



# National Viral Hepatitis Action Plan – A Path Toward Elimination

Leadership Summit on Hepatitis C Policy in Pennsylvania  
May 1, 2019



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@HHS\_ViralHep

# Vision for the United States

## The United States

will be a place where new viral hepatitis infections have been eliminated, where all people with chronic hepatitis B and C know their status, and everyone with chronic hepatitis B and C has access to high quality health care and curative treatments, free from stigma and discrimination.



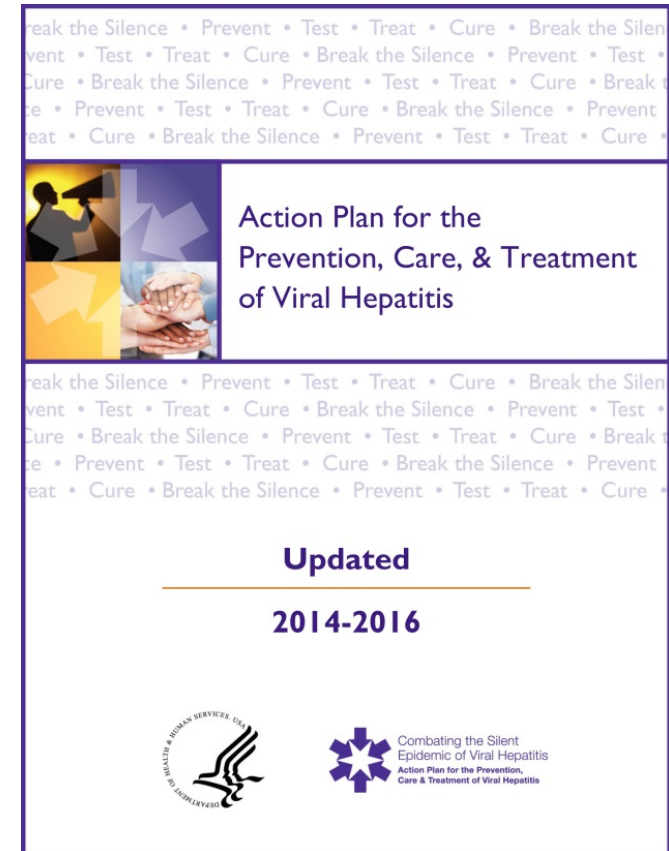
# FINAL REPORT from the Action Plan for 2014 – 2016

The National Viral Hepatitis Action Plan amplifies national efforts to eliminate viral hepatitis in the United States.

Everyone has a role to play in helping us meet our life-saving national viral hepatitis goals.

Measures included:

- % of actions initiated
- Progress toward 2020 targets



OFFICE OF THE  
ASSISTANT SECRETARY FOR HEALTH

# Federal Implementation Group Members

## U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

- Agency for Healthcare Research and Quality (AHRQ)
- Center for Faith-Based and Neighborhood Partnerships
- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare & Medicaid Services (CMS)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- National Institutes of Health (NIH)
- Office of the Assistant Secretary for Health (OASH)
- National Vaccine Program Office (NVPO)
- Office of Disease Prevention and Health Promotion (ODPHP)
- Office of HIV/AIDS and Infectious Disease Policy (OHAIDP)
- Office of Minority Health (OMH)
- Office of Population Affairs (OPA)
- Office of the Surgeon General (OSG)

- Office on Women's Health (OWH)  
Regional Health Offices (RHOs)
- Office of the National Coordinator for Health Information Technology (ONC)  
Substance Abuse and Mental Health Services Administration (SAMHSA)
- U.S. Food and Drug Administration (FDA)

## U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD)

- Office of Community Planning and Development (CPD)

## U.S. DEPARTMENT OF JUSTICE (DOJ)

- Civil Rights Division
- Federal Bureau of Prisons (FBOP)

