

WHAT CAN YOU OFFER?





GET READY, STAY READY HCV Prior Authorization in HI

April 26, 2023 • NASTAD VLC • Thaddeus Pham (he/him) • Hawai'i Dept. of Health • <u>Thaddeus.pham@doh.hawaii.gov</u>

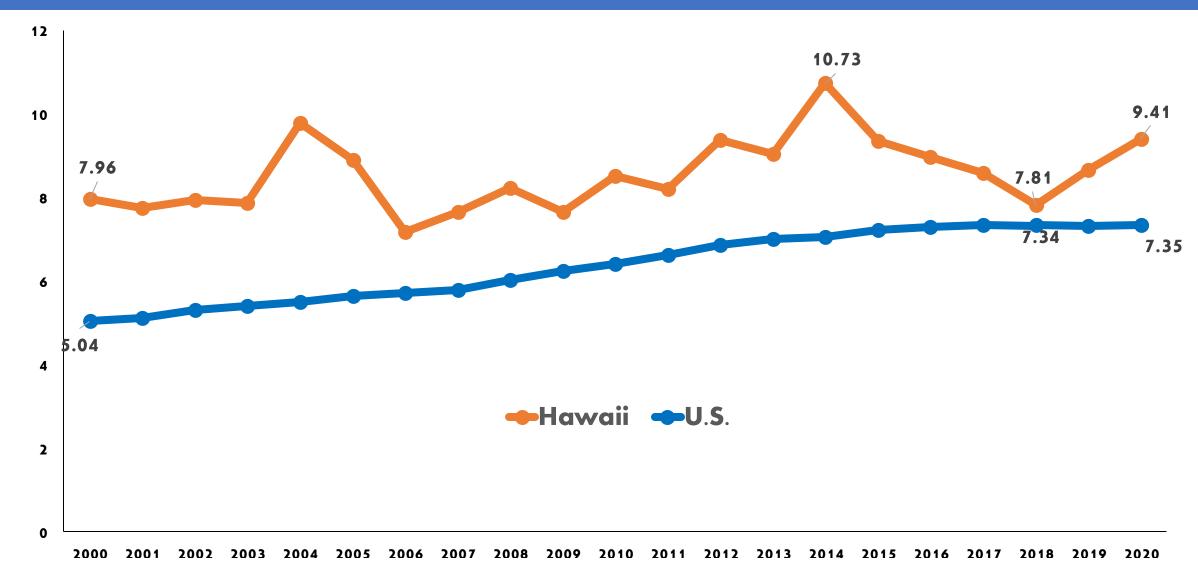




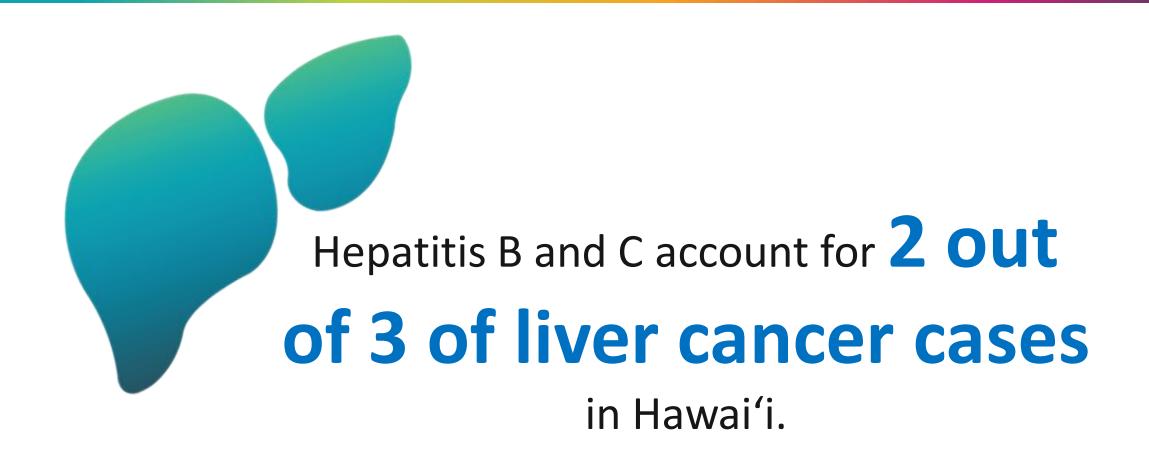
WE CAN SAVE LIVES



Liver* cancer mortality rates**, Hawai'i vs US

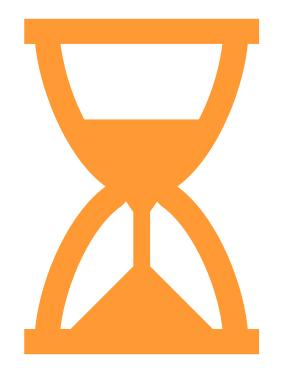


^{*}including intrahepatic bile duct cancer **age-adjusted rates per 100,000; source: https://health.hawaii.gov/harmreduction/new-hep-b-mortality-article/



Sources: Wong et al, AJS 2015





HCV-associated mortality averages

20 years of shorter life,

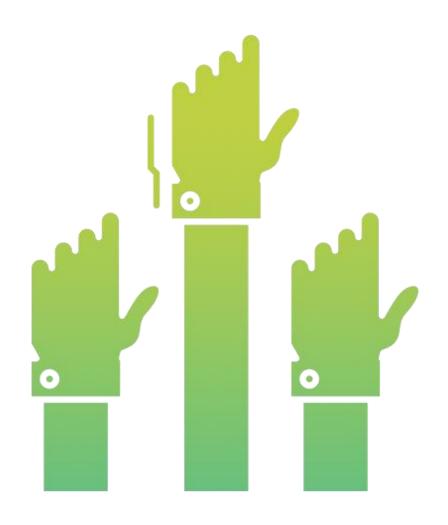
compared to the rest of the state (2016-2017).





Ly, et al. 2020. CID. https://academic.oup.com/cid/article/71/5/1149/5581721





WE HAVE A PLAN







