The Fault No Longer in our Stars

July 20, 2015 By Rick Nash

The Oregonian recently talked about a disturbing reality for Oregonian's with Hep C (HCV).

That the mortality rate for HCV in Oregon in 2011(most recent comparative data) was 81% higher than the national average.

The reason why this is so high no longer matters, because since 2011, the ACA changed how medicaid works.

Over 27% of Oregon's population is on Medicaid.

Medicaid in Oregon has some insane restrictions for HCV patients.

Oregon's HCV population is nearly twice that of the national average at around 2 per 100.

HCV is becoming a growing problem among newly diagnosed young people. As Oregon Public Health states that "68% of (new) cases were younger than 40."

For twenty seven percent of Oregonians, who are twice as likely to have the disease and eighty one percent more likely to die from it... how is the state handling it?

Presently there are two factors that inhibit the system from being able to help thousands of dying people.

1. Medicaid in the state of Oregon is one of the worst examples of how to respond to HCV. It requires a Metavir score of F4 before treatment with new DAAs can be administered. Which means the liver is permanently damaged, quality of life is declining, and the symptoms of End Stage Liver Disease are en route.
2. HCV meds are costly to insurers, and thus costly to patients.

Months ago, governors met in part to discuss Medicaid, and one of the ideas on the table for handling the high price of HCV is a Carve-out. The ACA (Obamacare) allows the states to work with Managed Care Organizations (MCOs) to negotiate better discounts and services. It can yield a lower price than is presently offered.

However a Carve-out has the ability to leverage all Medicaid recipients with the pharmaceutical companies directly. It means higher discounts due a larger market, MCOs simply can't match it.

Creating Carve-out Policies for HIV/AIDS in California has helped thousands with access to both meds and care.

A carve-out option may not fit your state. But talking about it will remind legislators that they have a priority to serve the best interest of their state’s constituents.

We have the power to end Hep C.

Get tested, Get treated, Get cured.

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