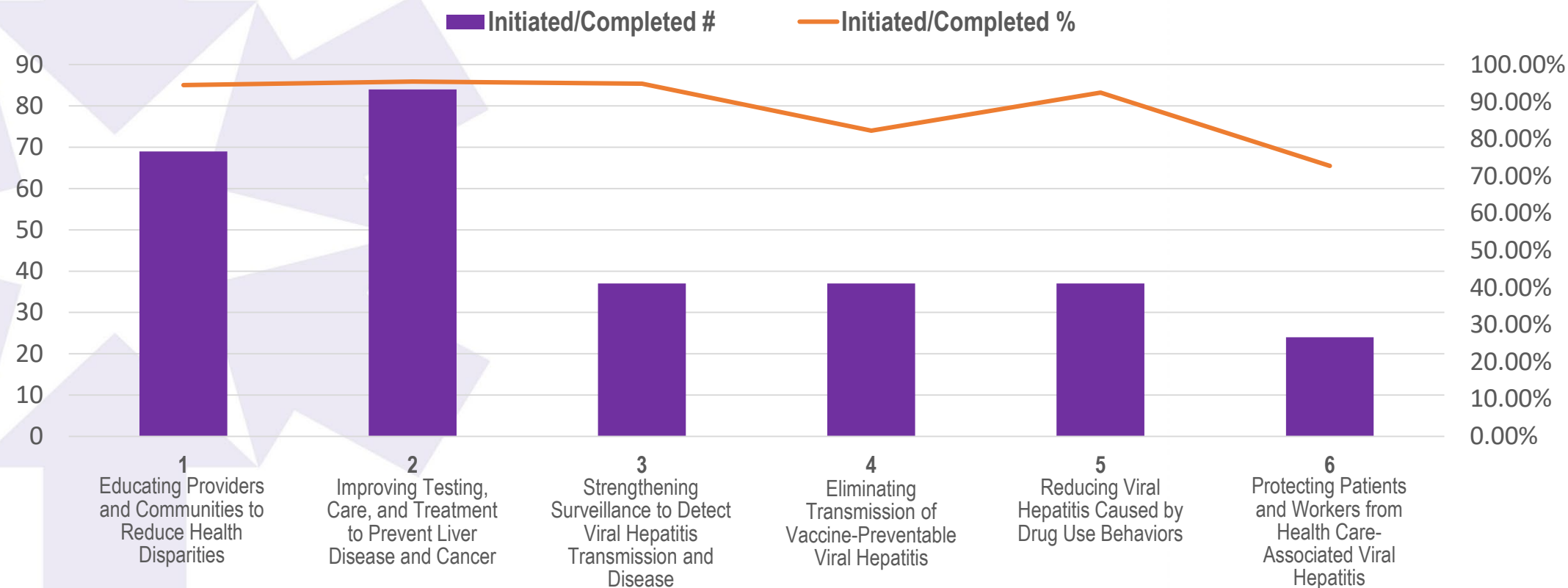
## U.S. DEPARTMENT OF VETERANS AFFAIRS (VA)

- Veterans Health Administration (VHA)



