

# Hepatitis C: State of Medicaid Access Report Card

## Hawaii

Estimated Number of Individuals Living with Hepatitis C: 6,700<sup>1</sup>



Grade	Summary
<p style="font-size: 2em; font-weight: bold; text-align: center;">B</p>	<p><b>Liver Damage (Fibrosis) Restrictions:</b> Hawaii Medicaid FFS does not impose liver damage restrictions. Most managed care organizations (MCOs), including Hawaii Medical Service Association, Ohana Health Plan, AlohaCare, and UnitedHealthcare Community Plan, do not impose liver damage restrictions. Kaiser Permanente does not have publicly available hepatitis C coverage criteria.</p> <p><b>Sobriety Restrictions:</b> Hawaii Medicaid FFS, Hawaii Medical Service Association, Ohana Health Plan, and UnitedHealthcare Community Plan require that providers evaluate alcohol use and urine toxicology results prior to treatment for adherence considerations. AlohaCare does not appear to impose any sobriety restrictions. Kaiser Permanente does not have publicly available hepatitis C coverage criteria.</p> <p><b>Prescriber Restrictions:</b> Hawaii Medicaid FFS requires that a prescription be written by or in consultation with a specialist. Hawaii Medical Service Association and AlohaCare also require a specialist to prescribe or consult. Ohana Health Plan and UnitedHealthcare Community Plan require a specialist or a primary care physician with expertise in hepatitis C to prescribe. Kaiser Permanente does not have publicly available hepatitis C coverage criteria.</p> <p><b>Recommendations to Improve Patient Access:</b></p> <ul style="list-style-type: none"> <li>• Remove sobriety and prescriber requirements.</li> <li>• Ensure parity between FFS and MCO plans and transparency of coverage criteria among MCO plans.</li> </ul> <p><i>Grade Rationale: While FFS and MCOs have removed liver damage requirements, they require patients to be screened for substance use and require a specialist consult. One MCO is lacking in publicly available coverage information.</i></p>

### Background

As of May 2021, Hawaii had 406,876 individuals enrolled in the Medicaid and Children’s Health Insurance Program (CHIP).<sup>2</sup> Hawaii operates a Fee-For-Service (FFS) program and contracts with managed care organizations (MCOs) through what is known as the QUEST program.<sup>3</sup> Most beneficiaries, 99.9 percent, are enrolled in QUEST which contracts with five health plans: AlohaCare, Hawaii Medical Service Association, Kaiser Permanente, Ohana Health Plan (managed by WellCare/Centene), and UnitedHealthcare Community Plan.<sup>4</sup>

### State of Medicaid Hepatitis C Treatment Access

Hawaii Medicaid has made efforts to increase access to hepatitis C medications due in large part to effective patient advocacy. Previously, the state allowed each MCO plan to determine its hepatitis C coverage criteria.<sup>5</sup> It also required severe liver damage (F3 or greater) to access treatment.<sup>6</sup> However, in 2018 a policy directive from Hawaii Med-QUEST Division overseeing both the FFS and MCO programs stated patients can receive treatment regardless of liver damage levels.<sup>7</sup> Additionally, the memorandum sets sobriety and prescriber requirements. The policy requires that providers evaluate alcohol use and urine toxicology results prior to treatment for adherence considerations. Additionally, a prescription must be written by or in consultation with a specialist.<sup>8</sup> To date, Hawaii FFS has not published updated coverage criteria since 2018. Additionally, they do not publish a prior authorization form. Requirements differ across MCO plans and transparency is lacking in one plan.

Hawaii Medical Service Association requires submission of HCV RNA and genotype as part of the prior authorization. They also require "documentation that the member has been assessed for potential non-adherence to treatment regimen."<sup>9</sup> The preferred products include Eplclusa, Harvoni, Mavyret and Vosevi.<sup>10</sup>

Ohana Health Plan does not make clinical criteria for hepatitis C treatment publicly available. The publicly available prior authorization form was last updated December 2015 appears to require a diagnosis of chronic hepatitis C.<sup>11</sup> Preferred products include Mavyret and sofosbuvir/velpatasvir.<sup>12</sup>

UnitedHealthcare Community Plan requires a diagnosis of chronic hepatitis C which includes genotype and HCV RNA within the previous 3 months. The prior authorization form also inquires whether the patient has been previously treated, the outcome of treatment, and the reason for discontinuing.<sup>13</sup> Preferred products include Mavyret, sofosbuvir/velpatasvir, and Zepatier.<sup>14</sup>

AlohaCare requires a diagnosis of chronic hepatitis C which includes genotype and HCV RNA.<sup>15</sup> Preferred products include Mavyret and sofosbuvir/velpatasvir.<sup>16</sup>

Kaiser Permanente do not have publicly available hepatitis C coverage criteria.

