

Overview of the Viral Hepatitis Federal Implementation Plan: Webinar and Public Comment

Office of Infectious Disease and HIV/AIDS Policy

November 18, 2021

1:00 - 2:00 p.m. ET



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Office of the
Assistant Secretary
for Health

Webinar Objectives

- Provide an overview of the development of Viral Hepatitis Federal Implementation Plan
- Define, provide any clarification and set expectations for the federal implementation plan
- Provide a platform for public comments

Agenda

- Welcome, Introductions
- Development of Viral Hepatitis Federal Implementation Plan
- Viral Hepatitis Federal Implementation Plan Components
- Highlight Federal Action Steps
 - CDC
 - NIH
 - SAMHSA
 - HRSA
 - IHS
- Next Steps
- Public Comment

Speakers: Federal Partners



**Chinedu Okeke, MD,
MPH-TM, MPA**
Acting Chief Medical
Officer,
HHS/OASH/OIDP



**Jessica Fung Deerin,
PhD, MPH**
Viral Hepatitis Policy
Advisor,
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**Carolyn Wester,
MD, MPH**
Director, Division
of Viral Hepatitis,
HHS/CDC



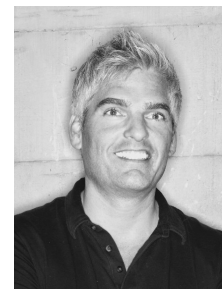
Jay Hoofnagle, MD
Director, Liver Disease
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**Kristin Roha, MS,
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Public Health Advisor
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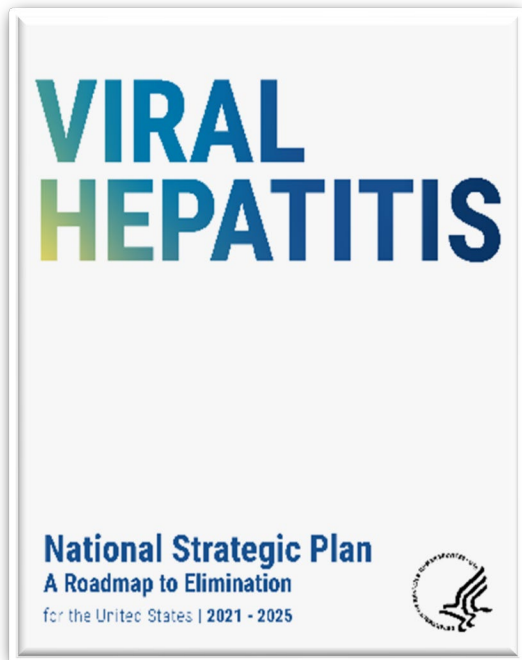


Ronald Wilcox, MD
Medical Officer,
HIV/AIDS Bureau,
HHS/HRSA



**Rick Haverkate,
MPH**
National HIV/HCV
Consultant,
Indian Health Service

Viral Hepatitis National Strategic Plan: A Roadmap to Elimination 2021-2025



VISION

The United States will be a place where new viral hepatitis infections are prevented, every person knows their status, and every person with viral hepatitis has high-quality health care and treatment and lives free from stigma and discrimination.

This vision includes all people, regardless of age, sex, gender identity, sexual orientation, race, ethnicity, religion, disability, geographical location or socioeconomic circumstance.

Goals

In pursuit of this vision, the Hepatitis Plan establishes five goals, as discussed in the Objectives and Strategies section below.



