

December 3, 2018

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RE: Medicaid Managed Care Coverage of Direct Acting Antivirals to Cure Hepatitis C

To Whom It May Concern:

We write regarding coverage of Direct Acting Antivirals (DAAs) that cure the Hepatitis C Virus (HCV) for participants in managed care in the Illinois Medicaid program. As of November 1, 2018, the Illinois Department of Healthcare and Family Services (HFS) has eliminated all liver damage, sobriety, and prescriber restrictions on DAA access, and removed the one-per-lifetime limit on DAA coverage. HFS’s current Criteria for Prior Approval of DAAs for Hepatitis C is enclosed, and is publicly available on their website at

<https://www.illinois.gov/hfs/SiteCollectionDocuments/HFSHepCDAACriteriaWordFINAL11012018.pdf>.

We write on behalf of our clients who are Medicaid participants, including those participants who are enrolled in managed care, who are now eligible to receive DAA coverage consistent with the standard of care to remind each plan that Medicaid managed care participants must receive care that is consistent with professional standards of practice. 215 ILCS 134/5; 42 C.F.R. § 438.208(b)(1). Managed care plans must cover medically necessary services for their Medicaid participants, including pharmacy services. See 305 ILCS 5/5-16.11; 42 C.F.R. § 438.210. As a result in the change put forth by HFS, we ask that you act swiftly to update your DAA policies to align with HFS’s updated Criteria for Prior Approval of Direct-Acting Antivirals for Hepatitis C issued on November 1, 2018. We encourage you to use the HFS Prior Authorization Request form as a model. Thank you

for your attention to this matter.

Sincerely,

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Encl.: HFS November 2018 Criteria for Prior Approval of Direct-Acting Antivirals for Hepatitis C