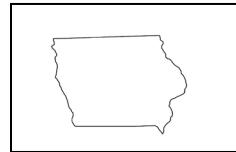


Hepatitis C: State of Medicaid Access Report Card

Iowa



Grade	Recommendations to Improve Patient Access
A	<ul style="list-style-type: none">Implement the upcoming removal of prior authorization for HCV treatment, including updating forms and ensuring timely MCO parity.Remove additional restrictions as described below.

State Overview

As of January 2025, 673,986 individuals were enrolled in Medicaid and CHIP.¹ It is estimated that as of 2021, over 18,000 people were living with HCV in Iowa.² The Iowa Department of Health and Human Services administers the state's Medicaid program, Iowa Total Care. As of July 1, 2022, 95% of beneficiaries are enrolled in a managed care organization (MCO), while the remaining 5% are enrolled in fee-for-service (FFS) or a similar alternative.³ Iowa Total Care operates its own managed care organization (MCO) and also contracts with two other MCOs: Amerigroup Iowa (Wellpoint) and Molina Healthcare.⁴

The Iowa Medicaid Preferred Drug List designates Mavyret and sofosbuvir/velpatasvir as preferred HCV treatment regimens.⁵

Deductions		Policy
Prior Authorization		Iowa is removing prior authorization for simplified treatment with preferred regimens effective January 1, 2026. ⁶
Fibrosis Restrictions		Iowa Medicaid does not impose fibrosis restrictions. ⁷
Substance Use Restrictions		Iowa Medicaid does not impose substance use restrictions. ⁸
Prescriber Restrictions		Iowa Medicaid does not impose undue prescriber restrictions. For treatment-experienced patients, treatment must be prescribed "by or in consultation with a digestive disease, liver disease, or infectious disease provider practice." ⁹
Retreatment Restrictions		Iowa Medicaid does not impose retreatment restrictions. ¹⁰
Access in Managed Care		Iowa Total Care, ¹¹ Molina Healthcare of Iowa, ¹² and Wellpoint Iowa ¹³ impose the same restrictions as FFS.
Additional Restrictions	-6	Iowa Medicaid imposes additional restrictions as follows ¹⁴ : <ul style="list-style-type: none">Documentation of chronic HCV diagnosis.Documentation of genotype.Viral load must be collected within 12 months of treatment initiation.
Total Deductions	-6	Total Score [100-Deductions] 94
		Grade A

Contact Your State Officials

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Iowa Medicaid Enterprise, 611 5th Avenue, Des Moines, IA 50309; Telephone: (515) 256-4640

Pharmaceutical and Therapeutics Committee¹⁶: Iowa Medicaid Enterprise
Grimes State Office Building B100, 400 E 14th Street, Des Moines, IA 50319; Email Address: pba_iapdlinfo@optum.com.

Key Sources

Preferred Drug List (2025): [Iowa HHS, Medicaid Preferred Drug List \(Jun. 1, 2025\)](#)

Preferred Drug List (2026): [Iowa HHS, Medicaid Preferred Drug List \(effective Jan. 1, 2026\)](#) and [January 2026 Pharmacy Program Changes Informational Letter \(Nov. 20, 2025\)](#)

Clinical Criteria and Prior Authorization Form: [Iowa Department of Human Services, Iowa Medicaid Drug Prior Authorization Criteria \(last updated July 1, 2024\)](#).

¹ Centers for Medicare & Medicaid Services, Medicaid and CHIP in Iowa, <https://perma.cc/3WMU-UFV7>.

² Iowa Department of Health and Human Services, Hepatitis C, (2021), <https://perma.cc/KYZ3-YZGQ>.

³ Kaiser Family Foundation, Share of Medicaid Population Covered Under Different Delivery Systems (July 1, 2022), <https://perma.cc/F9ZC-Q4LE>.

⁴ Iowa Total Care, Member Annual Choice Letter (2025), <https://perma.cc/V57X-5ZWA>.

⁵ Preferred Drug List.

⁶ Iowa HHS, January 2026 Iowa Medicaid Pharmacy Program Changes (Nov. 20, 2025), <https://www.iowamedicaidpdl.com/content/dam/ffs-medicare/ia/Jan-2026-IA-Medicaid-Pharmacy-Program-Changes.pdf>

⁷ Clinical Criteria.

⁸ Clinical Criteria.

⁹ Clinical Criteria.

¹⁰ Clinical Criteria.

¹¹ Iowa Total Care, Request for Prior Authorization, Hepatitis C Treatments (accessed June 2025), <https://perma.cc/Z9HG-RQRM>.

¹² Molina Healthcare of Iowa, Request for Prior Authorization, Hepatitis C Treatments (accessed June 2025), <https://perma.cc/MHB8-8HPJ>.

¹³ Wellpoint Iowa, Request for Prior Authorization: Hepatitis C Treatments (accessed June 2025), <https://perma.cc/DVQ5-JTHP>.

¹⁴ Clinical Criteria.

¹⁵ National Association of Medicaid Directors, Medicaid Directors, <https://perma.cc/XD68-KAWU>.

¹⁶ Iowa Medicaid PDL, Pharmaceutical & Therapeutics Committee Info, <https://perma.cc/8LGZ-AVKU>.