1. Prevent new viral hepatitis infections



2. Improve viral hepatitis–related health outcomes of people with viral hepatitis



3. Reduce viral hepatitis–related disparities and health inequities



4. Improve viral hepatitis surveillance and data usage



5. Achieve integrated, coordinated efforts that address the viral hepatitis epidemics among partners and stakeholders

Development of Viral Hepatitis Federal Implementation Plan

- Federal partners
- Input from public stakeholders and public comments

Federal Departments	HHS Agencies/Offices
<ul style="list-style-type: none"> • Justice • Equal Employment Opportunity Commission • Health and Human Services • Housing and Urban Development 	<ul style="list-style-type: none"> • Agency for Healthcare Research and Quality • Centers for Disease Control and Prevention • Food and Drug Administration • Health Resources and Services Administration • Indian Health Service • National Institutes of Health • Office of the Assistant Secretary for Health <ul style="list-style-type: none"> • Office of Infectious Disease and HIV/AIDS Policy • Office of Regional Health Operations • Office for Civil Rights • Office of the National Coordinator for Health Information Technology • Substance Abuse and Mental Health Services Administration

Viral Hepatitis Federal Implementation Plan Components

GOAL 1: Prevent New Viral Hepatitis Infections

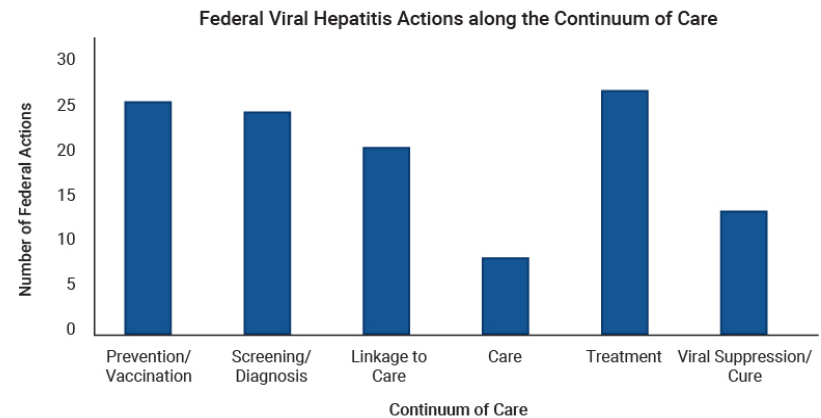
Objective 1.1: Increase awareness of viral hepatitis

Strategy 1.1.1 Implement local, state, and national campaigns to provide education about viral hepatitis, the need for vaccination, and the benefits of getting tested, treated, and cured.

Action Step	Time-frame	Agencies	Indicators	Funding Mechanism
Produce and distribute public-facing educational campaigns aimed at early detection and treatment of hepatitis C virus (HCV) for both community and clinicians.	2021-2022	IHS, ODP	3	Minority HIV/AIDS Fund
Lead, maintain, and grow existing coalitions of diverse U.S.-based public and private organizations that provide culturally responsive hepatitis B virus (HBV) and/or HCV infection education and services to priority populations (people who inject drugs [PWID], Asian/Pacific Islanders, American Indians/Alaska Natives, and non-Hispanic Blacks), thereby increasing HBV and/or HCV infection awareness, testing, and treatment.	2021-2025	CDC	5, 10	PS21-2105 (Part A)
Support campaign development and implementation	2021-	CDC	1. 2. 3. 4.	000HCVIH-

Federal Viral Hepatitis Activities along the Continuum of Care

- Federal partner activities categorized by viral hepatitis continuum of care
 - Prevention
 - Screening
 - Linkage to Care
 - Care
 - Treatment
 - Viral Suppression/Cure



Federal Partner Implementation Activity Highlights



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Centers for Disease Control and Prevention

Carolyn Wester, MD, MPH

Director, Division of Viral Hepatitis

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB
Prevention



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Integrated Viral Hepatitis Surveillance and Prevention for Health Departments



Surveillance, outbreak detection, and response

59 jurisdictions funded
(~\$200,000 each)



Elimination planning, promoting access to prevention, testing, and treatment

59 jurisdictions funded
(~\$115,000 each)



Special projects to improve access to services for persons who inject drugs (“service bundle”)

17 jurisdictions funded,
~\$263,000 each



NVHSP Objectives: 1.3, 1.4, 2.1, 2.2, 2.3, 3.2, 4.1, 5.2

Other CDC Activity Highlights



National Viral Hepatitis Education, Awareness, and Capacity Building for Communities and Providers PS21-2105



