



Eliminating Hepatitis C in Washington State

Hepatitis C in Washington State



The Hepatitis C virus (HCV) is a public health crisis in Washington State



At the beginning of 2018, an estimated 59,100 Washingtonians were living with HCV



In September 2018, Governor Inslee issued [Directive of the Governor 18–13](#) to eliminate Hepatitis C in Washington by 2030



Together, the WA State Department of Health, WA State Health Care Authority, and AbbVie US LLC came together to develop the [Hep C Free Washington initiative](#)

Hepatitis C – Natural History

- Hepatitis C is a liver infection caused by the hepatitis C virus (HCV)
- Hepatitis C is spread through contact with blood from an infected person.
 - If someone has hepatitis C during pregnancy, they might spread it to their baby before or during delivery.
 - It is not spread through breast milk, sharing food or drink, or casual contact like hugging.
- Today, most people become infected with the HCV by sharing needles or other equipment used to prepare and inject drugs.
- Hepatitis C may be acute, but for more than half of people who become infected with the HCV, it becomes a long-term, chronic infection.
- Most people who have hepatitis C don't have symptoms, so many people don't know that they have the virus until they already have some liver damage. This can take many years.

Source: <https://www.cdc.gov/hepatitis/hcv/HepatitisCOverview.htm>

Why Hepatitis C?

Most common bloodborne infection in the United States

Rising morbidity and mortality in the aging Baby Boomer cohort (born 1945 to 1965)

Leading cause of liver cancer and leading indication for liver transplant in the US

Hospitalization costs related to the Hepatitis C Virus (HCV) in WA were \$114 million from 2010 through 2014

No vaccine to prevent HCV

Source: <https://youtu.be/wZJXfKzJ0MM>

What makes HCV elimination possible in Washington State?

- ▶ Good access to syringe service programs
- ▶ Increasing access to medications for opioid use disorder
- ▶ Committed medical providers willing to treat & cure HCV
- ▶ Academic institutions with clinicians and educators studying HCV interventions and building provider capacity
- ▶ Medicaid expansion and new Medicaid policies that make it possible to treat most beneficiaries living with HCV
- ▶ AIDS Drug Assistance Program that supports HCV treatment for people who are living with HIV and HCV
- ▶ Improving HCV surveillance and assessment efforts
- ▶ CDC support for some HCV programming and surveillance

Hepatitis C – Diagnosis and Treatment

Diagnosis

- A blood test, called an HCV antibody test, is used to find out if someone has ever been infected with the hepatitis C virus. The HCV antibody test, sometimes called the anti-HCV test, looks for antibodies to the hepatitis C virus in blood.
- A **reactive** or positive antibody test means you have been infected with the hepatitis C virus at some point in time.
- If the antibody test is **reactive** or positive, you need an additional test to see if you currently have hepatitis C. This test is called a nucleic acid test (NAT) for HCV RNA. Another name used for this test is a PCR test.

Treatment

- New medications can cure infection in >90% of patients in 8-12 weeks with few side effects

Source: <https://www.cdc.gov/hepatitis/hcv/HepatitisCTesting>

How can CHNs help?

Goal 7. Improve access to and use of clinical care and supportive services by sufficiently scaling coverage and widening the scope of community-based navigation and case management programs.

- 7.1** Develop community navigator programs to empower people who have experienced living with HCV and being cured to support members of their community living with HCV to be linked to HCV care and achieve cure.

Background: Community navigators can help people locate and access community and clinical resources, develop relationships that promote community inclusion, and support people in implementing their individualized plans for addressing HCV and related health and social service needs. Because community navigators come from the population of focus, they can provide culturally relevant services in language their fellow community members understand.

- 7.5** Develop strategies that focus on re-entry community navigators to assist people through the transition between correctional care to community care for HCV and substance use disorder treatment (e.g., the navigator could meet with a person a few weeks prior to reentry to provide connection back into community and to stay connected as they navigate to care services).

From the WA State Department of Health
[Hep C Free Washington initiative.](#)

**IT'S TIME TO
ELIMINATE
HEPATITIS C.**

Data from HCA

Each quarter, the WA State HCA provides CHPW with an updated claims-data driven report that contains those clients enrolled in CHPW who:

- have had an HCV RNA test,
- at least two claims post RNA test, not on the same day, containing diagnoses of chronic HCV, and
- have no claim for any HCV treatment since July 1, 2018.

Currently 488 members on the most current list from HCA

CHPW Internal Efforts

- All members on the list from the HCA are reached out to quarterly via an automated call using an Interactive Voice Response Script
 - Provides an opportunity for a warm hand off (connection to patient's doctor's office)
- Focus internally has been on members already engaged in case management
 - Outreach completed telephonically and via letters
 - Hard to reach population – efforts have mainly been unsuccessful
- Evaluation of efforts has been difficult – because the state is paying for some of this treatment, the treatment doesn't always show up in our claims data



Talking about Hepatitis C with Patients

[How to Talk to Your Patients About Hepatitis C](#) (includes conversation guides for communicating with patients/members about test results/linkage to care and treatment/adherence)



Resources

- [Eliminating Hepatitis C FAQ](#)
 - [Hepatitis C Patient Brochure – AbbVie](#)
 - [CDC Hepatitis C General Fact Sheet](#)
 - [CDC Hepatitis C and Injection Drug Use Fact Sheet](#)
 - [Hepatitis C Disease Information from Healthwise](#)
 - [Hepatitis C Online](#) – free educational website from University of WA Infections Diseases Education and Assessment Program
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Medicaid pharmacy policy

- ▶ Any licensed prescriber allowed to screen and treat.
- ▶ Prior Authorization not required for Mavyret.
- ▶ No sobriety requirement.
- ▶ Evidence of fibrosis not required.
- ▶ Wait time to validate chronic condition not required.

Thank you!

For questions, please contact
CHPW's Customer Service
Department
800 440-1561