

In the last six months:

- 4 more states (DE, FL, IL, PA) removed prior authorization requirements.
- 2 jurisdictions (SC, PR) removed prescriber restrictions.
- 2 states (SC, SD) removed substance use restrictions.
- South Dakota removed its fibrosis restrictions, making Arkansas the only state that still imposes this extreme barrier to care.

These shifts come at a pivotal time, as the White House proposes broadening access to treatment through a National Hepatitis C Elimination Program while CDC recently released new data showing alarmingly low rates of hepatitis C treatment — especially among Medicaid beneficiaries.

"Meaningful strides are made toward eliminating hepatitis C in the U.S. every time a state Medicaid program removes needless treatment access restrictions," said Elizabeth Kaplan, Director of Health Care Access for CHLPI. "We applaud states that have removed prior authorization requirements and other barriers to care. However, more states must follow suit if we are to meet our goal of ridding the U.S. of hepatitis C altogether."

There are still additional hurdles to overcome — most importantly outdated genotype testing requirements and lagging parity between states' fee-for-service policies and implementation by their managed care organizations — but overall, the soil is ripe for a coordinated national effort towards eliminating hepatitis C as a public health threat. We urge Congress to seize this momentum and advance the White House proposal for a robust nationwide hepatitis C elimination program.

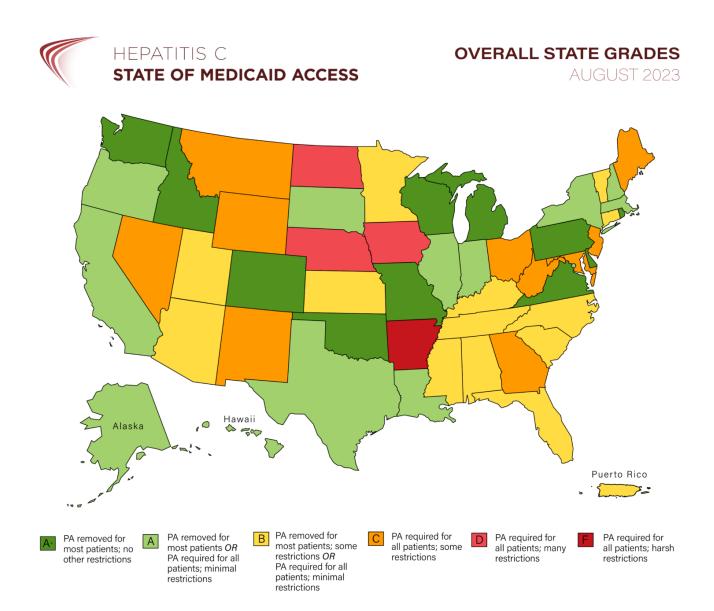
Citation: Center for Health Law and Policy Innovation & National Viral Hepatitis Roundtable, Hepatitis C: State of Medicaid Access (2023), www.stateofhepc.org

Hepatitis C: State of Medicaid Access is supported by AbbVie and Gilead Sciences. The methods, research, and conclusions of this project are those of the Center for Health Law and Policy Innovation of Harvard Law School and National Viral Hepatitis Roundtable and do not necessarily reflect the opinions of AbbVie or Gilead Sciences.

About CHLPI: The Center for Health Law and Policy Innovation of Harvard Law School advocates for legal, regulatory, and policy reforms to improve the health of marginalized populations, with a focus on the needs of low-income people living with chronic illnesses and disabilities. CHLPI works to expand access to high-quality health care; to reduce health disparities; to develop community advocacy capacity; and to promote more equitable and effective health care systems. CHLPI is a clinical teaching program of Harvard Law School and mentors students to become skilled, innovative, and thoughtful practitioners as well as leaders in health and public health law and policy. For more information, visit www.chlpi.org.

About NVHR: The National Viral Hepatitis Roundtable, an initiative of HEP, is a national coalition fighting for an equitable world free of viral hepatitis. NVHR seeks to eliminate viral hepatitis in the United States and improve the lives of those affected through advocacy, education, and support to national, state and local partners. For more information, visit www.nvhr.org.





