



Episode 2: Helping Medicaid Patients Access Their HIV Medications

Take Action!

HIV PROVIDERS CAN DO THE FOLLOWING
TO SUPPORT MEDICATION ACCESS FOR
PEOPLE WITH HIV ON MEDICAID:

- Weigh in with your state Medicaid program in response to proposed changes to Medicaid drug coverage that might impact people with HIV.
- Consider joining your state's Medical Care Advisory Committee.
- Advocate directly with Medicaid managed care plans about how their formulary designs (including prior authorization) impact access to medications for people with HIV.
- Tell patient stories about the impact of Medicaid formulary policies on medication access, adherence and viral suppression.

DO MEDICAID PROGRAMS HAVE TO COVER ALL THE MEDICATIONS PEOPLE WITH HIV NEED TO STAY HEALTHY?

Federal Medicaid law requires manufacturers to provide a hefty discount on the price of their medications to state Medicaid programs and managed care plans. In return, Medicaid must cover virtually all medications approved by the Food and Drug Administration, including medications for the treatment of HIV and other related conditions.

CAN MEDICAID PROGRAMS PLACE LIMITATIONS ON ACCESS TO COVERED DRUGS?

Medicaid programs can — and do — place restrictions on access to covered drugs. These restrictions include using a preferred drug list, where medications on the PDL are available without restrictions and medications not on the PDL are subject to limitations like prior authorization (where a provider must submit justification for why a patient has a clinical need for one medication over another) and step therapy (where a patient must try one medication before the Medicaid program will cover a different, often more expensive, medication).

WHAT CRITERIA DOES MEDICAID USE TO LIMIT ACCESS TO MEDICATIONS?

The restrictions that Medicaid programs, including Medicaid managed care plans, place on access to medications follow review of the clinical efficacy and safety of medication and a review of the medication's cost. High-cost medications, such as the first approved direct-acting antivirals used to cure hepatitis C, are often subject to the most onerous Medicaid restrictions. Every state Medicaid program is required to have a Medical Care Advisory Committee, made up of Medicaid beneficiaries and other stakeholders, that is tasked with advising Medicaid on how to run the program. This body is also important in advising on formulary decisions.

Where Can I Learn More?

The following organizations and resources provide useful information on Medicaid and HIV:

- If you want to know what your state's Medicaid formulary policies are, go to your state's [Medicaid website](#) and look for tabs that say "benefits" and/or "pharmacy services."
- If you want to know what a particular Medicaid managed care plan's formulary is, go to that plan's website and look for a tab that says "find your medication" or "prescription drug" coverage.
- For HIV assister resources on Medicaid basics, see the [ACE Technical Assistance Center Medicaid Resources](#).
- Visit the Georgetown Center for Children and Families, [Are You Leveraging Your Medical Care Advisory Committee?](#)