

FREQUENTLY ASKED QUESTIONS: Prior Authorization for Hepatitis C Virus (HCV) Treatment

MassHealth Coverage | APRIL 2022

Does MassHealth require individuals who have been prescribed direct-acting antivirals (DAAs) for treatment of HCV to complete a prior authorization process?

A: In many cases, no. [In March 2022](#), MassHealth implemented a SmartPA system, which allows certain patients who are prescribed preferred DAA regimens to fill their prescriptions at the pharmacy without completing a prior authorization process, subject to certain point of sale rules. Patients are supposed to be able to fill their medications in this way as long as:

- The patient is treatment-naïve;
- The patient does not have decompensated cirrhosis;
- The patient is at least three years old;
- The patient does not have any potential drug interactions that would lower DAA efficacy; and
- The prescription does not exceed one unit per day of sofosbuvir/velpatasvir, or three units per day of Mavyret.

All other patients will be required to complete MassHealth's prior authorization process for DAA treatment.

While this policy applies to all MassHealth plans (e.g., primary care clinician plan (PCCP), managed care organizations (MCOs), accountable care organizations (ACO)), some plans may not yet have completed the transition to this new policy at the time of this publication. Contact the Center for Health Law and Policy Innovation of Harvard Law School at CHLPI@law.harvard.edu if you believe that your plan is not complying with this policy.

Does MassHealth prohibit coverage of DAAs for a patient who is currently using alcohol or drugs or who has only recently stopped using alcohol or drugs?

A: No. As of August 1, 2016, MassHealth has no sobriety or abstinence requirement for coverage of DAA treatment for HCV. MassHealth does not require prescribers to submit any information related to a patient's current or prior alcohol or drug use. This applies to all MassHealth plans (e.g., PCCP, MCOs, ACOs).

Does MassHealth require that DAAs be prescribed by or in consultation with a specialist, such as a gastroenterologist or hepatologist?

A: No. As of August 1, 2016, MassHealth policy allows primary care providers to prescribe DAA medication for treatment of HCV without the involvement of a specialist. This applies to all MassHealth plans (e.g., PCCP, MCOs, ACOs).

Does MassHealth require that a health care provider document a minimum level of liver damage (fibrosis) in a patient before approving DAA treatment?

A: No. As of August 1, 2016, MassHealth has no requirement that a patient's HCV progress to a minimum level of liver damage before treatment will be authorized. This applies to all MassHealth plans (e.g., PCCP, MCOs, ACOs).

For patients not otherwise exempt from prior authorization through the SmartPA process, described above, what diagnosis and clinical information are required for MassHealth to approve DAAs?

A: MassHealth beneficiaries with HCV are eligible for MassHealth-covered treatment with DAAs. On the [MassHealth prior authorization form](#), prescribers are required to provide the following information to MassHealth, in order to have the prior authorization request approved:

- Indication of chronic or acute infection;
- Information about HIV-coinfection, renal impairment (including creatinine clearance level), and post-liver transplant status, if applicable;
- HCV genotype;
- Information about prior hepatitis treatment, if applicable;
- Fibrosis staging, specifically diagnostic tests demonstrating either early stage (Metavir score F0-F2) or advanced stage (Metavir score F3-F4) and indication of cirrhosis, if applicable;
- Potential interactions between patient's current medications and DAAs; and
- Baseline HCV RNA lab value.

For more information, providers should reference the Hepatitis Antiviral Agents Prior Authorization Request form: <https://mhdل.pharmacy.services.conduent.com/MHDL/pubdownloadpa.do?id=6484>.

Is a patient covered under MassHealth allowed only one course of treatment with DAAs? What happens if a patient is reinfected?

A: No. There is no written “one shot” rule in MassHealth – a patient may receive more than one course of DAA treatment. This applies to all MassHealth plans (e.g., PCCP, MCOs, ACOs).

If there is an interruption in treatment and the prior authorization expires, what is the protocol for re-initiating treatment?

A: Under MassHealth policy, a new authorization for treatment must be obtained. If a prior authorization (PA) has recently expired, a provider can advocate with MassHealth to adjust the PA by contacting the MassHealth Drug Utilization Review Program at (800) 745-7318.

How much is the patient co-pay for DAA medications in MassHealth?

A: \$3.65 for the initial prescription and each refill (the same as most other medications under MassHealth). Note that even if a patient cannot afford this, a pharmacy is not allowed to deny a MassHealth beneficiary medications for nonpayment.

What should I do if I think that I am not getting adequate information or that a patient's prior authorization request has been improperly denied by MassHealth?

A: Contact the Center for Health Law and Policy Innovation of Harvard Law School at CHLPI@law.harvard.edu.