## **Liver Damage (Fibrosis) Restrictions**

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Hawaii Medicaid FFS does not impose liver damage restrictions.<sup>17</sup>

Hawaii Medical Service Association and UnitedHealthcare Community Plan do not impose liver damage restrictions.<sup>18,19</sup>

Ohana Health Plan does not appear to impose liver damage restrictions, though the PA form requests the fibrosis score.<sup>20</sup>

AlohaCare does not impose liver damage requirements, but they do require documentation of fibrosis score.<sup>21</sup>

Kaiser Permanente does not have publicly available hepatitis C coverage criteria.

## **Sobriety Restrictions**

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Hawaii Medicaid FFS requires that providers evaluate alcohol use and urine toxicology results prior to treatment for adherence considerations.<sup>22</sup>

Hawaii Medical Service Association requires that patients abstain from alcohol and substance use during treatment and requires patients to sign a commitment form agreeing to random alcohol/substance use testing, including agreeing “to attend Alcoholics Anonymous (AA), Narcotics Anonymous (NA) or a similar program for substance abuse, if recommended by my physician.” HMSA will not approve retreatment requests due to inadequate compliance, reinfection, or discontinuation of treatment due to alcohol/substance use.<sup>23</sup>

UnitedHealthcare Community plan requires prescribers to “[address] mental health conditions and substance use prior to starting treatment.” They also require prescribers to “attest that the patient is compliant with treatment, with evaluation of compliance that considers alcohol use and urine toxicology results, among other factors.”<sup>24</sup>

The Ohana Health Plan states that “Patients with active substance or alcohol use disorders should be considered for therapy on a case-by-case basis, and care should be coordinated with substance use treatment specialists.” The PA form also requests urine toxicology within the past 30 days.<sup>25</sup>

AlohaCare does not impose sobriety restrictions.<sup>26</sup>

Kaiser Permanente does not have publicly available hepatitis C coverage criteria.

## **Prescriber Restrictions**

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Hawaii Medicaid FFS requires that a prescription be written by or in consultation with a specialist.<sup>27</sup>

Hawaii Medical Service Association requires a specialist to prescribe or consult.<sup>28</sup>

UnitedHealthcare Community Plan appears to require a specialist or a primary care physician with expertise in treating hepatitis C and approved by the health plan to prescribe.<sup>29</sup>

Ohana Health Plan appears to require a specialist to prescribe or consult, as the PA form requests the prescriber specialty.<sup>30</sup>

AlohaCare requires prescriptions to be written by or in consultation with a specialist. Primary care physicians with expertise in the treatment of hepatitis C may also prescribe.<sup>31</sup>

Kaiser Permanente does not have publicly available hepatitis C coverage criteria.

