Hepatitis C: State of Medicaid Access Report Card

Rhode Island



| Grade | Recommendations to Improve Patient Access | | |
|-----------|---|--|--|
| A+ | Continue to ensure broad access to HCV treatment. | | |

State Overview

As of October 2023, 362,020 individuals were enrolled in Medicaid and CHIP.¹ It is estimated that as of 2016, 10,000 people were living with HCV in Rhode Island.² Approximately 87.5% of Medicaid beneficiaries in Rhode Island are enrolled in an MCO, with the remaining 12.5% enrolled in FFS.³

Rhode Island Medicaid contracts with three managed care organizations (MCOs): Tufts Health RI Together, UnitedHealthcare Community Plan, and Neighborhood Health Plan of Rhode Island.⁴

| The Rhode Island Medicaid Preferred Drug List designates Mavyret and Vosevi as preferred | drugs. ⁵ |
|--|---------------------|
|--|---------------------|

| Deductions | | Policy | | |
|-------------------------------|--|---|-------|--|
| Prior Authorization | | Prior authorization is not required for Mavyret. Prior authorization is not required for Vosevi when used after prior treatment failure. ⁶ | | |
| Fibrosis Restrictions | | Rhode Island Medicaid does not impose fibrosis restrictions. ⁷ | | |
| Substance Use Restrictions | | Rhode Island Medicaid does not impose substance use restrictions. ⁸ | | |
| Prescriber Restrictions | | Rhode Island Medicaid does not impose prescriber restrictions. ⁹ | | |
| Retreatment Restrictions | | Rhode Island Medicaid does not impose retreatment restrictions. ¹⁰ | | |
| Access in Managed Care | | Tufts Health Plan, ¹¹ UnitedHealthcare Community Plan, ¹² and Neighborhood Health Plan of Rhode Island ¹³ impose the same requirements as FFS. | | |
| Additional Restrictions | | Rhode Island Medicaid does not appear to impose additional restrictions. ¹⁴ | | |
| Total Deductions | | Total Score [100-Deductions] | Grade | |
| -0 | | 100 | A+ | |

Contact Your State Officials

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Key Sources

Preferred Drug List: <u>RI HHS, Rhode Island Medicaid Fee for Service Preferred Drug List (Oct. 3, 2023)</u> **Prior Authorization Guidelines**: <u>RI HHS, Treatment of Hepatitis C Prior Authorization Guidelines (Jan. 1, 2022)</u>

- ⁸ Prior Authorization Guidelines.
- ⁹ Prior Authorization Guidelines.
- ¹⁰ Prior Authorization Guidelines.

- ¹² United Healthcare Community Plan, Preferred Drug List (Jan. 1, 2024), https://perma.cc/HG3N-2DMX.
- ¹³ Neighborhood Health Plan, 2024 Medicaid Drug Formulary (Jan. 1, 2024), https://perma.cc/MU6V-P488.
- ¹⁴ Prior Authorization Guidelines.
- ¹⁵ National Association of Medicaid Directors, Medicaid Directors, https://perma.cc/RK6K-TFKK.

¹⁶ Rhode Island Executive Office of Health and Human Services, Pharmacy & Therapeutics Committee, https://perma.cc/XTU9-7FK5.



¹ Centers for Medicare & Medicaid Services, Medicaid & CHIP in Rhode Island, https://perma.cc/2LRE-23WC.

² HepVu, Local Data: Rhode Island State Profile, https://perma.cc/SZ2J-MTCM.

³ Kaiser Family Foundation, Share of Medicaid Population Covered Under Different Delivery Systems (July 1, 2022), https://perma.cc/EMN8-QR8B.

⁴ The Executive Office of Health and Human Services, Medicaid Managed Care Contracts & Policy/Guidance Documents,

https://perma.cc/BG5M-PV9V.

⁵ Preferred Drug List.

⁶ Prior Authorization Guidelines.

⁷ Prior Authorization Guidelines.

¹¹ Tufts Health RI Together, Pharmacy Program and Preferred Drug List (Jan. 15, 2024), https://perma.cc/AZ2R-922W.