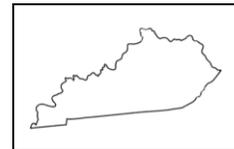


Hepatitis C: State of Medicaid Access Report Card

Kentucky



Grade	Recommendations to Improve Patient Access
B	<ul style="list-style-type: none"> Remove prior authorization for HCV treatment. Remove retreatment restrictions related to substance use. Remove additional restrictions as described below.

State Overview

As of July 2025, 1,364,688 individuals were enrolled in Medicaid and CHIP.¹ Kentucky has expanded Medicaid coverage to low-income adults. It is estimated that as of 2016, 42,500 people were living with HCV in Kentucky.² Kentucky operates a fee-for-service (FFS) program and contracts with managed care organization (MCOs). Most beneficiaries, 90 percent, are enrolled in an MCO. The remaining 10 percent participate in FFS.³ Kentucky Medicaid contracts with the following five MCOs: Aetna, Humana, Passport Health Plan by Molina, UnitedHealthcare Community Plan and WellCare.⁴ Since July 2021, outpatient drugs for individuals enrolled in MCOs are managed by a single pharmacy benefit manager (PBM), MedImpact.⁵ MedImpact applies the state's FFS preferred drug list (PDL) and prior authorization criteria.⁶

The Kentucky Medicaid Preferred Drug List designates Mavyret and sofosbuvir/velpatasvir as preferred regimens.⁷

Deductions		Policy
Prior Authorization	-8	Prior authorization is required for all HCV treatment regimens. ⁸
Fibrosis Restrictions	0	Kentucky Medicaid does not impose fibrosis restrictions. ⁹
Substance Use Restrictions	0	Kentucky Medicaid does not impose substance use restrictions. ¹⁰
Prescriber Restrictions	0	Kentucky Medicaid does not impose prescriber restrictions for patients who qualify for simplified treatment. For patients who are ineligible for simplified treatment, treatment must be prescribed by a gastroenterologist, hepatologist, infectious disease, or transplant specialist OR a provider who completed an HCV provider training program such as KHAMP or Project ECHO. ¹¹
Retreatment Restrictions	-8	Kentucky Medicaid imposes retreatment restrictions including: documentation that the patient has completed or is participating in a recovery program, alcohol and substance use counseling, and toxicology results confirming that the patient is not actively using substances. ¹²
Access in Managed Care	0	All 5 MCOS (Aetna, ¹³ Humana, ¹⁴ Passport, ¹⁵ UHC, ¹⁶ and WellCare ¹⁷) impose the same requirements as FFS, and link to the statewide Preferred Drug List.
Additional Restrictions	-4	Kentucky Medicaid imposes additional restrictions as follows ¹⁸ : <ul style="list-style-type: none"> HCV RNA must be collected within 3 months. Documentation of chronic HCV infection.
Total Deductions	-20	Total Score [100-Deductions] 80
		Grade B

Contact Your State Officials

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Key Sources

Preferred Drug List: [Kentucky Medicaid, Pharmacy Program, Preferred Drug List \(Dec. 2025\)](#)

Clinical Criteria: [Kentucky Medicaid, Single PDL, Prior Authorization Criteria \(May 31, 2025\)](#)

Prior Authorization Form: [Kentucky Medicaid, Pharmacy Prior Authorization Form \(Apr. 7, 2022\)](#)

¹ Centers for Medicare & Medicaid Services, Medicaid & CHIP in Kentucky, <https://perma.cc/NE7H-J9LR>.

² HepVu, Hepatitis C Prevalence in Kentucky (2016), <https://perma.cc/3XF6-L2ZE>.

³ Kaiser Family Foundation, Share of Medicaid Population Covered Under Different Delivery Systems (July 2, 2022), <https://perma.cc/N395-JDBK>.

⁴ Kentucky Cabinet for Health and Family Services, Managed Care Organizations, <https://perma.cc/P4WF-JSQY>.

⁵ Pharmacy Policy Branch, Kentucky Cabinet for Health and Family Services, <https://perma.cc/P4WF-JSQY>.

⁶ Kentucky Managed Care Organization Single Pharmacy Benefit Manager Announcement (April 1, 2021), <https://perma.cc/8EEQ-2KAE>.

⁷ Preferred Drug List.

⁸ Clinical Criteria.

⁹ Clinical Criteria.

¹⁰ Clinical Criteria.

¹¹ Clinical Criteria.

¹² Clinical Criteria.

¹³ Aetna Better Health of Kentucky, Your Pharmacy Benefits, <https://www.aetnabetterhealth.com/kentucky/pharmacy-prescription-drug-benefits.html>.

¹⁴ Humana Kentucky Medicaid, Pharmacy, <https://perma.cc/9FTY-5QS8>.

¹⁵ Passport By Molina Healthcare, Preferred Drug List, <https://perma.cc/GK54-66JW>.

¹⁶ UnitedHealthcare Community Plan of Kentucky, Pharmacy Resources and Physician Administered Drugs, <https://perma.cc/WG4H-DPBJ>.

¹⁷ WellCare Kentucky, Pharmacy, <https://www.wellcareky.com/providers/medicaid/pharmacy/preferred-drug-list.html>.

¹⁸ Preferred Drug List and Clinical Criteria.

¹⁹ National Association of Medicaid Directors, Medicaid Directors, <https://perma.cc/5W8N-7XRC>.

²⁰ Kentucky Cabinet for Health and Family Services, Pharmacy & Therapeutics Advisory Committee, <https://perma.cc/AQV6-48LF>.