

November 4, 2022

IL Medicaid Advisory Committee Meeting

Members of the Medicaid Advisory Committee,

Thank you for the opportunity to provide public comment. My name is Sam Forsythe, and I am the Hepatitis Treatment and Care Manager at Howard Brown Health, a federally qualified health center with clinic locations across Chicago. I am here today to urge for the removal of prior authorization (PA) requirements for Medicaid coverage of hepatitis C virus (HCV) treatments.

In 2017, Howard Brown's Social Services department formed our HCV program because patients were presenting for HCV care and our medical staff did not have the capacity to complete all the requisite steps to obtain treatment. Because of the burdensome PA requirements, we witnessed clients experiencing years of avoidable disease progression, in some cases leaving them with permanent liver damage and forever increasing their risk of liver cancer and decompensation. While IL has addressed some of the requirements that limited HCV treatment, the Medicaid PA still remains and continues to create unnecessary barriers to care.

At Howard Brown, we've been able to cure hundreds of HCV patients, but that is because we have a multi-disciplinary team equipped with a part-time pharmacist specifically dedicated to helping patients navigate PA. Most centers of care, especially those in more rural areas of the state, cannot complete the steps for PA because they do not have the capacity to do this work. If IL were to remove the Medicaid PA requirements, more clinics across the state could treat HCV and contribute towards a common goal of HCV elimination.

Removing the Medicaid PA requirements to access HCV treatment is also a health equity issue. The Centers for Disease Control (CDC) recently reported that nationally, there are lower HCV treatment rates among Medicaid populations compared to other insured groups, and lower rates among non-white Medicaid participants than white Medicaid participants.¹ The CDC also recognized that Medicaid participants who live in states with treatment restrictions like Illinois have lower odds of receiving HCV treatment than

¹ "Vital Signs: Hepatitis C Treatment Among Insured Adults — United States, 2019–2020," U.S. DEP'T OF HEALTH AND HUM. SERVICES & CTRS. FOR DISEASE CONTROL AND PREVENTION, vol. 71, no. 32, at 1013 (Aug. 12, 2022), <https://www.cdc.gov/mmwr/volumes/71/wr/pdfs/mm7132e1-H.pdf>.

² "Hepatitis C: State of Medicaid Access," National Summary Report, CTR. FOR HEALTH LAW AND POLICY INNOVATION & NAT'L VIRAL HEPATITIS ROUNDTABLE (Jun. 2022) at 7, https://stateofhepc.org/wp-content/uploads/2022/06/State-of-Hep-C-Report_2022-1.pdf.

participants living in states without such restrictions. Because of this, sixteen Medicaid programs (including four in the Midwest) have already removed the PA requirement for most patients, and Illinois should be next.² On behalf of our patients, we urge for the removal of prior authorization requirements in Medicaid for coverage of hepatitis C virus treatments.

Sincerely,

Sam Forsythe
Hepatitis Treatment and Care Manager