NYS Hepatitis C Program and Policy Overview

NYS Hepatitis C Elimination Task Force

February 8, 2019
GOVERNOR
ANDREW M. CUOMO

JULY 27, 2018 | Albany, NY

Governor Cuomo Announces First-In-Nation Strategy To Eliminate Hepatitis C

HEALTH
How do we get to elimination?

Hepatitis C

Elimination
Hepatitis C Rapid Testing Program

- 50 programs enrolled statewide
  - SEPS, CBOs, local health departments, county jails
- High impact testing targeting people who inject drugs
- HCV RNA testing is offered on site or by referral
- Conducting pilot dried blood spot (DBS) testing for HCV RNA
- In 2017, 7,105 tests were conducted
  - 832 (12%) HCV reactive/positive
  - 712 (85.6%) had an IDU risk
Screening & Referral Status at NYSDOH HCV Rapid Testing Program Locations Referring Offsite for HCV RNA: 2017

- Antibody +: 535 (11.8%)
- Referral Kept: 259 (48.4%)

<table>
<thead>
<tr>
<th>Antibody +</th>
<th>RNA Tested</th>
<th>RNA+</th>
<th>Returned for Result</th>
<th>Medical Referral Kept</th>
</tr>
</thead>
<tbody>
<tr>
<td>297</td>
<td>175</td>
<td>126</td>
<td>113</td>
<td>54</td>
</tr>
</tbody>
</table>

42.9% (54/126) of RNA+ kept medical referral

Note: Programs may offer onsite RNA testing or both on and offsite testing.
NYS Hepatitis C Testing Law

- HCV screening test be offered to every individual born between 1945 and 1965
  - Inpatient of a hospital
  - Primary care setting or
  - Services from a physician, physician assistant, or nurse practitioner providing primary care regardless of setting type
- If an individual accepts the offer and the screening test is reactive, the health care provider must offer the individual follow-up health care or refer the individual to a health care provider who can provide follow-up health care
  - The follow-up health care must include a hepatitis C diagnostic test (i.e., HCV RNA test)
- Multiple data sets were utilized for the evaluation.
- Requesting an extension beyond the 2020 sunset date
HCV Care and Treatment Initiative

- **Goals:**
  - Increase the number of people infected with HCV who get linked to care.
  - Improve HCV treatment initiation and completion rates.
- **Core activities:**
  - Linkage to care
  - HCV care and treatment
  - HCV treatment adherence
  - Retention in care
  - Supportive services
  - Peer delivered services
- **Five year initiative**
- **A total of 15 programs funded statewide**
HCV Care Cascade; April 1, 2016 to March 31, 2017

<table>
<thead>
<tr>
<th>Step</th>
<th>Count</th>
<th>Percent of RNA+</th>
<th>Percent of Previous Bar</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antibody +</td>
<td>1790</td>
<td>100.0%</td>
<td></td>
</tr>
<tr>
<td>RNA Tested*</td>
<td>1504</td>
<td>84.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>RNA+*</td>
<td>1293</td>
<td>86.0%</td>
<td>86.0%</td>
</tr>
<tr>
<td>Linked to Medical Provider†</td>
<td>1186</td>
<td>91.7%</td>
<td>91.7%</td>
</tr>
<tr>
<td>Started Treatment</td>
<td>635</td>
<td>49.1%</td>
<td>49.1%</td>
</tr>
<tr>
<td>Completed Treatment</td>
<td>569</td>
<td>89.6%</td>
<td>89.6%</td>
</tr>
<tr>
<td>Assessed for SVR</td>
<td>476</td>
<td>83.7%</td>
<td>83.7%</td>
</tr>
<tr>
<td>Achieved SVR</td>
<td>460</td>
<td>96.6%</td>
<td>96.6%</td>
</tr>
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</table>
HepCAP

- Available through all AIDS Institute funded HCV care and treatment programs
- Eligibility Criteria same as ADAP
- Services covered:
  - Initial HCV medical and treatment evaluation
  - HCV treatment monitoring
- Does not cover HCV medications
  - Assists with Manufacturer Patient Assistance Program
HCV Continuity Program

