

# PROVIDERALERT



**To: AmeriHealth Caritas Louisiana Providers**

**Date: May 15, 2018**

**Subject: Louisiana Fee for Service (FFS) Medicaid and Managed Care Organizations (MCOs) Hepatitis C Virus (HCV) Direct- Acting Antiviral (DAA) Agents Clinical Prior and Pre-Authorization Criteria Revision**

Please see the following memo from the Louisiana Department of Health regarding the Hepatitis C Authorization Criteria Revision.

If you have questions about the content of the following memo, please contact the FFS pharmacy help desk by phone at **1-800-437-9101**.

If you have questions about AmeriHealth Caritas Louisiana's pharmacy claims billing, please contact **PerformRX at 1-800-684-5502**.



**State of Louisiana**  
Louisiana Department of Health  
Bureau of Health Services Financing

**MEMORANDUM**

**DATE:** April 24, 2018  
**TO:** All Louisiana Medicaid Providers  
**FROM:** Jen Steele, Medicaid Director  
**SUBJECT:** Louisiana Fee for Service (FFS) Medicaid and Managed Care Organizations (MCOs) Hepatitis C Virus (HCV) Direct-Acting Antiviral (DAA) Agents Clinical Prior and Pre-Authorization Criteria Revision

Effective May 9, 2018, the Louisiana Medicaid Drug Utilization Review (LADUR) Program in conjunction with five Managed Care Organizations (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and United Healthcare) have updated the Hepatitis C clinical prior authorization and pre-authorization criteria.

The clinical criteria revisions for Hepatitis C Virus DAA agents are listed below.

**Prescriber Specialty Requirement Eliminated**

The prescriber specialty requirement has been eliminated. Incoming pharmacy claims for Hepatitis C Virus DAA agents do not have a prescriber specialty requirement when written by a prescriber enrolled in Louisiana FFS Medicaid or listed on a MCO's registry.

**Sobriety Requirement Updated**

Confirmation by attestation ONLY is needed that the patient has not been actively participating in substance abuse and/or alcohol abuse. The statement of attestation is to be completed by the prescriber and patient.

**Diagnostic Measures Updated**

For patients co-infected with Human Immunodeficiency Virus (HIV) and HCV, fibrosis and/or cirrhosis diagnostic measures (i.e. Metavir score) are no longer considered in the approval process.

Pharmacy claims for these agents will still be reimbursed at Point of Sale (POS) when the prescriber has obtained an approved clinical pre-authorization (FFS Medicaid) or a clinical prior authorization (MCO). Refer to <http://ldh.la.gov/index.cfm/page/1328>

for more information.

If you have questions about the content of this memo, you may contact the FFS pharmacy help desk by phone at (800) 437-9101.

If you have questions about pharmacy claims billing, you may contact the appropriate plan and their pharmacy help desk listed in the chart below.

<b>Plan</b>	<b>Pharmacy Help Desk</b>	<b>Pharmacy Help Desk Phone Number</b>
Aetna	CVS Health	(855) 364-2977
AmeriHealth Caritas	PerformRx	(800) 684-5502
Fee for Service	Molina	(800) 648-0790
Healthy Blue	Express Scripts	(844) 367-6111
Louisiana Healthcare Connections	CVS Caremark	(800) 311-0543
United Healthcare	Optum Rx	(866) 328-3108

Please forward this notice to other providers to assist with notification. Your continued cooperation and support of the Louisiana Medicaid Program efforts to coordinate care and improve health are greatly appreciated.

JS/MBW/GJS

c: Healthy Louisiana Plans  
Melwyn B. Wendt  
Molina