



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION

MPA/163808

PRELIMINARY RECITALS

Pursuant to a petition filed February 05, 2015, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a telephone hearing was held on March 04, 2015.

The issue for determination is whether petitioner met the criteria for approval of Harvoni.

There appeared at that time the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, Wisconsin 53703

Written Appearance by: Lynn Radmer, R.Ph.
Division of Health Care Access and Accountability
1 West Wilson Street, Room 272
P.O. Box 309
Madison, WI 53707-0309

ADMINISTRATIVE LAW JUDGE:

Peter McCombs
Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner (CARES # [redacted]) is a resident of Dane County.
2. Petitioner has Hepatitis Type C. On December 10, 2014, Dean Clinic Pharmacy requested prior authorization for Harvoni, a new but expensive drug for Hepatitis C, PA no. [redacted]. The DHCAA denied the request by a letter dated December 30, 2014. Exhibit 2.

3. The request identified the severity of petitioner's illness by a Metavir score (a score to quantify the degree of inflammation and fibrosis of the liver) of F3. The Metavir Score was established based upon results of a Fibrosure test. No liver biopsy was performed. The PA request also indicated that petitioner does not have cirrhosis or any extra-hepatic manifestations of the virus such as jaundice or abdominal pain. See, Exhibit 2 and Exhibit 3.

DISCUSSION

Drugs that entail substantial cost or utilization problems are subject to prior authorization. Wis. Admin. Code, §DHS 107.10(2)(d). The Department has utilized a preferred drug list since 2004 to inform pharmacies what drugs require authorization. Harvoni (also known as Sovaldi) is a non-preferred drug that requires authorization because of its high cost. MA providers were informed of the policy regarding drugs such as Harvoni in Forward Health Update no. 2014-74, dated November, 2014 and effective December 1, 2014. The Update is attached respondent's correspondence marked as Exhibit 3.

Under the new policy Harvoni will be considered for approval only if the person's disease has advanced to any of the following stages: compensated cirrhosis, serious extra-hepatic manifestations of the virus, or Metavir Score F3 or greater. There are also a number of circumstances listed which entail automatic denial. The Update finally lists the types of clinical information that the provider may submit to justify the request.

In this case the submission did not provide sufficient justification to approve the drug. There is no mention of cirrhosis or hepatic manifestations, and the Metavir Score is listed as F3. The DHCAA denied the request because the Fibrosure test used to establish the Metavir score is not specific enough, and thus does not meet the F3 standard.

It is very possible that Dean Clinic officials simply had not reacted to the new policy when this PA request was submitted. The request was submitted on December 10, just days after the policy went into effect. Thus I strongly suggest to petitioner that he share this information with his doctor. Perhaps a liver biopsy can be ordered to determine the specific Metavir score. I must agree with the denial of this particular PA request, however, because it fails to meet the approval criteria.

CONCLUSIONS OF LAW

The DHCAA correctly denied the request for Harvoni because it did not show that petitioner's Hepatitis had advanced to the stage for which Harvoni is approved.

THEREFORE, it is

ORDERED

That the petition for review herein be and the same is hereby dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and

why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as “PARTIES IN INTEREST” **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,
Wisconsin, this 12th day of March, 2015.

\sPeter McCombs
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on March 12, 2015.

Division of Health Care Access and Accountability