



Hep C Screening Among Baby Boomers Is Inadequate, And Those With Medicaid Are Less Likely To Be Treated

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Despite guidelines calling for universal testing of hepatitis C virus (HCV) among baby boomers, testing rates remain low, with various demographic factors influencing who is screened, as well as who is treated. Researchers drew data from the Henry Ford Health System records to create a retrospective cohort of individuals born between 1945 and 1965 who were seen at 21 internal medicine clinics between July 2014 and June 2015. The study excluded those who had already been tested for hep C and those who were otherwise established as having the virus.

Findings were presented at the 2016 Conference on Retroviruses and Opportunistic Infections (CROI) in Boston.

A total of 40,561 individuals met the study's inclusion criteria, of whom 8,657 (21.3 percent) were screened.

Compared with individuals falling outside of the respective demographic groups, the following demographics were more likely to be screened for hep C by the following factors: African Americans (34 percent more likely), males (18 percent), those with electronic medical records (24 percent), those receiving care at a residency teaching clinic (20 percent), and those with a higher number of office visits (42 percent). Those with medical conditions, known as comorbidities, were 13 percent less likely to be tested.

A total of 117 (1.4 percent) of those screened tested positive for hep C. Excluding those who were acutely, or very recently, infected, the researchers found that 78 percent of those who tested positive were referred to a hep C specialist and 50 percent were successfully evaluated. Twenty-seven percent of those with hep C received treatment for the virus.

Those with Medicaid coverage were 79 percent less likely to be treated for hep C than those with other forms of medical coverage. There was also a trend toward a decrease in the likelihood of treatment among those with lower income. Those with electronic medical records were 2.73 times more likely to be treated than those without.

To read the conference abstract and poster, [click here](#).

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