Mission and Vision

Mission

- To empower Hawai'i 'ohana to promote liver health and wellness
- To raise awareness and increase access for the prevention, diagnosis, and treatment of liver disease, especially viral hepatitis and related harms
- To erase stigma, social and racial inequity, and health disparities surrounding communities affected by liver disease

Vision

- To create a Hawai'i free of hepatitis and other liver disease
- To promote liver health by integrating culturally appropriate services within a comprehensive system of care





Values in Practice

- Harm Reduction
- Social Justice
- Intersectionality
- Aloha

"OUR FIGHT AGAINST HEPATITIS IS ALSO A FIGHT AGAINST STIGMA, DISCRIMINATION, AND INEQUITY."

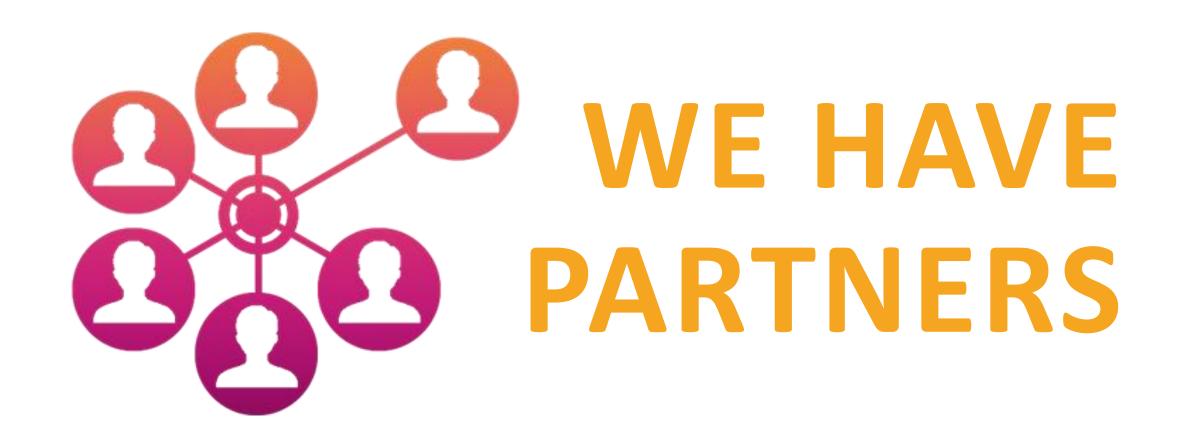
- HFH Steering Committee Member, whose uncle had hepatitis B



