



**RETROSPECTIVE DRUG UTILIZATION REVIEW INTERVENTION NOTICE :**  
**Hepatitis-C Virus Direct Acting Antiviral Drug Interactions**

July 20, 2018

Dear Medicaid Provider,

The New York State (NYS) Medicaid Drug Utilization Review (DUR) Program retrospectively reviews the prescribing and dispensing of outpatient prescription medications to ensure that prescriptions are appropriate, medically necessary, and are not likely to result in adverse medical outcomes.

NYS Medicaid DUR Program staff and the Medicaid Drug Utilization Review (DUR) Board evaluated Hepatitis C Virus-Direct Acting Antiviral (HCV-DAA) drug interactions upon a review presented by the State University of New York at Buffalo clinical staff. The purpose of the review was to evaluate system edits for identifying and managing drug-drug interactions associated with HCV-DAA within the Medicaid Fee-For-Service (FFS) and Managed Care (MC) populations. The review focused on drug-drug interactions (identified using pharmacy claims data) considered most significant and requiring action (severity level 1) to avoid an adverse reaction or outcome. Overall the data (FFS and MC populations) showed that:

- 1.1% of Medicaid members that received a HCV-DAA during the analysis period had a severity level 1 alert for an interaction with another drug.
- The greatest proportion of severity level 1 HCV-DAA drug-drug interaction alerts were for HCV-DAAs used concomitantly with ritonavir, a potent CYP 3A inhibitor.

These findings presented an opportunity for educational outreach to prescribers and pharmacists. In providing this information to you, the DUR Program recognizes that safe and effective pharmacotherapy depends on the assessment of the patient's entire clinical profile. We ask that you consider the possibility for drug interactions when prescribing HCV-DAAs.

Thank you for your professional attention in this matter.

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