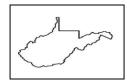
Hepatitis C: State of Medicaid Access Report Card

West Virginia



Grade	Recommendations to Improve Patient Access		
C	 Remove prior authorization for HCV treatment. Remove substance use counseling requirement. Remove retreatment restrictions. Remove additional restrictions as described below. 		

State Overview

As of October 2023, 560,937 individuals were enrolled in Medicaid and CHIP.¹ It is estimated that as of 2016, 20,600 people were living with HCV in West Virginia.² The state operates a Fee-For-Service (FFS) program and West Virginia's Bureau of Medical Services contracts with three Managed Care Organizations (MCOs): Aetna Better Health of West Virginia, Health Plan of West Virginia, and Unicare.³ Eighty-one percent of beneficiaries are enrolled in an MCO, while the remaining 19% are enrolled in FFS.⁴

The West Virginia Medicaid Preferred Drug List designates Mavyret and sofosbuvir/velpatasvir as preferred treatment regimens.⁵

Deductions		Policy	
Prior Authorization	-8	Prior authorization is required for all HCV treatment regimens. ⁶	
Fibrosis Restrictions		West Virginia Medicaid does not impose fibrosis restrictions. ⁷	
Substance Use Restrictions	-4	West Virginia Medicaid imposes substance use restrictions. Patients and prescribers must sign a Patient-Provider Agreement Form. Patients may be required to submit a drug screen and the prescriber must counsel, recommend, or encourage the patient to enroll in a treatment program. Additionally, patients must agree "to IMMEDIATELY notify my prescriber if for any reason I feel that I should stop my treatment. I understand that failure to complete my full course of therapy solely due to actions on my part may result in loss of future coverage through Medicaid."8	
Prescriber Restrictions		West Virginia Medicaid does not impose prescriber restrictions for patients who qualify for simplified treatment. It is noted that "While not required, it is highly recommended that the prescriber is educated in the treatment and diagnosis of Hepatitis C through an academic/training mentorship program such as Project ECHO and/or WVHAMP." 9	
Retreatment Restrictions	-8	West Virginia Medicaid imposes retreatment restrictions. Retreatment may be covered at the discretion of the Medical Director, but only on a case-by-case basis, and it may be denied based on adherence issues. Patients must agree to the following: "I understand that failure to complete my full course of therapy solely due to actions on my part may result in loss of future coverage through Medicaid." Additionally, failure to submit SVR12 results may result in denial of retreatment. ¹⁰	
Access in Managed Care		West Virginia excludes the pharmacy benefit from MCO contracts and covers medications under the FFS program for all beneficiaries. ¹¹	



Additional Restrictions	-8	 West Virginia Medicaid imposes additional restrictions as follows¹²: Documentation of HCV genotype. All patients must have a fibrosis score and one detectable HCV viral level documented within 6 months prior to the start of therapy (i.e., time-based lab requirement) Prohibits refills for lost or stolen medications. Documentation that patient has been vaccinated for hepatitis A & B or is currently immune. 	
Total Deductions -28		Total Score [100-Deductions] 72	Grade C

Contact Your State Officials

Medicaid Office¹³: Cindy Beane, Commissioner for the Bureau for Medical Services, West Virginia Department of Health and Human Resources

350 Capitol Street, Room 251, Charleston, WV 25301; Telephone: (304) 558-1700; Email: cynthia.e.beane@wv.gov

Pharmacy & Therapeutics Committee¹⁴: Priya Shah, Drug Utilization Review Coordinator

350 Capitol Street, Room 251, Charleston, WV 25301; Telephone: (304) 558-1700; Email Address: priya.b.shah@wv.gov

Key Sources

Preferred Drug List: West Virginia Medicaid, Preferred Drug List with Prior Authorization Criteria (Jan. 1, 2024)

Clinical Criteria: West Virginia Medicaid, Hepatitis C: Criteria for Approval (Aug.3, 2023)

Prior Authorization Form: West Virginia Medicaid, Hepatitis-C Therapy Prior Authorization Form (2019)

Patient-Provider Agreement: West Virginia Medicaid, Patient-Provider Agreement - Hepatitis C (May 26, 2022)



¹ Centers for Medicare & Medicaid Services, Medicaid & CHIP in West Virginia, https://perma.cc/9KK2-6GNA.

² HepVu, Local Data: West Virginia, https://perma.cc/SF7Q-22BF.

³ Mountain Health Trust, West Virginia Bureau for Medical Services, https://perma.cc/66U8-259X.

⁴ Kaiser Family Foundation, Share of Medicaid Population Covered under Different Delivery Systems, https://perma.cc/EMN8-QR8B.

⁵ Preferred Drug List.

⁶ Clinical Criteria.

⁷ Clinical Criteria.

⁸ Clinical Criteria.

⁹ Clinical Criteria.

¹⁰ Clinical Criteria.

¹¹ Kaiser Family Foundation, Annual Medicaid Budget Survey for State Fiscal Years 2023 and 2024 (Nov. 14, 2023), https://perma.cc/4K6Y-8DEM.

¹² Clinical Criteria.

¹³ West Virginia Bureau for Medical Services, Meet the Commissioner, https://perma.cc/P4P8-BTWR.

¹⁴ West Virginia Bureau for Medical Services, DUR Board Meetings, https://dhhr.wv.gov/bms/BMS%20Pharmacy/DUR/Pages/DUR-Board-Meetings.aspx.