National Harm Reduction Technical Assistance and Syringe Service Program (SSP) Monitoring and Evaluation PS19-1909



Recommendations, research, and policy monitoring supporting implementation of viral hepatitis prevention, testing, and treatment



NVHSP Objectives: 1.1, 1.3, 1.4, 2.2, 2.3, 3.1, 3.3, 3.4, 5.1, 5.2

National Institutes of Health

Jay Hoofnagle, MD

Director, Liver Disease Research Branch,
Division of Digestive Diseases and Nutrition,
NIDDK



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NIH Viral Hepatitis Implementation Activity Examples

- NIH Viral Hepatitis Elimination Webinar series

NIH National Institutes of Health
Turning Discovery Into Health

NIH Webinar Series

MOVING FROM HEPATITIS DISCOVERY TO ELIMINATION

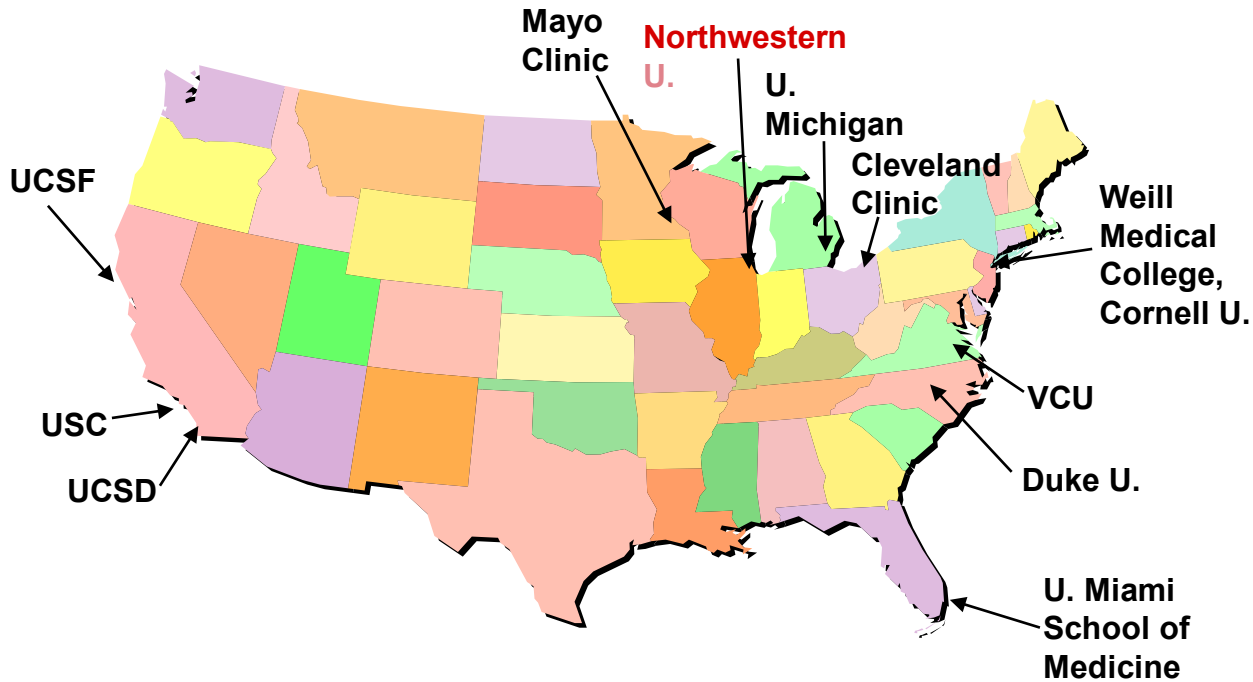
Research Advancing Hepatitis Elimination



<https://www.globalhep.org/moving-hepatitis-discovery-elimination-nih-research-advancing-hepatitis-elimination>



NIH Viral Hepatitis Implementation Activity Examples



Liver Cirrhosis Network (NIDDK, NCI, NIAAA)

Objectives:

- Establish longitudinal cohort of patients with cirrhosis
- Test new treatments, such as statin drugs, in this population



NIH Viral Hepatitis Implementation Activity Examples

SBIR NIAID TOPIC 084, PHS 2020-1
RFA-AI-20-019

- *National Institute of Allergy and Infectious Diseases (NIAID):* HBV cure research, HCV vaccine research, AIDS Clinical Trial Group
- *National Institute of Diabetes, Digestive, & Kidney Diseases (NIDDK):* Hepatitis B Research Network
- *National Institute on Drug Abuse (NIDA):* RFA-DA-17-014: HIV, HCV and Related Comorbidities in Rural Communities Affected by Opioid Injection Drug Epidemics in the United States: Building Systems for Prevention, Treatment and Control (UG3/UH3)



C3PNO

Kentucky Viral Hepatitis Treatment Study



Substance Abuse and Mental Health Services Administration

Kristin Roha, MS, MPH
Public Health Advisor for HIV



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Substance Abuse and Mental Health Services Administration

Minority AIDS Initiative: High Risk

Populations focusses on increasing access to substance use and HIV prevention services for the highest risk and hardest-to-serve racial and ethnic minority populations. Grant recipients are required to test all clients who are considered to be at risk for viral hepatitis (B and C), either onsite or through referral.

Minority AIDS Initiative: Service

Integration focuses on integrated evidence-based, culturally competent mental and substance use disorder treatment with HIV primary care and prevention services to individuals with a serious mental illness or co-occurring disorder living with or at risk for HIV and/or hepatitis in at-risk populations.

Prevention Navigator Grants provides services to those at highest risk for HIV and substance use disorders using a navigation approach to expedite services for these populations. The program's required activities includes providing opportunities for screening and testing for HIV and viral hepatitis for individuals in the community.

Targeted Capacity Expansion - HIV Program

focuses on high-risk populations including racial and ethnic minority populations and LGBTQ individuals who have a SUD or COD who are HIV positive or at risk for HIV/AIDS. Required activities for this grant program include hepatitis testing, vaccination, and referral and linkage for treatment and case management.

Health Resources and Services Administration

Ronald Wilcox, MD
Medical Officer
HIV/AIDS Bureau



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HRSA Implementation

Viral Hepatitis National Strategic Plan

Highlighted planned activities:

- In collaboration with ORHO, CDC, and SAMHSA, HRSA will develop and execute the **ORHO Regional Harm Reduction guide** and develop **regional work groups** to include regional HHS Operating and Staff divisions and other federal partners.
 - Focus of these regional work groups will (1) reframe harm reduction to address infectious disease prevention and substance use disorder (SUD), (2) support OASH on cross-government actions as part of a behavioral health framework, (3) provide leadership and coordination to and among OASH and HHS regional efforts on HR efforts, and (4) provide regional leadership in developing regional harm reduction plans.
- Provide health education, risk assessment, and screening for **pregnant women** served by HRSA's Healthy Start (HS) program to improve early diagnosis and treatment for hepatitis B and hepatitis C.
- Through the Ryan White HIV/AIDS Program (RWHAP) AIDS Education and Training Center Program (AETCs), offer training on treatment of viral hepatitis among people with HIV and assist with implementation of **treatment protocols through communities of practice** and provide access to **expert advice** to support providers with minimal experience in hepatitis treatment, especially to providers serving **racial and ethnic minority communities**.



HRSA Implementation

Viral Hepatitis National Strategic Plan

Syndemic approaches:

- Increase **workforce capacity**, through the **RWHAP AETC Program** network, by educating medical professionals on HIV care and syndemic factors such as HIV, viral hepatitis, sexually transmitted infections (STIs), sexual health, and drug use.
- Disseminate results of a study that identified states potentially at risk for an HIV or HCV outbreak and **use data to examine rural-urban differences** in (1) state-level infectious disease **surveillance, prevention** activities, and collaboration with stakeholders; (2) local health department-level activities related to preventing, preparing for, and responding to an HIV or HCV outbreak; and (3) **socioeconomic characteristics and health resources** of counties at potential risk for an HIV or HCV outbreak.
- Coordinate the **Syndemic Steering Committee** to align strategic planning efforts, indicators, and share best practices across the Viral Hepatitis National Strategic Plan, STI National Strategic Plan, and the National HIV/AIDS Strategy.



