



Alaska Medical Assistance

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Remittance Advice (RA) Message

Title: **New Service Authorization Criteria for HCV DAA**

Issue Date: 09/01/2017

Run Length: 8 weeks

Provider Type(s): 010

Message: Alaska Medicaid has issued new service authorization criteria effective October 1, 2017 for all direct acting antiviral (DAA) products used to treat chronic hepatitis C viral (HCV) infection. The criteria document "HCV DAA PA Clinical Criteria for Use" is available at <http://manuals.medicaidalaska.com/docs/updates.htm>.

Superseded by 09/22/2017 RA Message