dhss.delaware.gov/dotnetnuke/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core\\_Download&EntryId=420&language=en-US&PortalId=0&TabId=94](https://medicaidpublications.dhss.delaware.gov/dotnetnuke/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core_Download&EntryId=420&language=en-US&PortalId=0&TabId=94)

<sup>16</sup> AmeriHealth Caritas Delaware, Physician Request Form for Hepatitis C Therapies (Updated August 2021) <https://www.amerihelthcaritasde.com/assets/pdf/provider/resources/forms/pa-hepatitis-c-therapies.pdf>

<sup>17</sup> Highmark Health Options, Pharmacy Only Prior Authorization Forms: Hepatitis C Agents (Updated April 2020) <https://www.highmarkhealthoptions.com/providers/medication-information.html>

<sup>18</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>19</sup> Ibid. AmeriHealth Caritas Delaware, Physician Request Form for Hepatitis C Therapies (Updated August 2021)

<sup>20</sup> Ibid. Highmark Health Options, Pharmacy Only Prior Authorization Forms: Hepatitis C Agents (Updated April 2020)

<sup>21</sup> Ibid. AmeriHealth Caritas Delaware, Physician Request Form for Hepatitis C Therapies (Updated August 2021)

<sup>22</sup> Ibid. Highmark Health Options, Prior Authorization Conditions for Approval of Hepatitis C Agents (Updated April 2020)

<sup>23</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>24</sup> Ibid. AmeriHealth Caritas Delaware, Physician Request Form for Hepatitis C Therapies (Updated August 2021)

<sup>25</sup> Ibid. Highmark Health Options, Prior Authorization Conditions for Approval of Hepatitis C Agents (Updated April 2020)

<sup>26</sup> Ibid. Delaware DMMA Informed Consent Form for Hepatitis C Therapy

<sup>27</sup> Ibid. AmeriHealth Caritas Delaware, Physician Request Form for Hepatitis C Therapies (Updated August 2021)

<sup>28</sup> Ibid. Delaware Medicaid and Medical Assistance, Request for Prior Authorization Hepatitis C Agents (Updated August 2021)

<sup>29</sup> Ibid. AmeriHealth Caritas Delaware, Physician Request Form for Hepatitis C Therapies (Updated August 2021)

<sup>30</sup> Ibid. Highmark Health Options, Pharmacy Only Prior Authorization Forms: Hepatitis C Agents (Updated April 2020)

<sup>31</sup> Contact Information, DE Health & Social Services: <http://dhss.delaware.gov/dhss/main/contacts.htm>

<sup>32</sup> Contact Information, DE Medicaid Pharmacy Team, <https://medicaid.dhss.delaware.gov/provider/Home/PharmacyCornerLanding/tabid/2096/Default.aspx>