

MDHHS We Treat Hep C Initiative

The Michigan Department of Health and Human Services (MDHHS) has launched a public health campaign called We Treat Hep C aimed at eliminating Hepatitis C Virus (HCV) in Michigan. The goal is to treat the estimated 40,000 Medicaid beneficiaries with HCV. The initiative involves increasing the number of people who are tested for HCV, increasing the number of providers who treat HCV and expanding access to HCV curative treatments.

HCV Screening and Testing¹

The Centers for Disease Control and Prevention (CDC) have outlined universal testing guidelines as follows:

- All adults ages 18 and older should be screened for HCV at least once in a lifetime, except in settings where the prevalence of HCV infection (HCV RNC-positivity) is less than 0.1%.
- All pregnant women should be screened during each pregnancy, except in setting where the prevalence of HCV infection (HCV RNA-positivity) is less than 0.1%.
- **One-time hepatitis C testing regardless of age or setting prevalence among people with recognized conditions or exposures:**
 - People with HIV
 - People who ever injected drugs and shared needles, syringes, or other drug preparation equipment, including those who injected once or a few times many years ago
 - People with selected medical conditions, including:
 - people who ever received maintenance hemodialysis
 - people with persistently abnormal ALT levels
 - Prior recipients of transfusions or organ transplants, including:
 - people who received clotting factor concentrates produced before 1987
 - people who received a transfusion of blood or blood components before July 1992
 - people who received an organ transplant before July 1992
 - people who were notified that they received blood from a donor who later tested positive for HCV infection
 - Health care, emergency medical, and public safety personnel after needle sticks, sharps, or mucosal exposures to HCV-positive blood
 - Children born to mothers with HCV infection
- **Routine periodic testing for people with ongoing risk factors**, while risk factors persist:
 - People who currently inject drugs and share needles, syringes, or other drug preparation equipment
 - People with selected medical conditions, including:
 - people who ever received maintenance hemodialysis
- **Any person who requests hepatitis C testing** should receive it, regardless of disclosure of risk, because many persons may be reluctant to disclose stigmatizing risk

¹ "Testing Recommendations for Hepatitis C Virus Infection." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 29 July 2020, www.cdc.gov/hepatitis/hcv/guidelinesc.htm.

Prior Authorization/Medication Update

Effective April 1, 2021, the product MAVYRET® (glecaprevir/pibrentasvir) will no longer require clinical prior authorization (PA) when prescribed in accordance with Food and Drug Administration (FDA)-approved labeling. Any provider with prescribing authority will be able to prescribe MAVYRET and other Direct-Acting Antivirals (DAA) used to treat Hep C including Primary Care Providers (PCP).

PA will still be required for the following Preferred Drug List (PDL) Non-Preferred agents, with documentation explaining why the preferred agent MAVYRET cannot be used:

Epclusa™	Harvoni™	ledipasvir/sofosbuvir	sofosbuvir/velpatasvir
Sovaldi™	Vosevi™	Zepatier™	

For more information on obtaining a prior authorization for a non-preferred product, please visit: [MRx Providers | Forms \(magellanrx.com\)](https://www.magellanrx.com).

Pharmacies are authorized to dispense up to 102 days of therapy at a single time. However, many pharmacies may default to dispensing in 4-week increments, unless the prescription specifies an 8-week or 12-week supply to be dispensed at one time.

Additional Resources for Providers

- Henry Ford Health System consulting line for all health care professionals with questions about HCV treatment. Available 8 am – 5 pm daily by calling (313) 575-0332
<https://www.henryford.com/hcp/academic/medicine/divisions/id/hep-c-consult>
- Midwest AIDS Training and Education Center (MATEC) at Wayne State University School of Medicine provides on-demand webinars, live training, office hours and other resources for health care professionals treating HCV <https://matecmichigan.com/>
- Michigan Opioid Collaborative provides education and case consultation on HCV
<https://michiganopioidcollaborative.org/hep-c-treatment/>
- MDHHSMichigan.gov/WeTreatHepC
https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2955_2976_94001_105637---,00.html
https://www.michigan.gov/documents/mdhhs/L_21-21_721460_7.pdf
https://content.govdelivery.com/attachments/MIDHHS/2021/06/23/file_attachments/1861041/WeTreatHepC%20-%20Prescriber%20Resources.pdf

To support Michigan's efforts to eliminate hepatitis C, AbbVie is hosting two webinars; one will explore hepatitis C treatment in the rapidly changing Medicaid landscape, and the second will feature discussions on caring for women with hepatitis C. Presentations and discussions will be led by Elaine Engelsman, DNP, FNP-BC. The dates, times, and registration links are listed below:

- June 30, 2021 - Exploring HCV Treatment in the Rapidly Changing Medicaid Landscape (12:15 P.M.) register here: <https://abbvie.meintl.com/ExternalRsvp/Search?ProgramId=HCC05-HT30-21>
- July 22, 2021 - Caring for Women with HCV (12:15 P.M.) register here: <https://abbvie.meintl.com/ExternalRsvp/Search?ProgramId=HCC32-HT10-21>

Thank you for serving Molina Members!