



JENNIFER KENT
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

DATE: August 14, 2018

ALL PLAN LETTER 18-013
SUPERSEDES ALL PLAN LETTER 15-016

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS

SUBJECT: Hepatitis C Virus Treatment Policy Update

PURPOSE:

The purpose of this All Plan Letter (APL) is to notify all Medi-Cal managed care health plans (MCPs) of the Department of Health Care Service's (DHCS) new policy for the treatment of the hepatitis C virus (HCV). The new policy, titled "Treatment Policy for the Management of Chronic Hepatitis C,"¹ was put into effect July 1, 2018, and replaced the hepatitis C policy that was previously released in July 2015.

BACKGROUND:

The goal of hepatitis C antiviral treatment is to achieve a sustained virologic response (SVR), defined as undetectable HCV ribonucleic acid (RNA) in the blood for 12 or more weeks, after completing antiviral treatment. Achieving an SVR is, for the vast majority of patients, synonymous with curing hepatitis C. Achieving an SVR significantly decreases the risk of disease progression and the development of cirrhosis, liver cancer, liver failure, other extra-hepatic complications, and/or death.

DHCS developed this policy based on a review of the medical literature, and the most recent guidelines and reports published by the American Association for the Study of Liver Diseases/Infectious Diseases Society of America. As the treatment of HCV rapidly evolves, DHCS may need to revise this policy as new information becomes available.

POLICY:

Effective July 1, 2018, MCPs are required to follow the guidelines set forth in the "Treatment Policy for the Management of Chronic Hepatitis C," including any future releases or subsequent updates to this policy.

¹ "Treatment Policy for the Management of Chronic Hepatitis C" is available at:
<http://www.dhcs.ca.gov/Pages/HepatitisC.aspx>.

This policy updates the criteria for identifying treatment candidates and outlines several requirements and recommendations for the treatment of beneficiaries with HCV. MCPs may operationalize requirements and recommendations in different ways as long as utilization management protocols are medically reasonable and do not unnecessarily impede access to treatment.

MCPs are responsible for ensuring that their delegates comply with all applicable state and federal laws and regulations, contract requirements, and other DHCS guidance including APLs and Policy Letters. These requirements must be communicated by each MCP to all delegated entities and subcontractors.

If you have any questions regarding this APL, please contact your Managed Care Operations Division contract manager.

Sincerely,

Original signed by Nathan Nau

Nathan Nau, Chief
Managed Care Quality and Monitoring Division