

# Hepatitis C: State of Medicaid Access Report Card

## New York

Estimated Number of Individuals Living with Hepatitis C: 116,000<sup>1</sup>



Grade	Summary
<p style="font-size: 2em; font-weight: bold; text-align: center;">A+</p>	<p><b>Liver Damage (Fibrosis) Restrictions:</b> New York does not impose liver damage restrictions.</p> <p><b>Sobriety Restrictions:</b> New York does not impose sobriety restrictions.</p> <p><b>Prescriber Restrictions:</b> New York does not impose prescriber restrictions.</p> <p><b>Recommendations to Improve Patient Access:</b></p> <ul style="list-style-type: none"> <li>• Continue to provide streamlined access to hepatitis c treatment across the program.</li> <li>• Remove the requirement of prior authorization for patients seeking retreatment.</li> </ul> <p><i>Grade Rationale: New York Medicaid has made strides in improving access to hepatitis C medications due in large part to very strong patient advocacy. New York FFS imposes no treatment restrictions, and does not require prior authorization for patients newly initiating hepatitis c treatment. Additionally, because the state's coverage criteria will apply regardless of MCO enrollment beginning April 1, 2021, beneficiaries will have consistent access across the entire program. New York's grade may be re-evaluated once their pharmacy benefit transition is completed.</i></p>

### Background

As of September 2020, New York had 6,475,604 individuals enrolled in Medicaid and Children's Health Insurance Program.<sup>2</sup> New York operates a Fee-For-Service (FFS) program and contracts with Managed Care Organizations (MCOs). Most beneficiaries, 77 percent, are enrolled in a MCO plan and the remaining 23 percent participate in FFS.<sup>3</sup> The MCO plans available vary by county and include plans for special needs or populations such as HIV and long-term care.<sup>4</sup> However, beginning April 1, 2021, the state plans to transition pharmacy benefits for all members from the MCO program back to FFS.<sup>5</sup> This means that access to hepatitis c treatment will be standardized based on the state's FFS criteria regardless of which MCO an individual is enrolled in.

### State of Medicaid Hepatitis C Treatment Access

Due to aggressive and persistent patient advocacy New York Medicaid has relaxed its hepatitis C coverage restrictions. The state's FFS program does not impose any fibrosis, sobriety, or prescriber restrictions with respect to initial hepatitis C treatment requests. In July 2020, the New York State Medicaid Drug Utilization Review Board voted to approve a recommendation to the Commissioner of Health to remove any prior authorization criteria for beneficiaries newly starting hepatitis C treatment (no previous claims within past 12 months).<sup>6</sup> This recommendation was adopted by the Commissioner and subsequently the hepatitis C clinical criteria listed on the state's preferred drug list was updated to only require a diagnosis of chronic hepatitis C.<sup>7</sup> Beneficiaries seeking retreatment (within one year of a previous request) must submit a prior authorization and be screened for treatment readiness, including considerations about drug and alcohol use.<sup>8</sup> The FFS preferred drug list identifies Mavyret, generic Epclusa, and Vosevi as preferred regimens, and Epclusa, Harvoni (brand & generic), Sovaldi, Viekira Pak, and Zepatier as non-preferred.<sup>9</sup> Because the state is transitioning all beneficiaries' pharmacy benefit to FFS as of April 1, 2021, this criteria will apply to all beneficiaries regardless of MCO enrollment.

### Liver Damage (Fibrosis) Restrictions

New York does not impose liver damage restrictions.

### Sobriety Restrictions

New York does not impose sobriety restrictions.

### Prescriber Restrictions

New York does not impose prescriber restrictions.

## Points of Contact for Questions & Concerns about New York's State of Medicaid Hepatitis C Access

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<sup>1</sup> New York State Profile, HepVu (Accessed August 2017): <https://hepvu.org/state/new-york/>

<sup>2</sup> Medicaid and CHIP in New York, By-State, Medicaid.gov: <https://www.medicaid.gov/medicaid/by-state/stateprofile.html?state=new-york>

<sup>3</sup> Share of Medicaid Population Covered Under Different Delivery Systems, Medicaid Managed Care Market Tracker, Henry J. Kaiser Family Foundation: <http://www.kff.org/medicaid/state-indicator/share-of-medicaid-population-covered-under-different-delivery-systems/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>;  
See also: Managed Care, Department of Health, New York State: [https://www.health.ny.gov/health\\_care/managed\\_care/](https://www.health.ny.gov/health_care/managed_care/)

<sup>4</sup> Managed Care by County – Mandatory, Department of Health, New York State: [https://www.health.ny.gov/health\\_care/managed\\_care/mmc\\_counties/mandatory\\_with\\_ssi.htm](https://www.health.ny.gov/health_care/managed_care/mmc_counties/mandatory_with_ssi.htm)

<sup>5</sup> New York State Department of Health, Pharmacy Carve Out: [https://health.ny.gov/health\\_care/medicaid/redesign/mrt2/pharmacy\\_carve\\_out/](https://health.ny.gov/health_care/medicaid/redesign/mrt2/pharmacy_carve_out/). See also New York State Medicaid Managed Care (MMC) Pharmacy Benefit Information Center, Frequently Asked Questions: <https://mmcdruginformation.nysdoh.suny.edu/faq/>. New York State Department of Health, Transition (Carve-Out) of the Pharmacy Benefit from Managed Care (MC) to Fee-For-Service (FFS): [https://health.ny.gov/health\\_care/medicaid/redesign/mrt2/pharmacy\\_carve\\_out/pharm\\_carve\\_out\\_faq.htm](https://health.ny.gov/health_care/medicaid/redesign/mrt2/pharmacy_carve_out/pharm_carve_out_faq.htm).

<sup>6</sup> Medicaid Drug Utilization Review Board Meeting Summary for July 23, 2020, New York State Department of Health:

[https://www.health.ny.gov/health\\_care/medicaid/program/dur/meetings/2020/07/dur\\_mtg\\_summary.pdf](https://www.health.ny.gov/health_care/medicaid/program/dur/meetings/2020/07/dur_mtg_summary.pdf).

<sup>7</sup> Preferred Drug List revised February 4, 2021, New York State Medicaid Fee-For-Service Pharmacy Programs: [https://newyork.fhsc.com/downloads/providers/NYRx\\_PDP\\_PDL.pdf](https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf). NYS Medicaid accepts one positive HCV RNA result as proof of a diagnosis of chronic hepatitis c.

<sup>8</sup> New York State Medicaid Pharmacy PA Programs, Hepatitis C Agents – Direct Acting Antivirals Prior Authorization (PA) Worksheet, MagellanRx Management:

[https://newyork.fhsc.com/downloads/providers/NYRx\\_PDP\\_PA\\_Worksheet\\_Prescribers\\_HepC.docx](https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PA_Worksheet_Prescribers_HepC.docx). See also Chronic Hepatitis C (CHC) Infection Check List for Prior Authorization Requests, New York Department of Health: [https://newyork.fhsc.com/downloads/providers/NYRx\\_PDP\\_CHC\\_checklist.pdf](https://newyork.fhsc.com/downloads/providers/NYRx_PDP_CHC_checklist.pdf).

<sup>9</sup> Preferred Drug List revised February 4, 2021, New York State Medicaid Fee-For-Service Pharmacy Programs: [https://newyork.fhsc.com/downloads/providers/NYRx\\_PDP\\_PDL.pdf](https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf).

<sup>10</sup> New York, Medicaid Directors, National Association of Medicaid Directors: <http://medicaiddirectors.org/about/medicaid-directors/>