

# Hepatitis C: State of Medicaid Access Report Card

## Illinois



Grade	Recommendations to Improve Patient Access
<b>A</b>	<ul style="list-style-type: none"> <li>Remove prescriber continuing medical education requirement.</li> <li>Continue to ensure transparency and parity across FFS and MCOs regarding HCV coverage criteria.</li> </ul>

### State Overview

As of October 2023, 3,725,047 individuals were enrolled in Medicaid and CHIP.<sup>1</sup> As of 2016, an estimated 54,900 people were living with HCV in Illinois.<sup>2</sup> As of July 2022, 80.4% of Medicaid beneficiaries are enrolled in a managed care organization (MCO), with the other 19.7% enrolled in fee-for-service (FFS).<sup>3</sup> Illinois contracts with five MCOs as part of the HealthChoice Illinois managed care program, for non-dual eligible beneficiaries: Aetna Better Health, Blue Cross Community Health Plans, CountyCare Health Plan, Meridian Health Plan, and Molina.<sup>4</sup>

The Illinois Medicaid Preferred Drug List (PDL) lists Mavyret and sofosbuvir/velpatasvir as preferred drugs.<sup>5</sup>

Deductions		Policy
Prior Authorization		As of July 1, 2023, prior authorization is not required for preferred hepatitis C treatment regimens. <sup>6</sup>
Fibrosis Restrictions		Illinois Medicaid does not impose fibrosis restrictions. <sup>7</sup>
Substance Use Restrictions		Illinois Medicaid does not impose substance use restrictions. <sup>8</sup>
Prescriber Restrictions	-8	Illinois Medicaid requires prescribers “to get at least one hour of continuing medical education (CME) that is focused on diagnosis, appropriate management, and recommended follow-up of patients with Hepatitis C and approved or accredited by an organization such as: the Centers for Disease Control (CDC); the Accreditation Council for Continuing Medical Education (ACCME) or its state designee; a specialty society accredited to provide CME; an accredited medical school; or a university affiliated hospital...Prescribing practitioners must provide proof of training to HFS once the attestation process is established.” <sup>9</sup>
Retreatment Restrictions		Illinois Medicaid does not impose retreatment restrictions. <sup>10</sup>
Access in Managed Care		Consistent with Illinois Medicaid’s requirement that MCOs follow the same HCV policy as FFS, <sup>11</sup> Aetna <sup>12</sup> , Blue Cross <sup>13</sup> , CountyCare <sup>14</sup> , Meridian <sup>15</sup> , and Molina <sup>16</sup> impose the same requirements as FFS.
Additional Restrictions		Illinois Medicaid does not impose additional restrictions. <sup>17</sup>
<b>Total Deductions</b>	<b>-8</b>	<b>Total Score [100-Deductions]</b>
		<b>92</b>
		<b>Grade</b>
		<b>A</b>

### Contact Your State Officials

**Medicaid Office<sup>18</sup>: Kelly Cunningham, Medicaid Administrator, Division of Medical Programs, Illinois Department of Healthcare and Family Services**

201 South Grand Avenue East, 3rd Floor, Springfield, IL 62763; Telephone: (217) 782-2570

**Illinois Drugs and Therapeutics Advisory Board<sup>19</sup>:**

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## Key Sources

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**Preferred Drug List:** [Illinois HFS, Medicaid Preferred Drug List \(Jan. 1, 2024\)](#)

**Provider Notice:** [Illinois HFS, Provider Notice: Hepatitis C Drug Prior Authorization Removal Effective July 1, 2023 \(06/02/2023\)](#)

*Note: Following the removal of prior authorization, Illinois Medicaid no longer publishes clinical criteria or prior authorization forms.*

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<sup>1</sup> Centers for Medicare & Medicaid Services, Medicaid & CHIP in Illinois, <https://perma.cc/7DZ2-X24A>.

<sup>2</sup> HepVu, Local Data: Illinois, <https://perma.cc/Y9LA-JTKT>.

<sup>3</sup> Kaiser Family Foundation, Share of Medicaid Population Covered Under Different Delivery Systems, <https://perma.cc/EMN8-QR8B>.

<sup>4</sup> HealthChoice Illinois, Health Plans and Their Subcontractor Contact Information, <https://perma.cc/AZH2-87QD>.

<sup>5</sup> Preferred Drug List.

<sup>6</sup> See Preferred Drug List; Provider Notice.

<sup>7</sup> Provider Notice.

<sup>8</sup> Provider Notice.

<sup>9</sup> Provider Notice.

<sup>10</sup> Provider Notice.

<sup>11</sup> Provider Notice.

<sup>12</sup> Aetna Better Health, Preferred Drug List, <https://perma.cc/EP5F-TCA8>.

<sup>13</sup> BCBS Illinois, Preferred Drug List, <https://perma.cc/V3YR-KTWS>.

<sup>14</sup> CountyCare, Provider Notice, <https://perma.cc/QS52-MB2T>.

<sup>15</sup> Illinois Meridian, Preferred Drug List, <https://perma.cc/3EXZ-KSJ5>.

<sup>16</sup> Molina, Preferred Drug List, [https://fm.formularynavigator.com/FBO/247/Medicaid\\_PDL\\_Formulary\\_IL\\_2023.pdf](https://fm.formularynavigator.com/FBO/247/Medicaid_PDL_Formulary_IL_2023.pdf).

<sup>17</sup> Provider Notice.

<sup>18</sup> Medicaid Directors, National Association of Medicaid Directors, <https://perma.cc/7KTL-ULKZ>; see also Illinois HFS, Executive Staff, <https://perma.cc/EV9V-DYZ6>.

<sup>19</sup> Illinois HFS, Drugs and Therapeutics Advisory Board Agenda Request, <https://perma.cc/UZ9D-MYZ5>.