## **Points of Contact for Questions & Concerns about Hawaii’s State of Medicaid Hepatitis C Access**

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- <sup>1</sup> HepVu, Hawaii State Profile: <https://hepvu.org/state/hawaii/>.
- <sup>2</sup> Medicaid and CHIP in Hawaii, By-State, Medicaid.gov: <https://www.medicaid.gov/medicaid/by-state/stateprofile.html?state=hawaii>.
- <sup>3</sup> Hawaii Medicaid Fee-For-Service Program: <https://www.benefits.gov/benefits/benefit-details/1254>; See also Med-QUEST Division (MQD): Health Insurance and Long-Term Care for Low-Income Adults and Families: <http://humanservices.hawaii.gov/mqd/>.
- <sup>4</sup> Choose a Health Plan, Hawaii Department of Human Services Med-QUEST Division (Accessed December 2021): <https://medQUEST.hawaii.gov/en/members-applicants/get-started/health-plans.html>; See also Med-QUEST Division (MQD): Health Insurance and Long-Term Care for Low-Income Adults and Families: <http://humanservices.hawaii.gov/mqd/>.
- <sup>5</sup> Virgil Dickson, *Reform Update: Medicaid Programs Crafting Limits on Harvoni Usage*, Modern Healthcare, October 21, 2014 (Accessed July 2017): <http://www.modernhealthcare.com/article/20141021/NEWS/310219962>.
- <sup>6</sup> Memo No. QI-1829: Direct Acting Antiviral (DAAs) Medications for Treatment of Chronic Hepatitis C Infection, State of Hawaii Department of Human Services (December 31, 2018): <https://medquest.hawaii.gov/content/dam/formsanddocuments/provider-memos/qi-memos/qi-memos-2018/QI-1829-Direct-Acting-Antiviral-Medications-for-Treatment-of-Chronic-Hepatitis-C-Infection.PDF>.
- <sup>7</sup> Ibid. Memo No. QI-1829: Direct Acting Antiviral (DAAs) Medications for Treatment of Chronic Hepatitis C Infection, State of Hawaii Department of Human Services (December 31, 2018).
- <sup>8</sup> Ibid. Memo No. QI-1829: Direct Acting Antiviral (DAAs) Medications for Treatment of Chronic Hepatitis C Infection, State of Hawaii Department of Human Services (December 31, 2018).
- <sup>9</sup> Direct Acting Antiviral Medications for Treatment of Hepatitis C Policy, HMSA QUEST Integration (Updated November 1, 2021): [https://cdn1-originals.webdamdb.com/14017\\_118418705?cache=1613505026&response-content-disposition=inline;filename=MM.04.036\\_Hepatitis\\_C\\_%2528Direct\\_Acting\\_Antiviral\\_Medications\\_for\\_Treatment\\_of\\_Hepatitis\\_C%2529\\_QI\\_2021-0201-2.pdf&response-content-type=application/pdf&Policy=eyJTdGFGOWZlbnQ0Ijlt7Ijllc291cmNlIjoiaHR0cCo6Ly9jZG4xLW9yaWdpbmFscy53ZWJkYy1kYi5jb20vMTQwMTdmTE4NDE4NzA1P2NhY2hPTE2MTM1MDUwMjYmcmVzcG9uc2UyY29udGVudC1kaXNwb3NpdGlvb1p1bmxpbmU7ZmlsZW5hbWU9TU0uMDQuMDM2X0hlcGF0aXRpc19DXYUyNTI4RGlyZWNOX0FjdGluZ19BbnRpdmlYVWxfTWVkaWNhdGlbnNfZm9yX1RyZWV0bWVudF9vZl9lZXBhdG10aXNfYyUyNTI5X1FjXzlwMjEtdiM0yLmBkZiZyZXNwb25zZS1jb250ZW50LXR5cGUyYXBwbGllYXRpb24vcGRmlwiQ29uZGI0aW9u9Ulpj7IkRhdGVmZXNzVGHbbil6eyjBV1M6RXBvY2hUaW1lIjoyMTQ3NDEONDAwX19XX0\\_&Signature=Dms04MwofDYOYx-K2aFervANbhS7ezBbl5LCmjeYCrZwUjv0LSRkhkcl2KMFV2svEv5QPoSzgmeg8owLeaTAVnYi0Vcl0ueooCF9GcbBR6bQpP66Cts68CRWesqlCaSndeqGpc76RM9xaPEJk6LvskomRjwtr677sQr2tjBq-VvD2