



THE AIDS INSTITUTE

# COVERAGE GUIDE FOR HEPATITIS C TESTING

There are currently an estimated 3.9 million people living with Hepatitis C (HCV) infection in the United States. Recent Centers for Disease Control and Prevention (CDC) data demonstrates deaths from HCV have increased from 11,051 in 2003 to 19,629 in 2015—making HCV the number one infectious disease killer. However, only half of people living with HCV are aware of their infection. This highlights the need for increased testing, and linking those who are infected with HCV to treatment to be cured.

HCV is a liver disease that can range in severity from mild to lifelong and life threatening. For those with chronic infection, HCV can result in serious health problems, such as cirrhosis of the liver or even death. According to CDC, between 75% and 85% of acute HCV infections develop into chronic infections. At present, HCV is a leading cause of liver cancer, and the leading indication for liver transplantation in the U.S. HCV infection is also escalating among young persons who inject drugs, and is especially prevalent among “baby boomers” born between 1945 and 1965. Baby boomers are six times more likely to be infected than other age cohorts. Because it is often difficult to detect HCV from clinical presentation, HCV is often dubbed a “silent” epidemic with many individuals living for decades, before experiencing any indication of infection.

HCV testing is critical to identifying positive individuals and linking them to care. People living with HIV are at greater risk for acquiring HCV. About one quarter of those infected with HIV are also HCV infected. As a result of their coinfection they experience more rapid disease progression and more severe liver damage.

With the availability of treatments that can cure HCV in as little as two or three months, coupled with increased coverage options under the Affordable Care Act (ACA), now is the time to increase HCV screening. In 2013, about one third of those with HCV infection were estimated to be uninsured. Now, thanks to recommendations made by the CDC and the U.S. Preventative Services Task Force (USPSTF) in support of HCV testing and the ACA, there is greater access to insurance coverage and reimbursable HCV screening.

## **New Coverage Opportunities and the USPSTF**

- Under the ACA, millions have gained access to health coverage through Medicaid expansion, qualified health plans, and insurance reforms. Access to free or low-cost preventive services is included in this expansion.
- USPSTF, an independent government-supported body, reviews and grades preventive services. Medicare, Medicaid, and most private insurance plans are either required or incentivized to cover “A” and “B” graded services.
- In June 2013, the USPSTF issued a grade “B” [recommendation](#) for HCV screening, which includes a one-time recommended screening for “baby-boomers”, those born between 1945 and 1965, as well as periodic screening for HCV among “high risk” individuals.
- The “B” grade acknowledges the benefits of screening the “baby-boomer” population, which represents more than 75% of HCV cases in the United States, along with those who are at “high risk”, and marks a critical step forward in the fight to end the epidemic. It is now essential that medical providers implement the USPSTF recommendation and offer HCV testing to all baby boomer and high-risk patients. It is also important for clinics and health departments that provide HCV screening to bill for these services, as reimbursement reduces one barrier to HCV screening.
- The National Academies’ [National Strategy for the Elimination of Hepatitis B and C](#) report released in March 2017 determined that identifying people infected with HCV is crucial to eliminating the disease, and recommended increased testing, especially in areas with a high expected disease prevalence.

## How Each Payer Covers Preventive Services and HCV Screening

### **Private Insurance**

- The ACA requires most private insurance plans in the individual and group markets to cover “A” and “B” graded services without cost-sharing. This requirement does not apply to grandfathered plans, which are plans that existed before enactment of the ACA and that have not undergone major changes.
- All new private insurance plans, including Qualified Health Plans available on the Health Insurance Marketplaces, are required to cover periodic HCV screening for those who are “high risk,” and a one-time test for “baby-boomers,” as outlined in the USPSTF recommendation.

### **Medicaid (Traditional)**

- Traditional Medicaid can cover HCV testing in various ways, depending on whether such testing is considered medically necessary and whether a state has elected to cover preventive services without cost-sharing.
- By law, all state Medicaid programs must cover medically necessary laboratory services, including medically necessary HCV screening for adults. States can also elect to cover screening on a routine basis. Under these rules, the scope of coverage varies across states. For example, California, New York, and Pennsylvania cover routine HCV screening. In contrast, coverage in Florida is dependent on medical necessity.
- Further, the ACA incentivizes state Medicaid programs to cover all USPSTF “A” & “B” services (including HCV screening) without cost-sharing by offering the state a 1% increase in federal matching payments for coverage of these preventive services. States accepting this match must cover HCV screening for those who are “high risk” and one-time testing for “baby-boomers” under Medicaid. As of May 2017, 14 states (CA, CO, DE, HI, KY, MT, NH, NJ, NV, NY, OH, OR, WA and WI) have been approved to receive this increased funding for expanding preventive coverage, and therefore cover, without cost-sharing, HCV testing as recommended by the USPSTF.

### **Medicaid (Expanded)**

- States that expand their Medicaid program to include all those living below 138% of the federal poverty level provide additional coverage opportunities.
- Medicaid expansion plans or “Alternative Benefits Plans” are required to cover all “A” and “B” grade services without cost-sharing.
- Therefore, those “high risk” and “baby-boomer” beneficiaries enrolled in Medicaid expansion plans can receive HCV testing without cost-sharing.

### **Medicare**

- The Medicare Improvements for Patients and Providers Act of 2008 allows Medicare to cover “A” & “B” graded preventive services provided in primary care settings that receive a National Coverage Determination (NCD). The ACA removes beneficiary cost-sharing for these Medicare approved preventive services.
- In June 2014, CMS issued a National Coverage Determination based on the USPSTF recommendation for HCV testing.
- As a result, Medicare now covers one-time HCV testing for “baby boomers”, and annual testing for those baby boomers who are “high risk”.



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17 Davis Boulevard, Suite 403, Tampa, FL 33606 | PH 813 258 5929 | FX 888 714 7243  
1705 DeSales St NW, Suite 700, Washington, DC 20009 | PH 202 835 8373 | FX 888 714 7243