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**For Immediate Release**

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## **LAWSUIT CHALLENGE SUCCESSFUL – WASHINGTON STATE MEDICAID MUST NOW OFFER TREATMENT TO HEPATITIS C PATIENTS**

*Federal Court Orders Washington State Medicaid to Cover HCV Curative Treatment*

*SEATTLE, Wash.* – May 27, 2016 – Today federal district court Judge John C. Coughenour handed patients diagnosed with Hepatitis C virus (HCV) an unmitigated victory, ordering the state Medicaid agency, the Washington Health Care Authority, to cover treatment for curative therapy for Hepatitis C. A copy of the Order is attached.

The patients had sued the Washington State Health Care Authority to get treatment with new HCV medications that cure more than 90% of patients. But the Health Care Authority limited access to the cure to only patients whose liver had been seriously damaged by the disease, even though scientific evidence shows that earlier treatment results in higher cure rates and better long-term health results. The plaintiffs' attorneys argued that forcing Medicaid enrollees to wait until their health worsens violates the federal Medicaid Act, which promises that low-income patients on the program may have access to medically necessary treatment. Well-established clinical guidelines of the American Association for the Study of Liver Diseases (AASLD) and the Infectious Diseases Society of America (IDSA) recommend treatment for nearly all patients: "[C]linicians should treat HCV-infected patients with antiviral therapy with the goal of achieving an SVR [sustained virologic response or cure], **preferably early in the course of their chronic HCV infection before the development of severe liver disease and other complications.**" See <http://hcvguidelines.org/full-report/when-and-whom-initiate-hcv-therapy> (emphasis added).

Judge Coughenour ordered that the Health Care Authority immediately stop applying its rationing policy and return to providing coverage for prescription medications to treat HCV without regard to the extent of a patient's liver damage.

HCV is an infectious disease that causes chronic inflammation throughout the body of those infected and can lead to serious liver damage, infections, liver cancer and death. At least 20,000 people in the United States die each year due to causes related to HCV. Even before the advanced state of the disease, individuals with HCV can suffer from diabetes, lymphoma, fatigue, joint pain, depression and arthritis.

With this ruling, Washington State Medicaid joins a growing list of national health insurers who have removed such restrictions on coverage of HCV medications. For example, Premera Blue Cross, Aetna, Cigna, United Healthcare and Blue Shield of California all recently removed restrictions related to severity of liver disease, having recognized that such limitations on coverage are not supported by clinical evidence.

"The clinical evidence is crystal clear," said Michael Ninburg, Executive Director of the Hepatitis Education Project in Seattle, Washington. "New curative therapies for HCV are medically necessary. Patients should not have to wait to get sick, sometimes irreversibly, before they can receive treatment."

"This Order will save lives," said Rick Spoonemore of Sirianni Youtz Spoonemore Hamburger, one of the plaintiffs' counsel in the case. "The State's exclusionary policy was put in place for one reason only - to save money. But saving money should never come at the expense of the health and lives of any patient, even if they are low-income and on Medicaid."

This is likely to be the first of many such lawsuits against state Medicais around the country. "Medicaid programs should consider Judge Coughenour's Order and change their practices before they also get sued," said Kevin Costello of the Center for Health Law and Policy Innovations at Harvard Law School. "Rationing policies like the one used by the Washington Health Care Authority are in place in dozens of states across the country. All of those policies are likely improper as well."

**END**