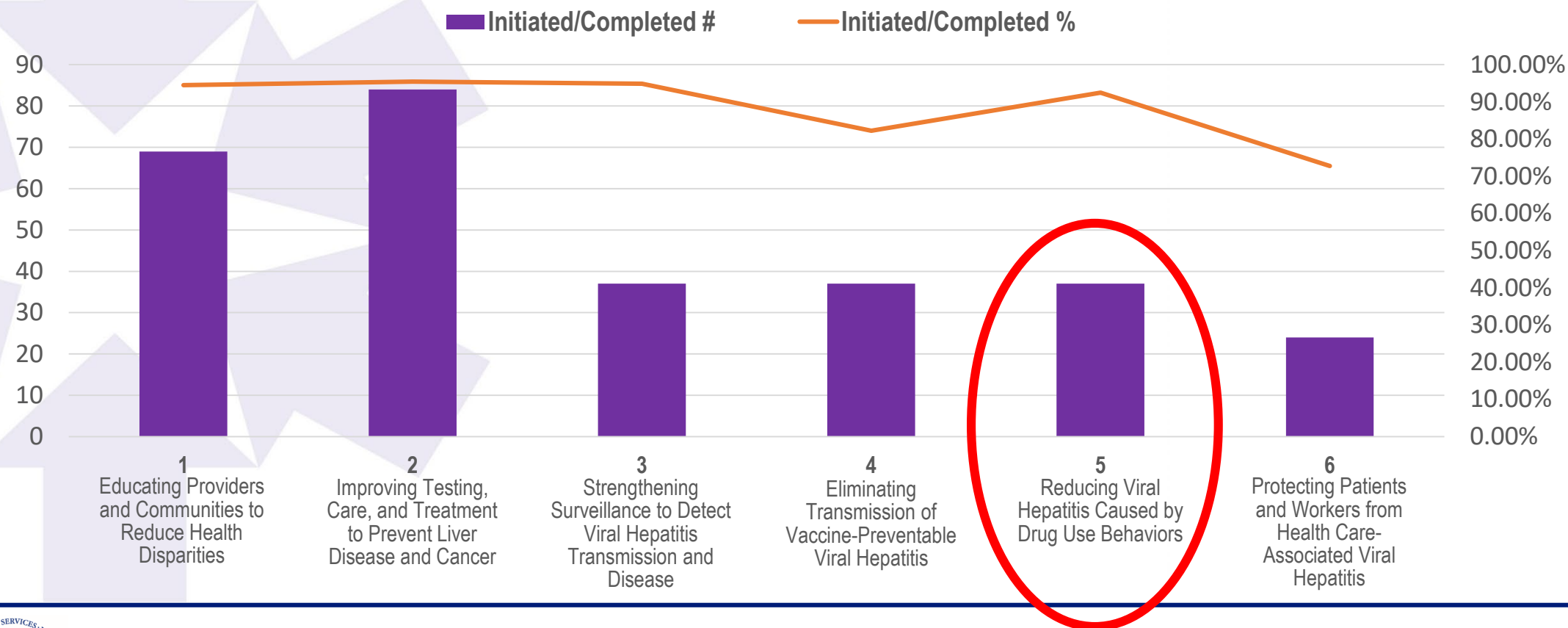
# NUMBER AND PERCENTAGE OF INITIATED AND COMPLETED ACTIONS BY PRIORITY AREA 2014–2016

The Action Plan contained a total of 318 actions due by 2016; of those, overall, 91 percent (288) were initiated/completed. The graph below illustrates initiated/completion number and rate within each of the six priority areas.








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# Monitoring Progress Toward Goals

Measure	Baseline Estimate (Source)	Year of Baseline Estimate	2016 Status	Percent of 2020 Target*	2020 Goal
<b>CORE MEASURES</b>					
<b>GOAL 1 ■ Increase the proportion of persons who are aware of their chronic HBV infection from 33% to 66%.</b>					
Proportion of persons with HBV infections who know that they are infected	<b>33%</b> (REACH Survey)	<b>2009</b>	n/a		66%
<b>GOAL 2 ■ Increase the proportion of persons who are aware of their chronic HCV infection from 45% to 66%.</b>					
Proportion of persons with HCV infections who know that they are infected	<b>45%</b> (NHANES)	<b>2010</b>	<b>59%</b> (2014)	66.7% 	66%
<b>GOAL 3 ■ Reduce the number of new cases of HCV infection by 25%.</b>					
Number of reported and estimated acute hepatitis cases in the United States	<b>1,229</b> (NNDSS)	<b>2011</b>	<b>2,967</b> (2016)	-316% 	922
<b>GOAL 4 ■ Eliminate mother-to-child transmission of HBV.</b>					
4a. Number of infants perinatally infected with HBV	<b>747</b> (NVSS)	<b>2009</b>	n/a		No cases*
4b. Hepatitis B vaccine "birth dose" coverage	<b>64.1%</b> (NIS)	<b>2010</b>	<b>73.3%</b> (2015)	56% 	85%