Indian Health Service

Rick Haverkate, MPH
National HIV/HCV Consultant



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INDIAN + COUNTRY ECHO



www.indiancountryecho.org

Telehealth: one-to-many

- Multiple clinics in each session
- Increases treatment capacity across entire regions
- Over 1000 HCV consults in over 20 states since inception
- Implemented via partnerships (tribal public health entity, academic center)
- Regional study found that the 50% of facilities that used ECHO accounted for over 90% of DAA prescriptions

Telehealth and hepatitis C Treatment for Indigenous Communities in the United States. *Bulletin of the Pan American Health Organization* 44 (2020): e13

Addressing the Syndemics: Clinical Pharmacists



Headline: “After HCV treatment by IHS pharmacist, patient starts a family.”



Tyler Lannoye and Neelam Gazarian

- HCV, SUD, ECHO, HIV PrEP services
- Training and support services expansion, some of which explicitly target pharmacy (e.g., SUD ECHO)
- Peer to peer sharing on emerging best practices: drug procurement options, Collaborative Practice Agreements, etc.

A Regional Analysis of Hepatitis C Virus Collaborative Care With pharmacists in Indian Health Service Facilities. *Journal of Primary Care & Community Health* 9 (2018)

Next Steps

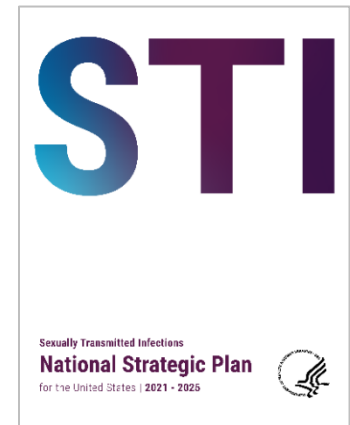
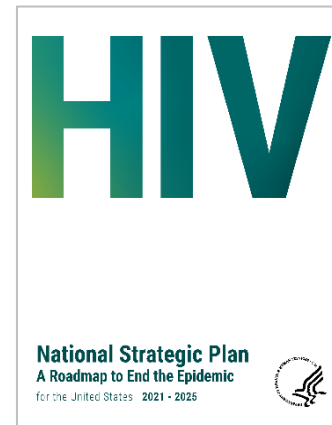
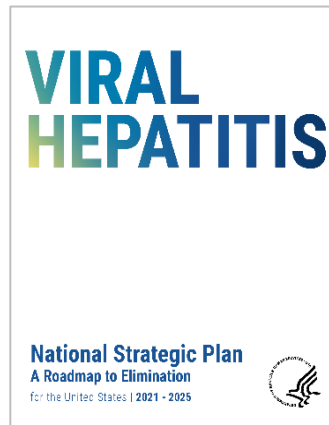


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Next Steps

- Publish final Viral Hepatitis Federal Implementation Plan
- Syndemic Steering Committee and Viral Hepatitis Implementation Working Group
 - Identify areas for collaboration
 - Facilitate cross-disciplinary funding, services, and communication
- Whole-of-society approach
- Implementation by non-federal stakeholders
- Annual Reporting



Public Comment



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Written Comment

- HepatitisPlanComments@hhs.gov
- Due November 19, 2021 by 5:00 p.m. (ET)

Guidelines for Verbal Comment

- When the public comment session opens, click on the “Raise Hand” feature in the webinar controls.
- HHS will call on each person by name in the order that their hands were raised.
- HHS will unmute your microphone when it is your turn to provide public comment.
- When it is your turn to speak, clearly state your name and organization. All speakers will be provided 3 minutes to provide comments.
- When you are done speaking, HHS will mute your microphone.



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