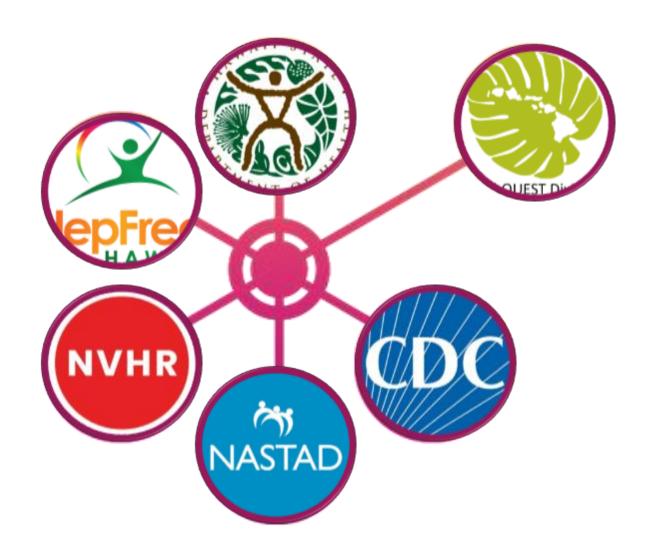
Hep Free 2030 Priorities

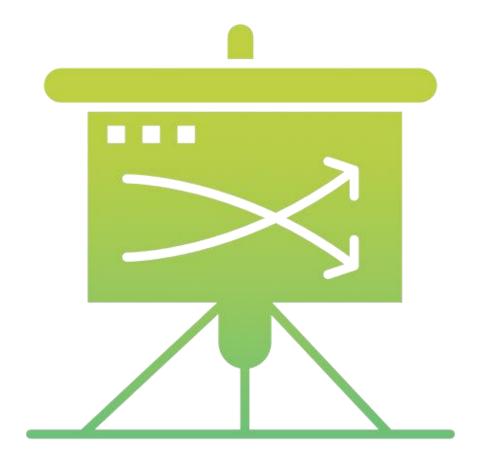








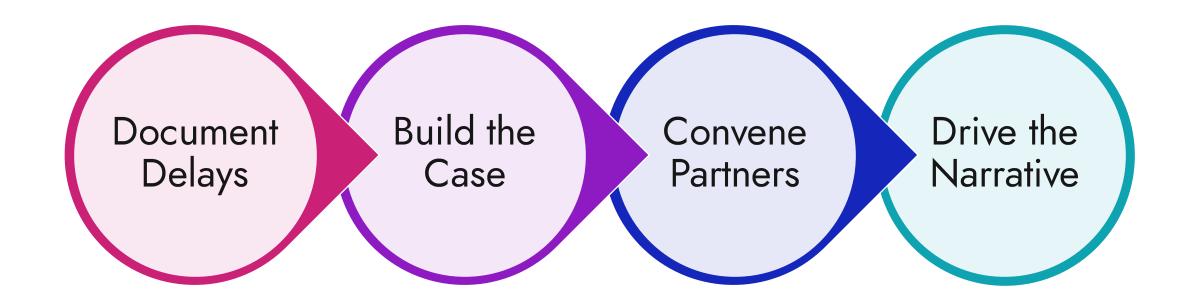




WE CAN DO (& LOOK) BETTER



Prioritize Prior Authorizations











Access Denied: CHLPI at Harvard Law School and NVHR Launch New Analysis of How State Medicaid Programs Perpetuate Inequities in Hepatitis C Treatment

The Hepatitis C: State of Medicaid Access project dives deeper into the role that state Medicaid programs play in progressing towards a country free of viral hepatitis.

FOR IMMEDIATE RELEASE

WASHINGTON, D.C. (June 22, 2022) – The Center for Health Law and Policy Innovation (CHLPI) at Harvard Law School and the National Viral Hepatitis Roundtable (NVHR) today launched the next phase of Hepatitis C: State of Medicaid Access, a project that evaluates hepatitis C virus (HCV) treatment policies across state Medicaid programs and advocates for policy change to



Hepatitis C: State of Medicaid Access Report Card

Hawaii





Grade	Recommendations to Improve Patient Access		
D	Remove prior authorization for HCV treatment.		
	Remove substance use counseling requirement.		
	 Remove requirement for prescribers to consult with a specialist. 		
	 Ensure transparency and parity across FFS and MCOs regarding HCV coverage criteria. 		
	 Remove additional restrictions as described below. 		

