

Building a Just Society



JUSTICE FOR BREAKFAST

The Fight for Hepatitis C Medication Access among Medicaid Beneficiaries

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HEPATITIS C IN MARYLAND

- Hepatitis C is a viral infection that causes liver inflammation and can lead to serious liver damage
- Deadliest infectious disease in the US, killing more Americans each year than all other infectious diseases, including HIV, combined.
- More than 2 million Americans are diagnosed with Hepatitis C
 - Certain subgroups are more affected than others
- New treatment approved in 2014
 - Early diagnosis + treatment = better outcomes



PROGRESS TOWARDS DISMANTLING BARRIERS IN MARYLAND

- Medicaid is an entitlement program
- Federal Medicaid law requires state Medicaid programs to:
 - Pay for medically necessary treatment
 - Provide assistance with reasonable promptness
 - Not discriminate between beneficiaries in providing care



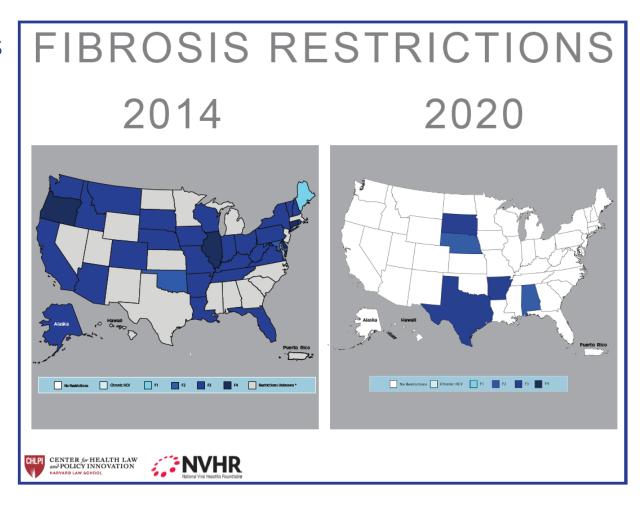
FIBROSIS SCORE REMOVAL ADVOCACY

- Fibrosis is liver scarring/damage.
- Fibrosis score measures the level of scarring to the liver
- SB 598/HB 962 (2019) required Maryland Medicaid to cover Hepatitis C treatment for beneficiaries regardless of fibrosis score.
- Maryland was first state to achieve this through legislation.

Liver fibrosis staging	Metavir score
Normal	FO
Normal – Mild	F0 – F1
Mild – Moderate	F2 – F3
Moderate – Severe	F3 – F4



- 90% have no restrictions
- 0% require F1 score
- 4% require F2 score
- 6% require F3 score





FIBROSIS SCORE REMOVAL ADVOCACY

- Advocacy for funding and expanded treatment continued with:
 - Public awareness July 2019; Opinion piece in the Baltimore Sun by Dr. Nilesh Kalyanaraman, Chief Health Officer at Health Care for the Homeless
 - Administrative advocacy August 2019; Marylanders Against Poverty (MAP) sent budget letter to MDH
 - MDH dropped to F0 on January 1, 2020



REMAINING BARRIERS TO TREATING ALL MEDICAID BENEFICIARIES

- Significant barriers to treating <u>all</u> Medicaid beneficiaries living with Hepatitis C remain:
 - Substance Use Disorder
 - Prior Authorization form
 - Specialty Pharmacy restrictions



PRIOR AUTHORIZATION FORM – SUBSTANCE USE DISORDER QUESTIONS

Substance Use History

Does the patient have an active diagnosis of a substance use disorder? □ Yes □ No
If Yes, is the patient actively engaged in treatment? □ Yes □ No; If No, please indicate whether an adherence assessment has been done to assure successful treatment completion: □Yes □No

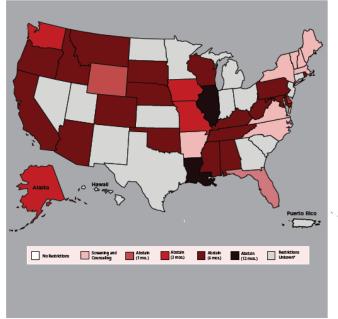


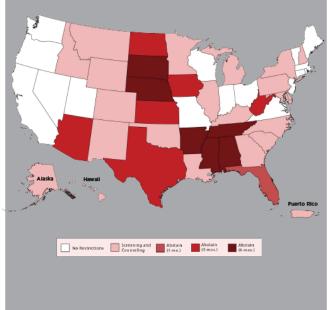
- 30% have no restrictions
- 44% require screening and counseling
- 2% require 1 month sobriety
- 12% require 3 months sobriety
- 12% require 6 months sobriety

SOBRIETY RESTRICTIONS

2014

2020











REMOVING PRIOR AUTHORIZATION

- States that have already removed or partial removed prior authorization requirement:
 - Indiana—PA lifted for treatment naïve, but only for those using their preferred medication
 - Louisiana—PA lifted, but only when using their preferred medication
 - New York—PA lifted for treatment naïve, but only for those using their preferred medication
 - Washington (state)—PA lifted when using their preferred medication
 - Wisconsin—PA lifted, but only when using their preferred medication
 - Michigan—only when using their preferred medication



OTHER BARRIERS TO ERADICATING HEPATITIS C

- Long-term funding for <u>all</u> Medicaid beneficiaries living with Hepatitis C
- Access to Hepatitis C treatment for people leaving incarceration



MARYLAND HEPATITIS COALITION

- The Maryland Hepatitis Coalition is dedicated to improving hepatitis services for individuals at risk for and infected with hepatitis B and C in the state of Maryland.
- Membership is comprised of medical providers, employees of county and state departments of health, community-based organizations, patients, harm reductionists, pharmaceutical company employees and more.



DISCUSSION

- What surprised you or stuck with you?
- What questions do you have for the presenters?

• Do you have any recommendations on how to further the group's advocacy (working with other organizations, coalitions, community outreach, etc.)?



THANK YOU FOR COMING!