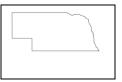
Hepatitis C: State of Medicaid Access Report Card

Nebraska



Grade	Recommendations to Improve Patient Access
F	 Remove prior authorization for HCV treatment. Remove substance use abstinence and screening requirements. Remove retreatment restrictions. Ensure transparency and parity across FFS and MCOs regarding HCV coverage criteria. Remove additional restrictions as described below.

State Overview

As of February 2022, 358,730 individuals were enrolled in Medicaid and CHIP.¹ It is estimated that as of 2016, 7,900 people were living with HCV in Nebraska.² Nebraska Medicaid operates a Fee-For-Service (FFS) program and contracts with Managed Care Organizations (MCOs). Most beneficiaries, 99.9 percent, are enrolled in a MCO and the remaining 0.1 percent participate in FFS.³ The MCO program is known as the Heritage Health⁴ is serviced by three health insurance plans: Healthy Blue⁵, United Healthcare Community Plan⁶ and Nebraska Total Care⁵.

The Nebraska Medicaid Preferred Drug List includes Mavyret, sofosbuvir/velpatasvir, and Vosevi.8

Deductions		Policy
Prior Authorization	-8	Prior authorization is required for all HCV treatment regimens. ⁹
Fibrosis Restrictions		Nebraska Medicaid does not impose fibrosis restrictions. ¹⁰
Substance Use Restrictions	-12	Nebraska Medicaid imposes substance use restrictions. Nebraska requires abstinence from drug and alcohol use for at least 6 months, a negative urine drug screen completed within 15 days of prior authorization request, and a psychosocial readiness assessment. ¹¹
Prescriber Restrictions		Nebraska Medicaid does not impose prescriber restrictions. ¹²
Retreatment Restrictions	-8	Nebraska Medicaid imposes retreatment restrictions. Requests for retreatment must include documentation of previous failure to reach SVR. Nebraska prohibits retreatment due to reinfection. ¹³
Access in Managed Care	-8	Healthy Blue ¹⁴ and United Healthcare ¹⁵ do not publish hepatitis C coverage criteria form. Nebraska Total Care follows the same requirements as FFS. ¹⁶
Additional Restrictions	-8	Nebraska Medicaid imposes additional restrictions as follows: ¹⁷ • HCV RNA must be collected within the past year. • Documentation of genotype. • Documentation of adherence assessment. • Prohibits refills for lost or stolen medications and further treatment will not be approved.
Total Deductions -44		Total Score [100-Deductions] Grade 56



Contact Your State Officials

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Pharmacy & Therapeutics Committee¹⁹: Ken Saunders, PharmD, Director of Pharmacy, Nebraska Medicaid 28500 West Park Hwy, Ashland Nebraska 68003; Telephone (402) 471-1920

Key Sources

Preferred Drug List: <u>Nebraska Medicaid Preferred Drug List (May 2, 2022)</u>
Clinical Criteria: <u>Prior Authorization Criteria Chronic Hepatitis C (July 2021)</u>

Prior Authorization Form: Nebraska Medicaid Program Hepatitis C Request for Prior Authorization (July 2021)

https://www.nebraskatotalcare.com/content/dam/centene/Nebraska/PDFs/Pharmacy/HepatitisC_PA_04012022_508.pdf.

¹ Centers for Medicare & Medicaid Services, Medicaid & CHIP in Nebraska: https://www.medicaid.gov/state-overviews/stateprofile.html?state=nebraska.

² HepVu, Local Data: Nebraska: https://hepvu.org/local-data/nebraska/.

³ Kaiser Family Foundation, Share of Medicaid Population Covered Under Different Delivery Systems (July 1, 2021): https://perma.cc/SY4K-FFQ5.

⁴ Nebraska Department of Health and Human Services, Heritage Health Plans: https://dhhs.ne.gov/Pages/Heritage-Health-Contacts.aspx

⁵ Healthy Blue Nebraska: https://www.healthybluene.com/nebraska/home.html.

⁶ United Healthcare Heritage Health: https://www.uhccommunityplan.com/ne/medicaid/heritage-health.

⁷ Nebraska Total Care: https://www.nebraskatotalcare.com/.

⁸ Preferred Drug List.

⁹ Prior Authorization Form.

¹⁰ Clinical Criteria.

¹¹ Clinical Criteria.

¹² Prior Authorization Form.

¹³ Clinical Criteria.

¹⁴ Nebraska Healthy Blue, Provider Forms: https://provider.healthybluene.com/nebraska-provider/resources/forms.

¹⁵ Nebraska United Healthcare Community Plan, Prior Authorization Forms: https://www.uhcprovider.com/en/prior-auth-advance-notification/prior-auth-specialty-drugs/comm-plan-pharmacy-prior-auth-forms/ne-uhccp-pharm-prior-auth-forms.html.

¹⁶ Nebraska Total Care, Prior Authorization Form (April 2022):

¹⁷ Clinical Criteria.

¹⁸ National Association of Medicaid Directors, Medicaid Directors: https://perma.cc/RK6K-TFKK.

¹⁹ Nebraska Department of Health and Human Services, P&T Committee: https://nebraska.fhsc.com/PDL/PTcommittee.asp.