A+ (11): Colorado, Delaware, Idaho, Michigan, Missouri, Oklahoma, Pennsylvania, Rhode Island, Virginia, Washington, Wisconsin

A (13): Alaska, California, DC, Hawaii, Illinois, Indiana, Louisiana, Massachusetts, New Hampshire, New York, Oregon, South Dakota, Texas

B (15): Alabama, Arizona, Connecticut, Florida, Kansas, Kentucky, Minnesota, Mississippi, New Mexico, North Carolina, Puerto Rico, South Carolina, Tennessee, Utah, Vermont

C (9): Georgia, Maine, Maryland, Montana, Nevada, New Jersey, Ohio, West Virginia, Wyoming

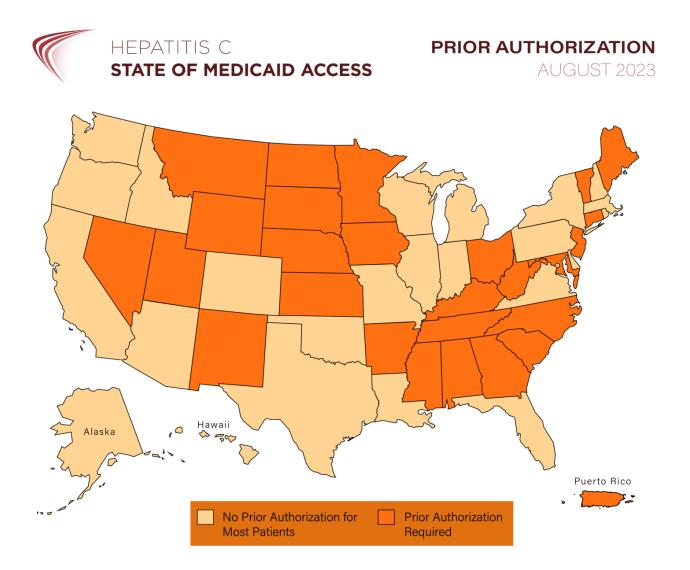
D (3): Iowa, Nebraska, North Dakota

F (1): Arkansas

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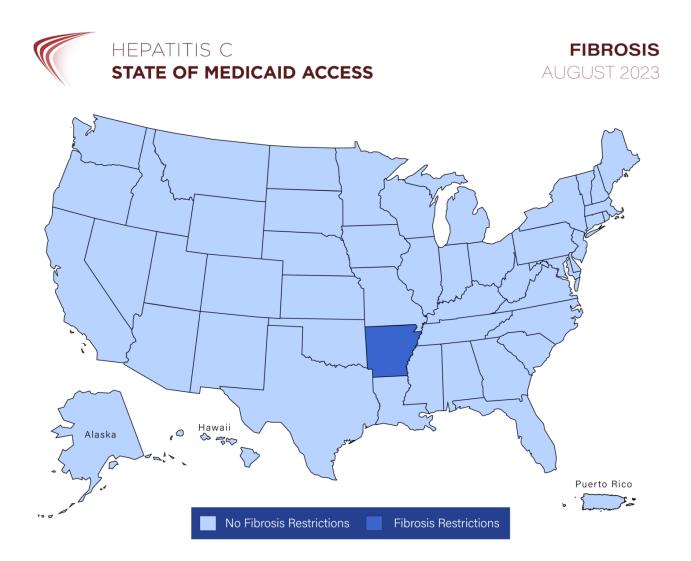
PAGE 2 OF 8





