

DATE: October 17, 2016

To: Holders of the AHCCCS Medical Policy Manual

FROM: Contracts and Policy Unit

Division of Health Care Management, AHCCCS

SUBJECT: AHCCCS Medical Policy Manual (AMPM) - November

This memo describes revisions and/or additions to the AMPM.

Please direct questions regarding policy updates to the Contracts and Policy Unit at 602-417-4295 or 602-417-4055 or email at DHCMContractsandPolicy@azahcccs.gov.

PLEASE NOTE: Arizona Law 2015, Chapter 19 Section 9 (SB 1480) enacts that from and after June 30, 2016 the provisions of behavioral health services under Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) is transferred to and shall be administered by AHCCCS. We are in the process of transferring all pertinent documents to AHCCCS.

UPDATES AND REVISIONS TO THE AHCCCS MEDICAL POLICY MANUAL (AMPM)

To view the policies and attachments, please access the following link:

AHCCCS MEDICAL POLICY MANUAL (AMPM)

CHAPTER 300, POLICY 310-V, PRESCRIPTION MEDICATIONS/PHARMACY SERVICES

This Policy has been revised to correct Section J(1) to state *Vaccines are limited to AHCCCS* covered immunizations rather than *limited to pneumococcal and influenza vaccines*.

CHAPTER 300, POLICY 320-N, HEPATITIS C (HCV) PRIOR AUTHORIZATION REQUIREMENTS FOR DIRECT ACTING ANTIVIRAL MEDICATION TREATMENT FOR AHCCCS MEMBERS AGE 18 YEARS AND OLDER

This Policy has been revised to reflect conformity of current AHCCCS practice as well as providing clarification.

Policy has been revised to include the decrease in the requirement from a Metavir Fibrosis Score of F3 to a score of F2 for all populations.

When a member has a substance use disorder in the past 12 months from the request date for treatment, the member must be in remission for the past three months from the request date for treatment and must be engaged in a substance use disorder treatment program at the time of the prior authorization request and shall remain engaged over the course of treatment, if the HCV medications are approved.

The Hepatitis A and Hepatitis B Vaccine series requirements were revised from completing both series to members must have received at least started the series with one injection of Hepatitis A and Hepatitis B Vaccine when the prior authorization is submitted.



Additionally, the following revisions for this policy to reflect current practice include:

- HIV CD4 counts and Interferon references have been removed.
- Provider monitoring requirements were simplified and hemoglobin monitoring was added if the member's treatment includes ribavirin.

Several updates to the Coverage Limitations section include the following:

- HCV treatment will not be covered for members when Polymorphism testing has not been completed prescribed Zepatier;
- Members declining to participate in a treatment adherence program;
- Members declining to participate in a substance use treatment program; and
- Members whose comorbidities are such that their life expectancy is one year or less.

Coverage limitations for the following were removed:

- Removed treatment exclusions for genotypes 5 and 6;
- Removed the coverage limitation for members who are post liver transplantation; and
- Removed CD4 count coverage exclusions.

Removal of the contraception requirement and pregnancy testing from the checklist and added back the once in a lifetime limit.

Additionally, Policy revised to include the following limitations regarding HCV Coverage: HCV coverage is not provided for:

- Members declining to participate in a substance use treatment program or
- Members with greater than one course of therapy per lifetime.

CHAPTER 900, POLICY 961-C, COMMUNITY SERVICE AGENCIES

Policy revised to correct Section D(3) language to state in full: When adding a rehabilitation and/or support service listed on the initial Community Services Agency Application Exhibit 961-1, the applicant must submit required documentation for each direct service staff member or contractor according to the application instructions. Policy also revised to clarify Section D (4) applies to the applicant.

<u>CHAPTER 900, POLICY 961-C, EXHIBIT 961-1 COMMUNITY SERVICE AGENCY APPLICATION</u> Correction to formatting of exhibit.