State Overview

As of February 2022, 428,256 individuals were enrolled in Medicaid and CHIP.¹ As of 2016, an estimated 6,700 people were living with HCV in Hawaii.² Hawaii operates a Fee-For-Service (FFS) program and contracts with managed care organizations (MCOs) through what is known as the QUEST program.³ Most beneficiaries, 99.9 percent, ⁴ are enrolled in QUEST which contracts with 5 MCOs: AlohaCare,⁵ Hawaii Medical Service Association (HMSA),⁶ Kaiser Permanente,⁻ 'Ohana Health Plan,³ and UnitedHealthcare Community Plan.⁵ Each MCO maintains its own preferred drug list.¹¹

Hawaii Medicaid FFS does not publish a preferred drug list as a discrete document, but provides a formulary lookup.¹¹





Deductions		Policy		
Prior				
Authorization	-8	Prior authorization is required for all HCV treatment regimens. 12		
Fibrosis Restrictions		Hawaii Medicaid does not impose fibrosis restrictions. ¹³		
Substance Use Restrictions	-4	Hawaii Medicaid requires the prescriber to counsel patients regarding substance use prior to treatment: "Alcohol use and substance use are not absolute contraindications to DAA therapy," but the prescriber should evaluate the patient's ability to adhere to medication by considering "alcohol use and urine toxicology results." 14		
Prescriber Restrictions	-8	Hawaii Medicaid requires a prescription by or in consultation with a hepatologist, gastroenterologist, infectious disease specialist, HIV specialist, or "primary care physicians with expertise in the treatment of hepatitis C who are approved by the health plan." 15		
Retreatment Restrictions		Hawaii Medicaid does not appear to impose restrictions on retreatment. 16		
Access in Managed Care	-8	AlohaCare, HMSA, Ohana, and UnitedHealthcare impose more stringent requirements than FFS. AlohaCare requires documentation of genotype, ¹⁷ and requires prescribers to submit a separate E-Consult form to demonstrate they have consulted with a specialist. ¹⁸ (However, AlohaCare does not appear to impose any adherence or substance use requirements. ¹⁹) HMSA requires patients to agree to "no alcohol or illicit drug use during the course of treatment," does not cover retreatment for patients who were re-infected or whose prior treatment failed due to poor adherence to medication or substance use during treatment, and prohibits refills for lost or stolen medication. ²⁰ Ohana requires urine toxicology within the past 30 days. ²¹ UnitedHealthcare requires documentation of genotype. ²² Kaiser Permanente does not publish HCV treatment coverage criteria. ²³		
Additional Restrictions	-6	 Hawaii Medicaid imposes additional restrictions as follows: RNA result must be collected within 3 months of request for treatment (i.e. time-based lab requirement) Documentation of chronic HCV infection. Documentation that the patient is "compliant with treatment Patient should demonstrate good compliance with medications and appointments such as with specialty pharmacy, providers, and laboratory blood draws." Additionally, providers must assess "conditions that may impact adherence," including "mental health conditions," prior to the patient starting treatment.²⁴ 		
Total Deductions		Total Score [100-Deductions]	Grade	
-34		66	D	

June 23, 2022 via https://stateofhepc.org/states/hawaii/

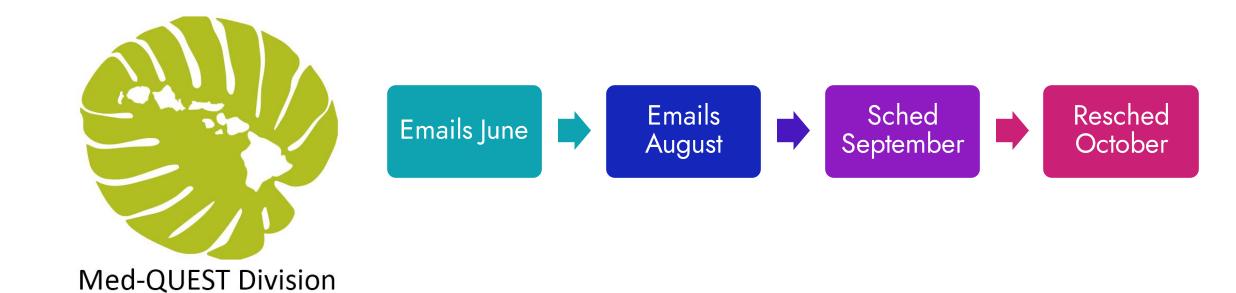




"Sadly, Hawai 'i received a "D" score, so we have work to do! If you would like to help improve our score, please review the attached and let us know how you would like to be involved."



