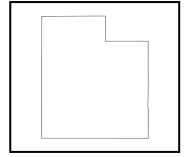


Hepatitis C: State of Medicaid Access Report Card

Utah



Grade	Recommendations to Improve Patient Access
C	<ul style="list-style-type: none"> Remove prior authorization for HCV treatment. Ensure transparency and parity across FFS and MCOs regarding HCV coverage criteria. Remove additional restrictions as described below.

State Overview

As of October 2023, 388,182 individuals were enrolled in Medicaid and CHIP.¹ It is estimated that as of 2016, 12,300 people were living with HCV in Utah.² Utah Medicaid operates a Fee-For-Service (FFS) program and contracts with Managed Care Organizations (MCOs). Most beneficiaries, over 84 percent, are enrolled in an MCO. The remaining beneficiaries participate in FFS.³ Utah utilizes four MCOs: Health Choice Utah (Health Choice), Healthy U, Molina Healthcare (Molina) and SelectHealth Community Care (SelectHealth).⁴

The Utah Medicaid Preferred Drug List designates Mavyret and sofosbuvir/velpatasvir as preferred medications.⁵

Deductions		Policy
Prior Authorization	-8	Prior authorization is required for all HCV treatment regimens. ⁶
Fibrosis Restrictions	0	Utah Medicaid does not impose fibrosis restrictions. ⁷
Substance Use Restrictions	0	Utah Medicaid does not impose substance use restrictions. ⁸
Prescriber Restrictions	0	Utah Medicaid does not impose prescriber restrictions for patients who qualify for simplified treatment. ⁹ For all other patients medications must be prescribed in consultation with a specialist.
Retreatment Restrictions	0	Utah Medicaid does not impose undue retreatment restrictions. ¹⁰ If the patient has been previously treated for HCV, the prior authorization form states if “the patient had an interruption in treatment due to medication nonadherence, please specify the nonadherence issue(s)” and if “the previous issue(s) related to medication nonadherence has been resolved and the patient has been counseled on the importance of adherence to HCV treatment.”
Access in Managed Care	-8	Healthy U imposes some requirements that are less stringent, and some requirements that are more stringent, than FFS. ¹¹ Healthy U permits Project ECHO-registered providers to prescribe treatment, and does not require genotype for all regimens (sofosbuvir/velpatasvir). However, it inquires as to the patient’s ability to adhere to treatment, including questions about the patient’s psychiatric condition. Health Choice, ¹² Molina, ¹³ and SelectHealth ¹⁴ do not appear to publish updated HCV treatment coverage criteria.
Additional Restrictions	-6	Utah Medicaid imposes additional restrictions as follows ¹⁵ : <ul style="list-style-type: none"> Documentation of chronic HCV infection. Documentation of genotype. Documentation of adherence counseling for retreatment.
Total Deductions	-22	Total Score [100-Deductions] 78
		Grade C

Contact Your State Officials

Medicaid Office¹⁶: Jennifer Strohecker, Mailing Address: Utah Department of Health, Division of Medicaid and Health Financing, P.O. Box 143106, Salt Lake City, UT 84114-3106; Physical Address: 288 North 1460 West, Salt Lake City, Utah in the Martha S. Hughes Cannon Building; Email Address: jstrohecker@utah.gov; Phone Number: 1 (877) 291-5583.

Pharmacy & Therapeutics Committee¹⁷: Email Address: medicaidpharmacy@utah.gov.

Key Sources

Preferred Drug List: [Utah Department of Health & Human Services, Preferred Drug List \(Jan. 2024\)](#)

Prior Authorization: [Utah Medicaid, Pharmacy Prior Authorization Request Form: Hepatitis C \(Dec. 1, 2023\)](#)

¹ Centers for Medicare & Medicaid Services, Medicaid and CHIP in Utah, <https://perma.cc/6R7J-TCB>.

² HepVu, Local Data: Utah, <https://perma.cc/Q9AU-XGZV>.

³ Kaiser Family Foundation, Share of Medicaid Population Covered under Different Delivery Systems, <https://perma.cc/7VZJ-8H77>.

⁴ Utah Medicaid, Managed Care, <https://perma.cc/HG99-PDLQ>.

⁵ Preferred Drug List.

⁶ Preferred Drug List.

⁷ Prior Authorization Form.

⁸ Prior Authorization Form.

⁹ Prior Authorization Form.

¹⁰ Prior Authorization Form.

¹¹ Health U Medicaid, Prior Authorization Form: Hepatitis C Direct Acting Antivirals (Feb. 1, 2024), <https://perma.cc/V7US-HGAV>.

¹² Health Choice Utah, Forms, <https://perma.cc/6RUU-NDEK>.

¹³ Molina Healthcare, Drug Formulary, <https://perma.cc/77FQ-465J>; see also Provider Forms, <https://perma.cc/X2JX-Y5UB>.

¹⁴ SelectHealth Community Care, Pharmacy, <https://perma.cc/C8HS-5B4B>.

¹⁵ Prior Authorization Form.

¹⁶ Utah Medicaid, Contact, <https://perma.cc/MHS6-YD8H>.

¹⁷ Utah Medicaid, P&T Committee, <https://perma.cc/CCD7-MZZV>.