• Program for Department of Corrections and Community Supervision (DOCCS) inmates receiving treatment for hepatitis C (HCV)
• Provides a treatment completion opportunity to incarcerated individuals released from DOCCS on HCV medications
• Allows treatment to be initiated within DOCCS regardless of length of stay
• Enables inmates to receive timely referral to appropriate community-based health care providers for continuation of treatment
• Inmate participation is voluntary
Hepatitis C Clinical Guidelines

- Utilized NYS HIV guidelines’ development infrastructure
- Evidence-based guidelines
- Target audience is primary care providers
- Reflective of current treatment landscape
- Recently updated to recommend universal screening in pregnant women
NYS HCV Quality of Care Program

- A formal structure to monitor HCV quality of care within primary care (statewide).
- Designed for all primary care providers caring for and treating persons living with HCV.
- Web-based application designed to capture data and generate reports.
- Providers submit or upload data annually and can instantly generate reports of results.
Medicaid Clinical Criteria

**Current Clinical Criteria:** Confirmation of patient readiness and adherence. Provider utilizes scales/assessment tools to evaluate the readiness of the patient.

- **October 2014:** HCV Clinical Criteria Established
- **May 2016:** Removal of disease severity criteria
- **August 2018:** Removal of experienced prescriber requirement (FFS)
- **October 2018:** Removal of experienced prescriber requirement (MCO), Removal of week 2 HCV RNA testing, Extension of PA approvals to 6-months
Harm Reduction = HCV Prevention
New Harm Reduction Policies

• Medicaid reimbursement for harm reduction services

• Expansion of syringe exchange access
  – STD clinics
  – Homeless shelters
  – Local health departments
  – Promotion of ESAP by pharmacies

• Allow for limited primary care services in harm reduction settings
New Hepatitis C Elimination Initiatives
Hepatitis C Patient Navigation Program

• Goal is to increase the number of PWID who know their HCV status and are linked to medical care and treatment

• Core services
  – Outreach and enrollment
  – HCV rapid testing
  – HCV education and health promotion activities
  – Treatment readiness and adherence
  – Linkage to HCV medical care and treatment
  – Referrals and assistance in accessing supportive services
  – Supportive services

• Seven upstate Drug User Health Hubs
Innovative Models of Care
Targeting PWID

• Addresses the needs and the barriers PWID face when accessing HCV services in traditional health care settings.
• Provide HCV services in a non-traditional settings.
• Goals:
  – Increase HCV awareness and knowledge among PWID;
  – Increase HCV treatment initiation and completion rates among PWID;
  – Increase the number of PWID who are cured of HCV; and
  – Prevent re-infection among PWID who are treated and cured of HCV.
• Three (3) models statewide
• Evaluation component
Criminal Justice Initiative
HCV Expansion

• Expansion of current NYSODH AIDS Institute HIV CJI to provide pre-release linkage and navigation services to incarcerated individuals with HCV
• In-facility peer training curriculum includes modules on HCV prevention, transmission, treatment and harm reduction
• Prison Hotline to provide HCV education and support
• HCV peer video for use in facility
HCV Testing

- Infrastructure building within NYSDOH Wadsworth Laboratory to perform HCV testing
  - Dried blood spot for HCV RNA testing
  - Global Hepatitis Outbreak and Surveillance Technology (GHOST) to help identify and respond to clusters of HCV among IDU networks
- Maintenance and expansion of HCV Rapid Testing Program
HCV Research

- Collaboration with the UAlbany, School of Public Health
- Evaluation of the HCV innovative models of care
  - Acceptability
  - Feasibility
  - Cure
- Survey of PWID attending syringe exchange programs in rural areas and surrounding communities
Community Planning Grants

• Collaboration with NYS Association of County Health Officials (NYSACHO)

• Community planning grants to LHDs outside of NYC, to facilitate community planning to address the HCV epidemic.
  – Engage stakeholders, action plan development, implementation of the plan and evaluation.
Multi-media Campaign – General Awareness

- HCV stories campaign
  - Personal and provider
- TV PSA
- Digital ads
- Social media
- Print materials
  - Women
  - Treatment journal
Multi-media Campaign - Targeted Awareness

- PWID targeted
  - Animated video
  - Palm cards
  - Overdose prevention bags
- Baby boomers
  - Movie theater ads
- Promotional items targeting homeless
  - Gloves
  - Blankets
  - Hats
  - Socks
  - Backpacks
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