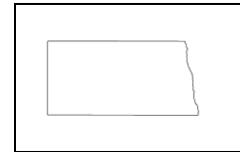


Hepatitis C: State of Medicaid Access Report Card

North Dakota



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

State Overview

As of August 2025, 105,221 individuals were enrolled in Medicaid and CHIP.¹ It is estimated that as of 2016, 2,600 people were living with HCV in North Dakota.² North Dakota operates a fee-for-service (FFS) program and contracts with one managed care organization (MCO), BlueCross and BlueShield of North Dakota (BCBSND), to administer the Medicaid Expansion program.³ Pharmacy services are carved out of managed care contracts and administered by the FFS program.⁴

The North Dakota Medicaid Preferred Drug List lists sofosbuvir/velpatasvir as the preferred regimen.⁵

Deductions		Policy
Prior Authorization	-8	Prior authorization is required for all HCV treatment regimens. ⁶
Fibrosis Restrictions		North Dakota Medicaid does not impose fibrosis restrictions. ⁷
Substance Use Restrictions	-4	North Dakota Medicaid imposes a substance use counseling restriction. For patients with "history of alcohol use disorder or IV illicit substance use" who have used alcohol or IV illicit substances in the past year, and have not completed/are not currently enrolled in a treatment program within the last year, the provider must submit a Harm Reduction Program Participation Attestation before treatment is approved. ⁸ The Harm Reduction Program Attestation may be completed by "any qualified healthcare provider." ⁹ The form requires participation in a syringe service program or 2 Harm Reduction Pathway appointments. ¹⁰ As of January 2024, toxicology labs are no longer required. ¹¹
Prescriber Restrictions		North Dakota Medicaid does not impose prescriber restrictions for initial treatment. ¹²
Retreatment Restrictions	-8	For patients seeking retreatment, North Dakota Medicaid imposes additional restrictions due to "non-compliance," "defined as a medication possession ratio (MPR) of less than 80%." Patients seeking retreatment due to "non-compliance" must have participated in 1 visit focused on addressing adherence barriers within the past 180 days. "Adherence education may be provided by a pharmacist (may be billed through the MTM program) or clinic-based E&M billed service (provided by a nurse or independent practitioner)." It is also noted that North Dakota Medicaid requires specialists to be involved in therapy for retreatment. ¹³
Access in Managed Care		Since January 1, 2020, pharmacy services are carved out of managed care contracts and administered by the FFS program. ¹⁴
Additional Restrictions	-4	North Dakota Medicaid imposes additional restrictions as follows ¹⁵ : <ul style="list-style-type: none">All patients: Confirmation of chronic HCV infection.For patients with no or unknown liver fibrosis: Two positive HCV RNA levels must be collected at least 3 months apart or 1 positive HCV RNA with the last likely HCV exposure occurring at least 6 months before more recent positive test.
Total Deductions -24	Total Score [100-Deductions] 76	Grade C

Contact Your State Officials

Medicaid¹⁶: Sarah Aker, Director, Medical Services Division, North Dakota Human Services

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Drug Utilization Review (DUR) Board¹⁷: Brendan Joyce, PharmD, Administrator, Pharmacy Services

Email Address: bjoyce@nd.gov

Key Sources

Preferred Drug List and Clinical Criteria: [ND Department of Health & Human Services, Pharmacy Coverage Policy Manual \(Oct. 1, 2025\)](#)

Prior Authorization Form: [ND Medicaid, Hepatitis C Treatments Prior Authorization Form](#)

Harm Reduction Program Attestation Form: included as the last page in the Prior Authorization Form listed above

¹ Centers for Medicare & Medicaid Services, Medicaid & CHIP in North Dakota, <https://www.medicaid.gov/state-overviews/stateprofile.html?state=north-dakota>

² HepVu, Local Data: North Dakota State Profile, <https://hepvu.org/state/north-dakota/>.

³ BCBSND Medicaid Expansion Program – Provider Information, <https://www.bcbsnd.com/providers/medicaid-expansion>.

⁴ North Dakota Medicaid Expansion Pharmacy Carve Out, Brendan Joyce, Medical Services Division, presented to Interim Human Services Committee (August 12, 2020), https://ndlegis.gov/files/committees/66-2019/21_5148_02000presentation1315.pdf

⁵ Preferred Drug List and Clinical Criteria.

⁶ Preferred Drug List and Clinical Criteria.

⁷ Preferred Drug List and Clinical Criteria.

⁸ Prior Authorization Form.

⁹ Preferred Drug List and Clinical Criteria.

¹⁰ Prior Authorization Form.

¹¹ Prior Authorization Form.

¹² Preferred Drug List and Clinical Criteria.

¹³ Preferred Drug List and Clinical Criteria

¹⁴ North Dakota Medicaid Expansion Pharmacy Carve Out, Brendan Joyce, Medical Services Division, presented to Interim Human Services Committee (August 12, 2020), https://ndlegis.gov/files/committees/66-2019/21_5148_02000presentation1315.pdf

¹⁵ Preferred Drug List and Clinical Criteria.

¹⁶ National Association of Medicaid Directors, Medicaid Directors, <https://perma.cc/W849-BFU5>.

¹⁷ ND Department of Human Services, Drug Use Review Board, <https://www.hhs.nd.gov/healthcare/medicaid/providers/pharmacy/drug-use-review-board>.