Immediate Response, Delayed Meeting









FOR IMMEDIATE RELEASE

June 30, 2022

CONTACT: Heather Lusk, Hep-Free Hawai'i Co-Director, hlusk@hhhrc.org

HAWAI'I RECEIVES "D" GRADE ON HEPATITIS C TREATMENT ACCESS

Scorecard Assesses Treatment Restriction Policies Across State Medicaid Programs in 50 states, DC, and Puerto Rico; States Receiving an "A" Include Alaska, Idaho, Louisiana, and Indiana

Local Advocates Call for Changes to Prior Authorization Requirements & Removal of Other Barriers to Life-Saving Treatment

(Honolulu, HI)—<u>Hep Free Hawaiii</u> (HFH), a local coalition dedicated to increasing access to viral hepatitis and harm reduction services across the state, today called for state policymakers and decisionmakers to eliminate persistent barriers to curative treatments for hepatitis C (HCV).









Remove hepatitis C treatment barriers

By Christina Wang and Heather Lusk

epatitis C is one of the most prevalent viruses in the United States, impacting over 2.4 million people nationwide and an estimated 6,700 to 20,000 people in Hawaii. Hepatitis C is a leading cause of liver cancer, and our state has one of the highest rates of liver cancer in the United States. Despite the availability of lifesaving treatments, many island residents experience inequities and systemic barriers that frustrate their access to needed care.

The geography of Hawaii makes it difficult for many islanders to access basic medical care. Those who are not in Honolulu face difficulties accessing a primary care provider or specialist. Rural residents also have difficulty obtaining medications that require a spe-short period of time. Local cialty pharmacy to fill. Pair these inherent barriers with those that are rooted in the healthcare system, such as requirements to obtain an approved prior authorization for hepatitis C treatment and specialist consultation, and many residents living with hepatitis C are left with limited options to seek treatment.

nificant delay in the time it takes for a cause of prior authorization and person to receive treatment due to administrative requirements associated with the process, leading to fewer prescriptions being filled and fewer patients being treated. Access to medication based upon evidence-based treatment guidelines are scape has changed over the past also often rejected in the prior autho-several years.

ate treatment. Prior authorization requirements, along with substance use and prescriber requirements, fail to further the health of our community.

The state of Hawaii should lift all prior authorization restrictions on hepatitis C treatment if our state is to help gain ground on the World Health Organization's (WHO) goal to eliminate viral hepatitis by 2030. Last year, the federal Centers for Disease Control and Prevention (CDC) declared viral hepatitis a "winnable battle," meaning that significant progress can be made in a relatively advocates, including Hep Free Hawaii, are now work- Harm Reduction ing on a strategy to eliminate hepatitis C, and hepatitis A and B, by 2030.

A recent report, "Hepatitis C: State of Medicaid Access," graded Hawaii's Medicaid program a "D" in its hepatitis C treat-Prior authorization can cause a sig- ment access abilities, in large part beother prescription requirements. Meanwhile, 14 states across the country have removed prior authorization for hepatitis C treatment for most state Medicaid beneficiaries entirely, as the treatment access land-

ISLAND VOICES





Christina Wang. top, is a nurse practitioner in Honolulu specializing in infectious disease: Heather Lusk is executive director of Hawaii Health & Center and codirector of Hep Free Hawaii.

hepatitis C as a public health threat by 2030. Additional resources should be dedicated to populations that account for a large percentage of those living with hepatitis C in our community, including people who use drugs and people who are unhoused.

The costs of non-treatment far exceed the costs of effective treatment, as the complications of non-treatment may include liver cancer care and death. Treatment should be available in settings where people already receive services. such as primary care offices, community clinics, syringe services programs, substance use treatment centers, and carceral facilities, Hawaii should also increase the number of primary care providers treating