XEeTwFNj9gbOY2LHixsj4NPRKkCUHYTeWioR7sbAdnzHISR2jYu8VYOMbOn-WDr2tLcsQYGb6EczkSFcBgbRyVRNyk9v1EUaJGox9Xgm1OveQ-gp4AbUxKf4W3XR1pW-8uAuW08Ao7VImC5VLHqAVkVhYhBijzflg\\_&Key-Pair-Id=APKAI2ASI2IOLRFF2RHA](https://cdn1-originals.webdamdb.com/14017_118418705?cache=1613505026&response-content-disposition=inline;filename=MM.04.036_Hepatitis_C_%2528Direct_Acting_Antiviral_Medications_for_Treatment_of_Hepatitis_C%2529_QI_2021-0201-2.pdf&response-content-type=application/pdf&Policy=eyJTdGFGOWZlbnQ0Ijlt7Ijllc291cmNlIjoiaHR0cCo6Ly9jZG4xLW9yaWdpbmFscy53ZWJkYy1kYi5jb20vMTQwMTdmTE4NDE4NzA1P2NhY2hPTE2MTM1MDUwMjYmcmVzcG9uc2UyY29udGVudC1kaXNwb3NpdGlvb1p1bmxpbmU7ZmlsZW5hbWU9TU0uMDQuMDM2X0hlcGF0aXRpc19DXYUyNTI4RGlyZWNOX0FjdGluZ19BbnRpdmlYVWxfTWVkaWNhdGlbnNfZm9yX1RyZWV0bWVudF9vZl9lZXBhdG10aXNfYyUyNTI5X1FjXzlwMjEtdiM0yLmBkZiZyZXNwb25zZS1jb250ZW50LXR5cGUyYXBwbGllYXRpb24vcGRmlwiQ29uZGI0aW9u9Ulpj7IkRhdGVmZXNzVGHbbil6eyjBV1M6RXBvY2hUaW1lIjoyMTQ3NDEONDAwX19XX0_&Signature=Dms04MwofDYOYx-K2aFervANbhS7ezBbl5LCmjeYCrZwUjv0LSRkhkcl2KMFV2svEv5QPoSzgmeg8owLeaTAVnYi0Vcl0ueooCF9GcbBR6bQpP66Cts68CRWesqlCaSndeqGpc76RM9xaPEJk6LvskomRjwtr677sQr2tjBq-VvD2XEeTwFNj9gbOY2LHixsj4NPRKkCUHYTeWioR7sbAdnzHISR2jYu8VYOMbOn-WDr2tLcsQYGb6EczkSFcBgbRyVRNyk9v1EUaJGox9Xgm1OveQ-gp4AbUxKf4W3XR1pW-8uAuW08Ao7VImC5VLHqAVkVhYhBijzflg_&Key-Pair-Id=APKAI2ASI2IOLRFF2RHA).
- <sup>10</sup> HMSA QUEST Integration Drug Formulary, HMSA (Updated December 1, 2021): <https://prc.hmsa.com/s/article/HMSA-s-QUEST-Integration-Drug-Formulary>.
- <sup>11</sup> Prior Authorization Request Form for Hepatitis C Treatment, Ohana Health Plan (Updated December 2015): [https://www.ohanahealthplan.com/content/dam/centene/wellcare/hi/pdfs/hi\\_caid\\_hepatitis\\_c\\_provider\\_eng\\_12\\_2015.pdf](https://www.ohanahealthplan.com/content/dam/centene/wellcare/hi/pdfs/hi_caid_hepatitis_c_provider_eng_12_2015.pdf).
- <sup>12</sup> Ohana QUEST Integration Preferred Drug List, Ohana Health Plan (Updated March 2021): [https://fm.formularynavigator.com/FBO/67/MCD\\_OHANA\\_QUEST\\_Integration\\_PDL\\_URL.pdf](https://fm.formularynavigator.com/FBO/67/MCD_OHANA_QUEST_Integration_PDL_URL.pdf).
- <sup>13</sup> Hepatitis C Medications-Hawaii Prior Authorization Request Form, UnitedHealthcare Community Plan: <https://www.uhcprovider.com/content/dam/provider/docs/public/prior-auth/uhccp-pharmacy-forms/h-1/Hi-Hepatitis-C-Medications-Prior-Authorization-Form.pdf>.
- <sup>14</sup> Preferred Drug List, United HealthCare Community Plan Hawaii (Updated October 1, 2021): <https://www.uhcommunityplan.com/content/dam/uhccp/plandocuments/findadrag/Hi-PDL/Hi-QUEST-PDL.pdf>.
- <sup>15</sup> Eplclusa Clinical Criteria, AlohaCare QUEST Integration (Updated November 15, 2021); See also Mavyret Clinical Criteria, AlohaCare QUEST Integration (Updated July 1, 2021): [https://client.formularynavigator.com/Search.aspx?siteCode=9021841673&targetScreen=3&drugBrandListBaseTC=\\*antivirals%2B-%2Bdrugs%2Bfor%2BInfections%252c\\*hepatitis%2Bc%2Bagent%2B-%2Bcombinations\\*\\*%2B-%2Bdrugs%2Bfor%2Bviral%2BInfections](https://client.formularynavigator.com/Search.aspx?siteCode=9021841673&targetScreen=3&drugBrandListBaseTC=*antivirals%2B-%2Bdrugs%2Bfor%2BInfections%252c*hepatitis%2Bc%2Bagent%2B-%2Bcombinations**%2B-%2Bdrugs%2Bfor%2Bviral%2BInfections).
