Montana Removes Discriminatory Restrictions on Access to Hepatitis C Treatment

Removal of restrictions will help ensure that Montanans have access to a cure for nation’s deadliest infectious disease; Montana previously received a ‘F’ grade for severe access restrictions

February 3, 2020 – The National Viral Hepatitis Roundtable (NVHR), a national coalition working to eliminate viral hepatitis, and the Center for Health Law and Policy Innovation of Harvard Law School (CHLPI) today commended Montana for removing discriminatory restrictions on access to treatment for the hepatitis C virus (HCV). Hepatitis C is the nation’s deadliest infectious disease and Montana’s restrictions on access to a treatment had been among the most severe in the country.

Montana had been one of only three state Medicaid programs to receive an “F” as part of NVHR and CHLPI’s Hepatitis C: The State of Medicaid Access report for imposing discriminatory restrictions on access to hepatitis C cures. Previously, Montana’s Medicaid Program had required that hepatitis C patients demonstrate several liver damage (a fibrosis score of F3 or greater), six months of sobriety, and a prescription from a specialist – which can be costly and difficult to find – before receiving access to treatment for this deadly disease.

“Hepatitis C is the nation’s deadliest infectious disease, and Montana’s discriminatory access restrictions had been preventing or delaying treatment for the 7,400 Montanans who are living with the hepatitis C virus,” said NVHR Director Lauren Canary. “This is an important step towards the elimination of viral hepatitis in the U.S. We applaud Montana for removing these restrictions and helping to ensure that those Montanans who need it now have access to a cure for this treatable disease.”

“Montana’s discriminatory restrictions were standing in the way of eliminating hepatitis C,” said Robert Greenwald, Clinical Professor of Law at Harvard Law School and the director of CHLPI. “We are grateful that Montana has joined the many state Medicaid programs across the country that have eliminated illegal and medically unfounded hepatitis C treatment restrictions.”

Hepatitis C: State of Medicaid Access grades each state, as well as the District of Columbia and Puerto Rico, according to its overall “state of access.” Each grade is determined by curative treatment restrictions related to three areas: 1) liver disease progression (fibrosis) restrictions, 2) sobriety/substance use requirements, and 3) prescriber limitations – all of which contradict guidance from the Centers for Medicare & Medicaid Services (CMS), as well as recommendations from the American Association for the Study of Liver Diseases (AASLD) and the Infectious Disease Society of America. The report also offers suggestions for each state to reduce its treatment access requirements.

To read the full Montana report card, visit https://stateofhepc.org/report/#Montana
**About the National Viral Hepatitis Roundtable (NVHR)**

The National Viral Hepatitis Roundtable, a program of HEP, is a national coalition working together to eliminate viral hepatitis in the United States. NVHR’s vision is a healthier world without viral hepatitis. NVHR’s work is guided and informed by our beliefs and commitment to: Participation, Inclusiveness, Intersectionality, Health Equity, and Stigma Elimination. For more information, visit [www.nvhr.org](http://www.nvhr.org).

**About the Center for Health Law and Policy Innovation of Harvard Law School (CHLPI)**

The Center for Health Law and Policy Innovation of Harvard Law School (CHLPI) advocates for legal, regulatory, and policy reforms to improve the health of underserved populations, with a focus on the needs of low-income people living with chronic illnesses and disabilities. CHLPI works with consumers, advocates, community-based organizations, health and social services professionals, government officials, and others to expand access to high-quality health care; to reduce health disparities; to develop community advocacy capacity; and to promote more equitable and effective health care systems. CHLPI is a clinical teaching program of Harvard Law School and mentors students to become skilled, innovative, and thoughtful practitioners as well as leaders in health and public health law and policy. For more information, visit [http://www.chlpi.org](http://www.chlpi.org).

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