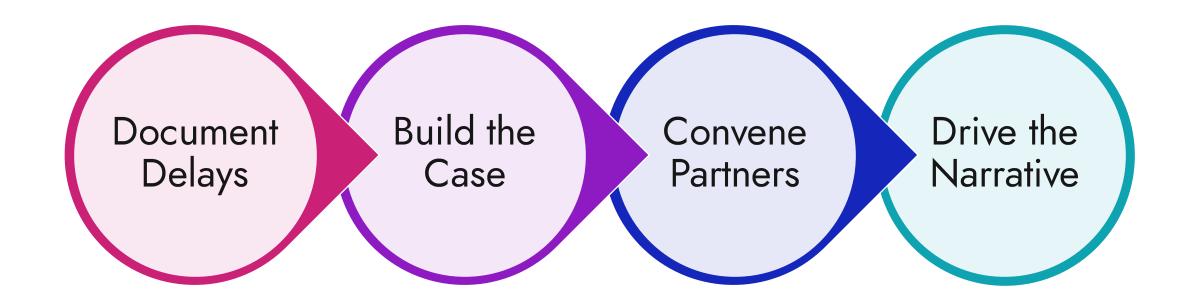
hepatitis C.

În July, the viral hepatitis community around the globe recognized World Hepatitis Day to raise awareness around the global burden of the virus, Mahalo to Gov. David Ige for issuing a proclamation in support of World Hepatitis Day. This year's World Hepatitis Day theme was "Hepatitis Can't Wait" — a fitting call to action that all healthcare stakeholders must heed.

https://www.staradvertiser.com/2022/08/28/editorial/island-voices/remove-hepatitis-c-treatment-barriers/



Prioritize Prior Authorizations



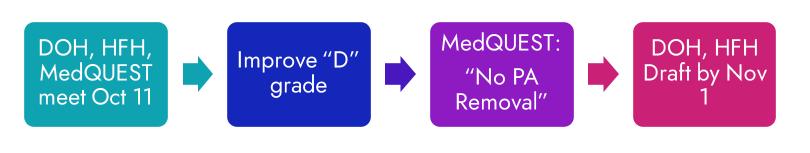




WE CAN IMPROVE QUALITY



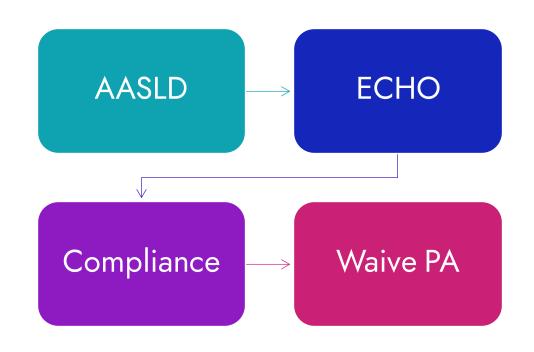
We Can Draft a Memo...







...or a Provider "Gold Card"









WE CAN SHOW THANKS



SOSH GREEN, MA GOVERNOR KE ENVIROR



CATHA BETTE ENECTOR EA GLASA HOTOKEU

JOSEPH CAMPOS 8 DEPLITY ORBICTOR SA HORE LLINA HOTOGET

STATE OF HAMBE XA MORE FINA O HABBET DEPARTMENT OF HUMAN SERVICES KA "OTHANA MÁLAMA LAWELAWE EMARKA

Med-QUEST Division Clinical Standards Office P. G. Box 700190 Spools, Hawaii 96709-0190

December 30, 2022

MEMORANDUM

MEMO.NO.

QF-2227 [Replaces QF1829] FFS 22-08 [Replaces FFS 18-10]

TO: Medicaid Fee-For-Service (FFS), QUEST Integration (Qf) Health Plans, Providers, and

Pharmacies

Judy Mohr Peterson, PhD JP Med-QUEST Division Administrator

Curtis Toma MD CT

Med-QUEST Division (MQD) Medical Director

SUBJECT: DIRECT ACTING ANTIVIRAL (DAA) MEDICATIONS FOR TREATMENT OF CHRONIC

HEPATITIS C INFECTION

This memorandum is an update to QI-1829 and serves as broad guidance to the QI health plans for the treatment of chronic hepatitis C virus (HCV) infection. Over 2 million adults in the United States have hepatitis C virus (HCV) infection, and it contributes to approximately 14,000 deaths a year. Eight to 12 weeks of highly effective direct-acting antiviral (DAA) treatment, which can cure 2 95% of cases, is recommended for persons with hepatitis C.³ The Centees for Disease Control and Prevention (CDC) has reported that Medicard beneficiaries are less falsely to be treated for hepatitis C than patients covered by Medicare or commercial insurance.³ This has bearing on health outcomes for the Med-QUEST population, since HCV is one of the leading causes of liver cancer in Hawai's ³ and is also associated with lower life expectancy compared to the rest of the state.