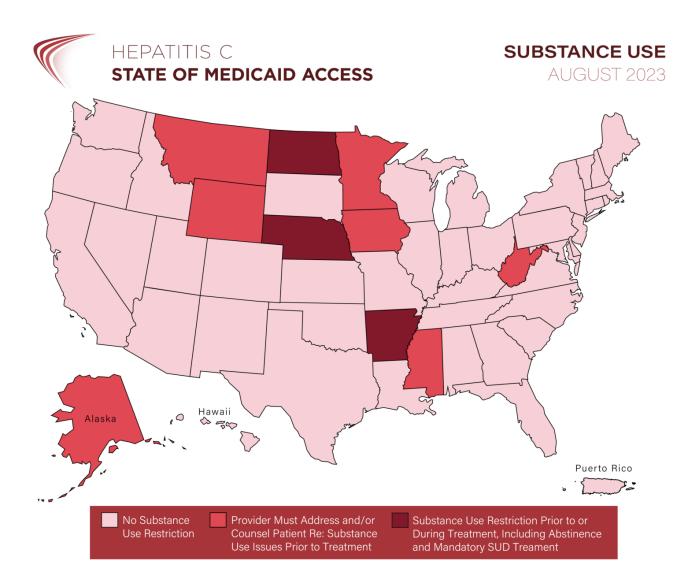
No Prior Authorization for Most Patients (25): Alaska, Arizona, California, Colorado, DC, Delaware, Florida, Hawaii, Idaho, Illinois, Indiana, Louisiana, Massachusetts, Michigan, Missouri, New Hampshire, New York, Oklahoma, Oregon, Pennsylvania, Rhode Island, Texas, Virginia, Washington, Wisconsin Prior Authorization Required (27): Alabama, Arkansas, Connecticut, Georgia, Iowa, Kansas, Kentucky, Maine, Maryland, Minnesota, Mississippi, Montana, Nebraska, Nevada, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Puerto Rico, South Carolina, South Dakota, Tennessee, Utah, Vermont, West Virginia, Wyoming





No Fibrosis Restrictions (50): Alabama, Alaska, Arizona, California, Colorado, Connecticut, DC, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming Fibrosis Restrictions (1): Arkansas

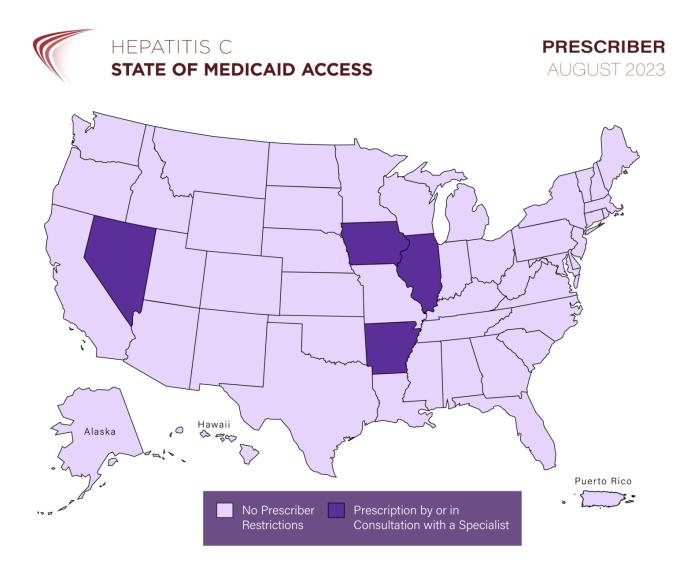




No Substance Use Restriction (42): Alabama, Arizona, California, Colorado, Connecticut, DC, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Missouri, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, Wisconsin Provider Must Address and/or Counsel Patient About Substance Use Issues Prior to Treatment (7): Alaska, Iowa, Minnesota, Mississippi, Montana, West Virginia, Wyoming