# Monitoring Progress Toward Additional Measures

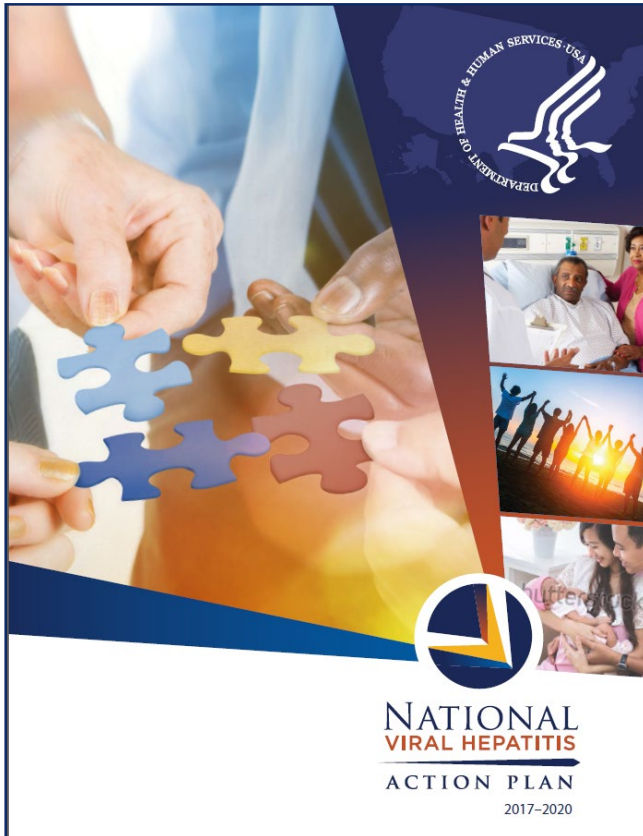
Measure	Baseline Estimate (Source)	Year of Baseline Estimate	2016 Status	Percent of 2020 Target*		2020 Goal
<b>ADDITIONAL MEASURES TO MONITOR PROGRESS</b>						
<b>MEASURE 1 ■ Reduce mortality related to hepatitis B infection.</b>						
Number and age-adjusted mortality rate of hepatitis B listed as the underlying or a contributing cause of death in the United States	<b>0.5</b> per 100,000 people; <b>1,844</b> (Ly, et al., 2013)	<b>2010</b>	<b>0.45;</b> <b>1,698</b> (2016)	10%		To be developed
<b>MEASURE 2 ■ Reduce mortality related to hepatitis C infection.</b>						
Number and age-adjusted mortality rate of hepatitis C listed as the underlying or a contributing cause of death in the United States	<b>4.6</b> per 100,000 people; <b>16,627</b> (Ly, et al., 2013)	<b>2010</b>	<b>4.45;</b> <b>18,153</b> (2016)	3%		To be developed
<b>MEASURE 3 ■ Reduce occupational transmission of viral hepatitis.</b>						
HBV vaccination among health care workers	<b>64.3%</b> (NHIS)	<b>2008</b>	<b>64.8%</b> (2015)	1.9%		90% ( <i>Healthy People 2020</i> )

\* Percentage of progress from baseline toward 2020 goal or percentage improvement if no goal has been developed.



