

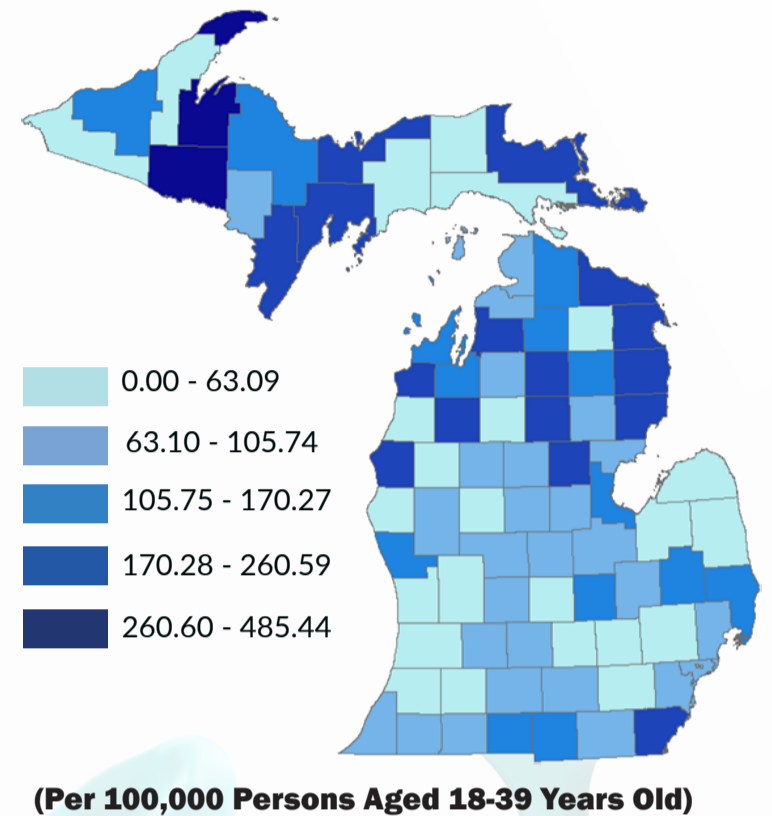
# HCV IN ADULTS UNDER 40

## Facts

In Michigan, there are approximately **115,000** individuals known to have hepatitis C; however, when taking undiagnosed persons into account, the number of individuals with hepatitis C may be as high as **200,000**. In recent years, an increase in the number of new chronic hepatitis C cases among adults under **40 years old** has emerged across the U.S. and in Michigan. From 2010 through 2019, the proportion of all chronic hepatitis C cases by year in this birth cohort nearly doubled from **22 percent** in 2010 to **41 percent** in 2019. The primary driver of this increase in HCV cases is due to sharing of injection drug equipment and works related to the opioid epidemic. In 2020, where injection drug use information was available, **83.1 percent** reported a history of intravenous drug use.

Injection drug use is the most common means of transmission of HCV in the United States. In response to the rapid increase of hepatitis C cases in this birth cohort, the Centers for Disease Control and Prevention (CDC) adopted new universal HCV testing recommendations to identify persons at risk of HCV.

**2020 Adults Under 40 yrs  
Chronic HCV Rate by County**



## Who Should Be Tested for HCV?

**Test all adults 18 years and older, at least once in a lifetime**

**Test all pregnant individuals during every pregnancy**

It is estimated that perinatal hepatitis C infection occurs in **5 to 15 percent** of babies born to HCV-infected individuals. The number of women of childbearing age infected with HCV continues to rise as a result of the opioid epidemic. Therefore, CDC recommends that all pregnant individuals be tested during every pregnancy. Pregnant individuals with ongoing risk factors who are tested early in pregnancy should undergo repeat testing to identify those who may acquire HCV infection later in pregnancy. Furthermore, HCV testing during pregnancy should promote a dialogue between the health care provider and pregnant individual about HCV transmission and risk factors. Systems should be in place to connect the mother to care postpartum and the infant's pediatrician should be notified regarding the mother's HCV carrier status to ensure appropriate testing of the infant.

**Routinely and periodically test all people with ongoing risk factors while risk factors persist**

People with ongoing risk factors should receive routine periodic testing while risk factors persist. Some examples include persons who inject drugs and share needles, syringes, or other drug preparation equipment, or persons with selected medical conditions, including persons who ever received maintenance hemodialysis.

**Test anyone who requests hepatitis C testing regardless of disclosure of risk**

Anyone requesting hepatitis C testing should receive it, regardless of disclosure of risk, because many persons may be reluctant to disclose stigmatizing risks.



### Did You Know?

**Michigan Medicaid Supports Hepatitis C Treatment for All**  
Any prescriber with prescriptive authority can test and treat HCV, including in primary care, without specialist clinical consultation. There is no prior authorization for the direct-acting antiviral Mavyret (if a different medication is clinically indicated, the standard prior authorization is required) and non-specialists can treat. There is no sobriety/abstinence requirement. Evidence of fibrosis is not required.

The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, gender identification or expression, sexual orientation, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.

**For more Hepatitis C info and downloadable content, please visit us at [Michigan.gov/WeTreatHepC](https://Michigan.gov/WeTreatHepC) and [Michigan.gov/SSP](https://Michigan.gov/SSP)**