



HEALTH SYSTEMS DIVISION
Medicaid Administration

Kate Brown, Governor

Oregon
Health
Authority

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Dear Oregon Pharmacy and Therapeutics Committee,

The Oregon Pharmacy & Therapeutics (P&T) Committee initially prioritized treatment of the new hepatitis C virus (HCV) direct-acting antivirals (DAA) for the fee-for-service (FFS) population to patients in greatest need of treatment. Limited real-world experience and data, consideration for the number of patients waiting for treatment, limited provider expertise, the limited number of alternative treatment options in cases of treatment resistance, and patient comorbidities all played a role in initially prioritizing treatment.

As more HCV DAA treatment options became available, real-world experience increased, and the community standard evolved. The P&T Committee has responded by expanding treatment in a stepwise fashion to patients with less severe disease. But while clinical prior authorization (PA) criteria in place now approve treatment for HCV regardless of disease severity, coverage still requires PA. The primary clinic visit offers a critical opportunity to build on the patient's hard-won momentum toward healthy outcomes. The PA requirement itself causes a delay in treatment, which increases the risk of ongoing transmission in the community of others battling addiction.

Today multiple prescribers across the state have successfully treated thousands of patients under the Oregon Health Plan (OHP) with these agents and who are now very familiar with the implications of these therapies. Several state Medicaid FFS programs have removed clinical PA criteria for their preferred HCV DAAs without evidence of inappropriate prescribing or a significant increase in drug cost. The efficacy, safety and simplicity of these therapies assures us that more treatment-naïve patients with HCV will be successfully cured by removing barriers to access for our preferred agents. Ultimately, this change would decrease the spread of HCV in our communities and hold true to our agency's mission to eliminate health inequities in Oregon by 2030.

I encourage the P&T Committee to support the removal of clinical PA criteria for preferred HCV DAAs on the Oregon Health Plan FFS Preferred Drug List in treatment-naïve patients.

Thank you for your continued support in service of Oregonians on the OHP.

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