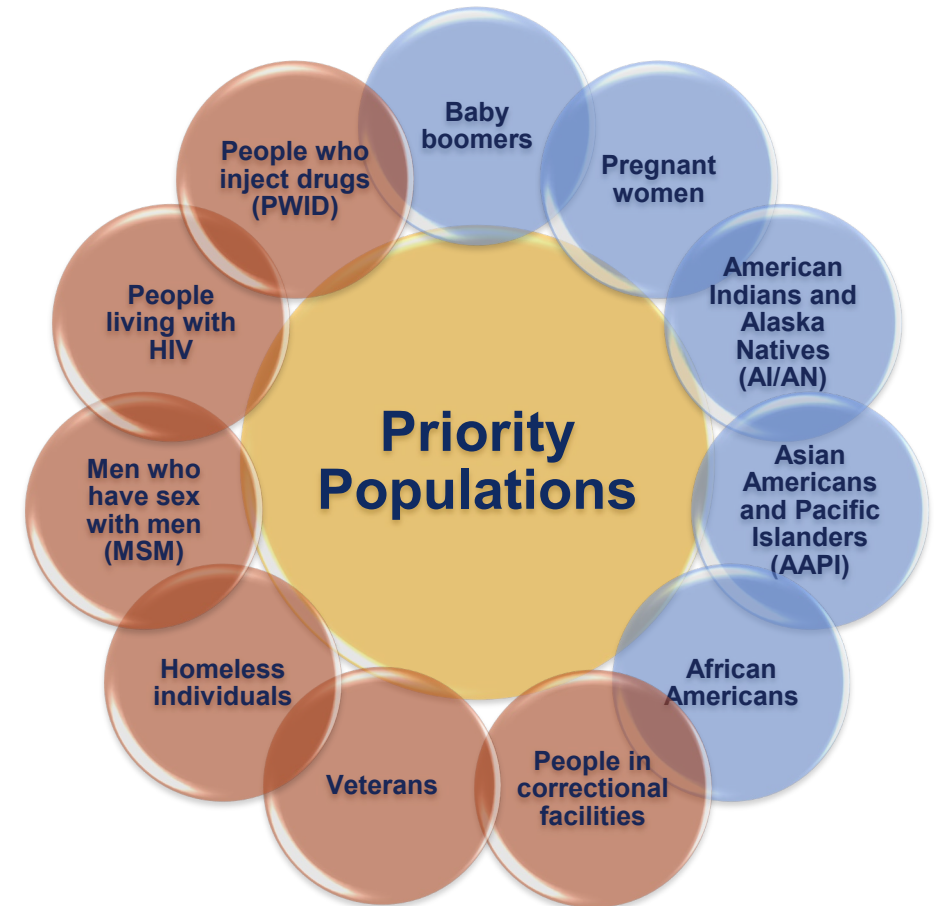


# National Viral Hepatitis Action Plan 2017 - 2020



- 4 Goals
- 17 Indicators
- 11 Priority Populations

A companion document for stakeholders: the **Partner Planning Guide** is an easy tool to support development of state/local action plans.



# National Academies Report: A National Strategy for the Elimination of Hepatitis B and C

Concluded that elimination of the public health threat of viral hepatitis (as defined by WHO 2030 targets) is possible, however, additional support and resources will be needed to do so. (2017)

2030 Targets	Incidence	Mortality	Diagnosis	Treatment
	80% reduction	65% reduction	90% coverage	80% coverage

## Assessment of United States' Attainment of WHO 2030 Elimination Targets

Table 1. Year of elimination of HCV by country or territory							
Country or territory	Year in which the WHO's 2030 target was met				Annual treatments necessary to achieve WHO's 2030 treatment target	Restrictions on treatment by fibrosis score in 2017	Year of elimination
	Incidence	Mortality	Diagnosis	Treatment			
United States	—	2022	2025	2026	106,000	Yes	—



# Assessment of Status Informs Program Areas of Need

Nationally, HCV Prevention is the main area for improvement

- Expansion of prevention efforts: education, risk reduction counseling, testing
  - Integration of services into comprehensive syringe service programs
  - Integration of services into substance use disorder programs
- Expansion of HCV treatment of people at risk to reduce transmission



# Hepatitis C Medicaid Affinity Group 2017-2019

- Approximately 2.5 million people in the United States are living with [HCV infection](#).
- A disproportionate number of these individuals receive public insurance, including Medicaid, or are in [correctional settings](#).
- One recent analysis estimated that in one year HCV infection led to:
  - More than 2.3 million outpatient medical visits,
  - More than 73,000 emergency room visits,
  - A cost of inpatient visits for one year of more than \$15 billion.
- Increasing access to screening, diagnosis and early HCV treatment for Medicaid patients can make a significant contribution toward saving lives, reducing new infections, controlling health care costs, and ultimately eliminating viral hepatitis, all goals described in the [National Viral Hepatitis Action Plan](#)
- The Hepatitis C Medicaid Affinity Group began in December 2017 with the aim of increasing the number and percentage of Medicaid beneficiaries diagnosed with hepatitis C virus (HCV) who are successfully treated and cured.



# OVERVIEW AND PURPOSE OF THE GROUP

Foster state collaboration  
and the sharing of  
promising practices

Support states in  
developing and  
implementing innovative  
HCV-related policies and  
programs

Increase the number and  
percentage of Medicaid  
beneficiaries diagnosed  
and successfully treated  
for HCV



# YEAR 1 AFFINITY GROUP ACTIVITIES

- Development and implementation of self-identified action plans
  - Calculating the HCV care cascade
  - Enhancing provider knowledge of HCV testing and treatment
  - Assessing and revising prior authorization processes for HCV medication
  - Improving treatment for people who inject drugs
- Get information and resources from this group at:  
<https://www.hhs.gov/hepatitis/action-plan/federal-response/hepatitis-c-medicare-affinity-group/index.html>



# THANK YOU!



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