Medicaid coverage of chronic HCV treatment with DAA medications should be covered in accordance with the following Medicaid FFS guidelines. QJ health plan policies for the coverage of chronic HCV

ANYEQUAL OPTORTUNETY EMPLOYER

"For treatment regimens following the AASLD- IDSA HCV Guidance, there will be no prior authorization [bold added]."

https://www.hepfreehawaii.org/news/medguest-reduces-hep-c-restrictions



SOMEWEN, M.E. SOVERNOR ST. ENVIROR



CATINA METTE ENCOTION RA GLANA HOTOKOU

JOSEPH CAMPOS B DEPUTY ORIGINAL EA HOTE ILIAN HOTOGEL

DEPARTMENT OF HUMAN SERVICES
EX "CHANA MÁLAMA LAWILAWI EANAKA

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AN EQUAL OPTOWTUNETY EMPLOYER

Kept most of draft language

Focus on AALSD adherence

Limit Managed Care restrictions

"Approval" to waive PAs

https://www.hepfreehawaii.org/news/medguest-reduces-hep-c-restrictions



MedQUEST Reduces Hep C Restrictions





FOR IMMEDIATE RELEASE January 18, 2023

CONTACT: Heather Lusk, Co-Director, Hep Free Hawai'i, hlusk@hhhrc.org

Christina Wang, Medical Director, Hawai'i Health & Harm Reduction Center,

cwang@hhhrc.org

Hep Free Hawai'i Applauds Med-QUEST Memo Reducing Barriers to Hepatitis C Treatment

Policy Change Will Expand Access for Under Resourced Patients Under National Best Practice Guidelines & Strengthen Hawai'i's Hepatitis Elimination Efforts

Move Comes after Hawai'i Receives a "D" Grade in 2022 Nationwide Report

Hepatitis C Virus a Leading Cause of Liver Cancer in Hawai'i

(Honolulu, HI)—Hep Free Hawai'i (HFH), a local coalition dedicated to increasing access to viral hepatitis

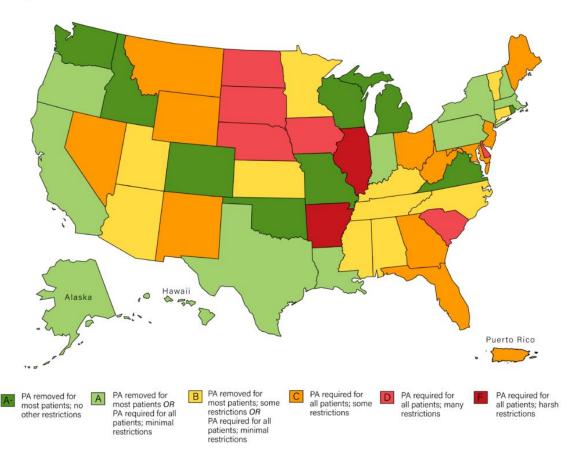
https://www.hepfreehawaii.org/press





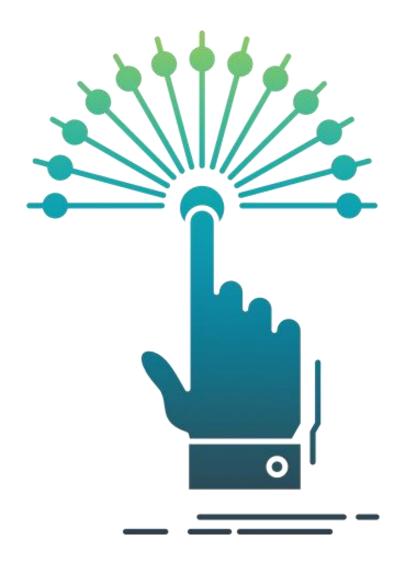
FEBRUARY 2023





https://www.hepfreehawaii.org/news/grade-a-for-hawaii-medicaid





WE CAN DO MORE



FUTURE OPPORTUNITIES

IMPLEMENT "GOLD CARD"

RECOMMEND ATTESTATION



LEGISLATIVE BRIEFING

DRAFT SIGN-ON LETTER

PARTNER W SINGLE MCO





WHAT CAN YOU OFFER?