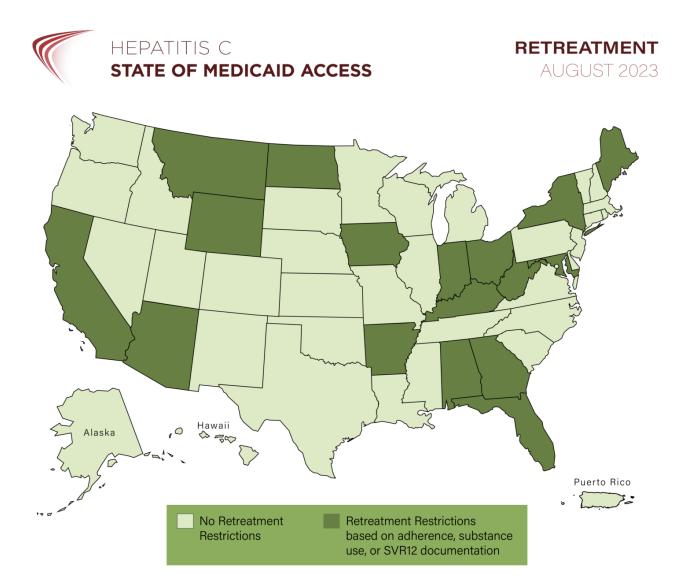
Substance Use Restriction Prior to or During Treatment, Including Abstinence and Mandatory SUD Treatment (3): Arkansas, Nebraska, North Dakota





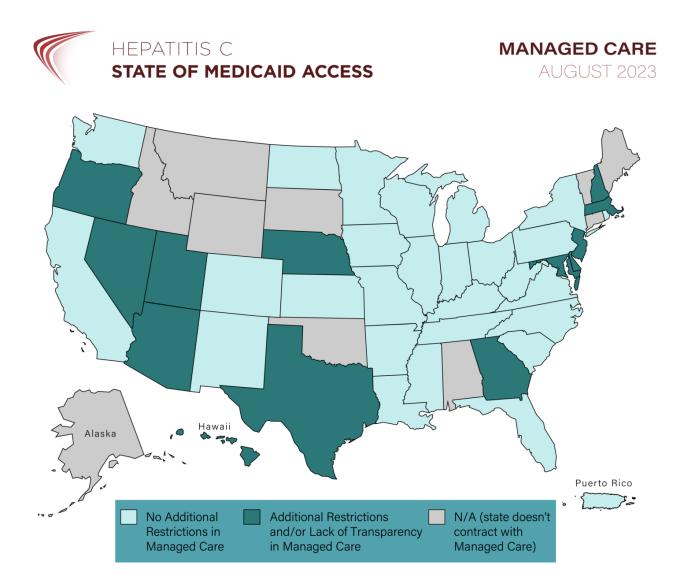
No Prescriber Restrictions (48): Alabama, Alaska, Arizona, California, Colorado, Connecticut, DC, Delaware, Florida, Georgia, Hawaii, Idaho, Indiana, Louisiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming Prescription by or in Consultation with a Specialist (4): Arkansas, Illinois, Iowa, Nevada





No Retreatment Restrictions (35): Alaska, Colorado, Connecticut, DC, Delaware, Hawaii, Idaho, Illinois, Kansas, Louisiana, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, North Carolina, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Washington, Wisconsin Retreatment Restrictions based on adherence, substance use, or SVR12 documentation (17): Alabama, Arizona, Arkansas, California, Florida, Georgia, Indiana, Iowa, Kentucky, Maryland, Maine, Montana, , New York, North Dakota, Ohio, West Virginia, Wyoming





No Additional Restrictions in Managed Care (28): Arkansas, California, Colorado, Florida, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Michigan, Minnesota, Mississippi, Missouri, New Mexico, New York, North Carolina, North Dakota, Ohio, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, Tennessee, Virginia, Washington, West Virginia, Wisconsin Additional Restrictions and/or Lack of Transparency in Managed Care (14): Arizona, DC, Delaware, Georgia, Hawaii, Maryland, Massachusetts, Nebraska, Nevada, New Hampshire, New Jersey, Oregon, Texas, Utah

N/A, State Doesn't Contract With Managed Care (10): Alabama, Alaska, Connecticut, Idaho, Maine, Montana, Oklahoma, South Dakota, Vermont, Wyoming