- <sup>16</sup> Formulary List of Covered Drugs, AlohaCare QUEST Integration (Updated December 1, 2021) [https://fm.formularynavigator.com/FBO/4/AlohaCare\\_Medicaid.pdf](https://fm.formularynavigator.com/FBO/4/AlohaCare_Medicaid.pdf)
- <sup>17</sup> Ibid. Memo No. QI-1829: Direct Acting Antiviral (DAAs) Medications for Treatment of Chronic Hepatitis C Infection, State of Hawaii Department of Human Services (December 31, 2018).
- <sup>18</sup> Ibid. Direct Acting Antiviral Medications for Treatment of Hepatitis C Policy, HMSA QUEST Integration (Updated November 1, 2021).
- <sup>19</sup> Ibid. Hepatitis C Medications-Hawaii Prior Authorization Request Form, UnitedHealthcare Community Plan.
- <sup>20</sup> Ibid. Prior Authorization Request Form for Hepatitis C Treatment, Ohana Health Plan (Updated December 2015).
- <sup>21</sup> Ibid. Eplclusa Clinical Criteria, AlohaCare QUEST Integration (Updated November 15, 2021); See also Mavyret Clinical Criteria, AlohaCare QUEST Integration (Updated July 1, 2021).
- <sup>22</sup> Ibid. Memo No. QI-1829: Direct Acting Antiviral (DAAs) Medications for Treatment of Chronic Hepatitis C Infection, State of Hawaii Department of Human Services (December 31, 2018).
- <sup>23</sup> Ibid. Direct Acting Antiviral Medications for Treatment of Hepatitis C Policy, HMSA QUEST Integration (Updated November 1, 2021).
- <sup>24</sup> Ibid. Hepatitis C Medications-Hawaii Prior Authorization Request Form, UnitedHealthcare Community Plan.
- <sup>25</sup> Ibid. Prior Authorization Request Form for Hepatitis C Treatment, Ohana Health Plan (Updated December 2015).
- <sup>26</sup> Ibid. Eplclusa Clinical Criteria, AlohaCare QUEST Integration (Updated November 15, 2021); See also Mavyret Clinical Criteria, AlohaCare QUEST Integration (Updated July 1, 2021).
- <sup>27</sup> Ibid. Memo No. QI-1829: Direct Acting Antiviral (DAAs) Medications for Treatment of Chronic Hepatitis C Infection, State of Hawaii Department of Human Services (December 31, 2018).
- <sup>28</sup> Ibid. Direct Acting Antiviral Medications for Treatment of Hepatitis C Policy, HMSA QUEST Integration (Updated November 1, 2021).
- <sup>29</sup> Ibid. Hepatitis C Medications-Hawaii Prior Authorization Request Form, UnitedHealthcare Community Plan.
- <sup>30</sup> Ibid. Prior Authorization Request Form for Hepatitis C Treatment, Ohana Health Plan (Updated December 2015).
- <sup>31</sup> Ibid. Eplclusa Clinical Criteria, AlohaCare QUEST Integration (Updated November 15, 2021); See also Mavyret Clinical Criteria, AlohaCare QUEST Integration (Updated July 1, 2021).
- <sup>32</sup> Medicaid Directors, National Association of Medicaid Directors: <http://medicaiddirectors.org/about/medicaid-directors/>.
- <sup>33</sup> Pharmacy, Med-QUEST Division, State of Hawaii Department of Human Services (Accessed December 2021): <https://medQUEST.hawaii.gov/en/plans-providers/pharmacy.html>.