

Hepatitis C Adjunct Therapy

Adjudication Guideline

Rule Category:
Pharmaceutical

Ref: No:
2016-PH-0002

Version Control:
Version No.3.0

Effective Date:
22/12/2016

Revision Date:
11/11/2024

Approved by:
Daman

Responsible:
Medical Standards
& Research

**Related Adjudication
Guidelines:**N/A

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1. Abstract

1.1 For Members

Hepatitis C is a contagious liver disease that ranges in severity from a mild illness lasting a few weeks to a serious, lifelong illness that attacks the liver. It results from infection with the Hepatitis C virus (HCV), which is spread primarily through contact with the blood of an infected person.

1.2 For Medical Professionals

This Adjudication Rule (AR) highlights the coverage and payment requirements of Chronic Hepatitis C Adjunct Therapy by Daman as per policy terms and conditions.

The focus of this Adjudication Rule (AR) is on 4 groups of drugs, namely:

- HCV NS3/4A protease inhibitor.
- HCV NS5B polymerase.
- HCV NS5A inhibitor.
- Combination of HCV NS5A inhibitor, NS3/4A protease inhibitor and CYP3A inhibitor.

2. Scope

This Adjudication Rule (AR) highlights the coverage and payment requirements of Chronic Hepatitis C Adjunct Therapy by Daman as per policy terms and conditions.

3. Adjudication Policy

3.1 Eligibility / Coverage Criteria

- The documented evidence ICD10 code of chronic Hep. C is mandatory for the coverage of these drugs; even though other co-related secondary diagnoses e.g., cirrhosis might be present.
- Hepatitis C treatment should be prescribed by a board of appropriate speciality such as: gastroenterologist, hepatologist, infectious disease specialist, internal medicine specialist, tropical medicine specialist.
- Previous history of treatment should be clearly documented whether patient is a relapse or no responder because it determines the duration of treatment.
- Some Hepatitis C treatments are not recommended in patients with moderate or severe hepatic impairment (Child–Pugh Class B or C).
- Presence of cirrhosis or no cirrhosis should be clearly documented because it affects the duration of treatment.
- A copy of the baseline quantitative HCV RNA test result should be provided to document baseline level of viremia. Combination B has treatment stopping rules and viral load will be drawn at treatment weeks 4, 12 and 24.
- For Plan-wise coverage of Hepatitis C, please refer to Hepatitis B and C Plan-wise Coverage adjudication rule available on Daman website.

3.2 Requirements for Coverage

ICD and CPT codes must be coded to the highest level of specificity. All the supporting documentation and lab reports should be attached as stated above

3.3 Non-Coverage

HCV Adjunct Therapy is not covered if (This list may not be all-inclusive):

- Not prescribed by an eligible physician speciality as mentioned in the scope above.
- Basic plan, Visitors plan, as per Daman policy terms and conditions.
- Diagnosis is not covered as per international best practice standards and/or is considered experimental and investigational.
- Hypersensitivity to the treatment.
- Genotyping is not done.
- Hepatitis C treatment is not included in coverage criteria as per Daman policies.
- Baseline RNA is not submitted.
- Hypersensitivity to the treatment

3.4 Payment and Coding Rules

Please apply DOH payment rules and regulations and relevant coding manuals for ICD, Drug and CPT, etc

4. Denial Codes

This list may not be all inclusive.

Code	Code Description
MNEC-004	Service is not clinically indicated based on good clinical practice, without additional supporting diagnosis/activities.
MNEC-003	Service is not clinically indicated based on good clinical practice.
AUTH-001	Prior approval is required and was not obtained
NCOV-001	Diagnosis(es) is (are) not covered

Hepatitis C adjunct therapy approval form

<https://www.damanhealth.ae/main/pdf/questionnaires/Pre-Approval%20Form%20for%20Hepatitis%20C%20Adjuvant%20therapy.pdf>

5. Appendices

5.1 References

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5.2 Revision History

Date	Change(s)
14/03/2023	Creation of Adjudication Guideline-External Instruction Template.
11/05/2023	Added: Vosevi
11/11/2024	Version No.3.0 - New template

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