MEETING HIGHLIGHTS

Meeting Date: Wednesday, December 4, 2013; 5:30pm – 7pm
Meeting Location: Philadelphia Department of Public Health, 500 S. Broad St
Organizations in Attendance: AbbVie, ACT UP, AIDS Care Group, Consortium Inc., Crosslink Medical Services, Do One Thing, Drexel School of Medicine, Drug Policy Alliance, Genentech, Gilead, Global Health Aspiration, Health Federation, Hepatitis B Foundation/Hep B United, HepTREC, Jansen, Kadmon, Merck, Milliron Associates, OraSure, Penn Presbyterian Medical Center, Pennsylvania Dept of Health, Philadelphia Department of Public Health, P-HOP/PHMC, Prevention Point Philadelphia, Temple University Hospital, US Dept of Health and Human Services, Vertex

WELCOME & INTRODUCTIONS

Forty-five people representing 27 agencies were in attendance at our final HepCAP meeting of 2013!

At the top of the meeting, Daniel Chen made an announcement on behalf of Hep B United. Sometime soon, the US Preventive Services Task Force is expected to revisit its recommendations on hepatitis B screening. HepCAP members may remember that hepatitis C screening recommendations underwent a similar review process which started at the end of 2012. After draft hep C screening recommendations were given a “C Grade”, hepatitis advocates across the country and right here in Philly wrote letters and submitted evidence that convinced USPSTF to bump their recommendation to a “B Grade.” HepCAPpers, be prepared to offer the same support to our friends in Hep B United! We'll keep you posted...

UPDATE: ACA AND HEALTH CARE REFORM IN PA

HepCAP had two special guests to help us better understand what's happening with the rollout of the Affordable Care Act, particularly in Pennsylvania. Remember these two awesome presenters as resource YOU can use if you, your organization, or your clients need more ACA information or resources.

- Kate Kozeniewski, Program Coordinator, Resources for Human Development
  o 215.951-0300 x3894
  o kate.kozeniewski@rhd.org

- Carol Rogers, Executive Director, Healthy Philadelphia
  o 215.650.2846
  o admin@healthyphiladelphia.org

You've probably seen a lot in the news about healthcare.gov. This is the website where people from PA can go to purchase health insurance. It is also called the Marketplace or the Exchange. Kate gave a great overview of the process of purchasing health insurance through the Marketplace. Kate's comprehensive slides are included at the end of the meeting highlights.

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Her presentation included information about insurance options, eligibility, the enrollment process, and resources such as Navigators.

Carol Rogers discussed some specific challenges with health care reform in Pennsylvania. One part of the Affordable Care Act gives states the option to expand Medicaid. In PA, Medicaid expansion would help insure approximately 500,000 more Pennsylvanians. Governor Tom Corbett originally decided NOT to expand Medicaid; this decision means many poor Pennsylvanians will fall into a gap that would make it difficult for them to afford insurance.

What Happens in a State that Does Not Expand Medicaid?

Traditional Medicaid

- Limited to people with very low income AND who fall into qualifying category:
  - Disabled
  - Low-income parents with dependent children
  - Pregnant women
  - Low-income children

The Gap

- People with incomes below 100% FPL, but who cannot qualify for Medicaid under current rules may be left out of reform if the state does not expand

Subsidized Private Insurance through Exchanges

- Private insurance available through exchanges:
  - Premium tax credits for people with income between 100 and 400% FPL
  - Cost-sharing subsidies for people with income between 100 and 250% FPL

Navigating the Affordable Care Act (ACA): Implementation Opportunities and Strategies for Viral Hepatitis Programs. Presented by Amy Killelea, NASTAD, on 10/24/13 for the NASTAD Viral Hepatitis Technical Assistance Meeting in Washington DC.

Carol explained that it is great that health care reform is making insurance available to more people, but described how low-income people in PA still might be left out of reform because they fall into the gap. She distributed a flyer that describes how people can advocate for the expansion of Medical Assistance in PA, which will help ensure that more people can afford health insurance.

Since the HepCAP meeting, Gov. Corbett’s administration released a 100-page proposal called Healthy Pennsylvania that would expand coverage in PA. This proposal needs to be approved by the US Department of Health and Human Services (HHS). Before it is submitted for approval, hearings will be held online and across the state to collect feedback on the plan. The Philadelphia hearing on Corbett’s proposal is set for Friday, January 3, from 10am to 1pm, at

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the Convention Center. There will also be two online hearings on Monday, December 16th and Wednesday, January 8th. If you would like to make verbal comments on the Healthy Pennsylvania plan, you must register to speak in advance (by 12/30, 12/11, and 1/3, respectively) at this website: http://www.dpw.state.pa.us/healthypa/index.htm. The website also includes instructions to submit written comments.

Thank you, Kate and Carol for sharing so much info!

C CHANGE: BRAINSTORMING BIG IDEAS FOR 2014

Alex kicked off this portion of the meeting by reviewing the announcement made at October’s HepCAP meeting. As leaders of our coalition, Stacey and Alex want to HepCAP to grow. In order to bring in resources that can help HepCAP launch some of the group’s many great ideas, the coalition needed 501(c)3 status to apply for grants. The Health Federation of Philadelphia is willing to shelter HepCAP under their umbrella as an affiliate program. This means that HepCAP can maintain autonomy, but has administrative support we need to submit grant applications. Stacey and Alex will keep the group notified of grant applications. As the coalition starts raising money, HepCAP may need to restructure to make sure that the process of raising and spending money is transparent and in the best interest of HepCAP. More details about this partnership can be found at the end of the Meeting Highlights. This will be an ongoing discussion in 2014 and Stacey and Alex would be happy to answer any questions you might have about this partnership!

In 2014, Stacey and Alex will begin holding HepCAP Chats. HepCAP members can schedule time to meet with Stacey and Alex so that the HepCAP leaders can understand why people are engaged with HepCAP, what needs related to hep C they/their agency have, and to identify what assets and strengths our members have that can help make HepCAP bigger and stronger. Stacey and Alex still have HepCAP chat appointments available on Friday, January 24th at 9am, 9:45am, or 11:15am. If you would like to meet with them, please email Alex at Alexandra.shirreffs@phila.gov with your time preference. If you would like to schedule a HepCAP Chat but are not available at those times, please email Alex and we will work out a time to chat in the future – each month we will try to make time to meet with several coalition members!

Also in 2014, Alex and Stacey want HepCAP to start thinking BIG! HepCAP was started because local hepatitis advocates recognized that hepatitis C is a public health issue that affects a lot of people, but has very limited resources. Since Philadelphia has so many resources, HepCAP was formed to encourage collaboration between organizations and make Philadelphia a leader in the fight against hep C. HepCAP has successful mobilized over 200 people from over 40 different agencies and cultivated pages of ideas from our members for how HepCAP can help improve hep C prevention, care, and support services in Philadelphia.

HepCAP has accomplished a lot in the last two years! Together we have...

- Developed an innovated education model using hep C treatment specialists to educate primary care providers about hep C testing guidelines and linkage to care
- Used our meetings as a space to highlight local initiatives like harm reduction activities at Prevention Point; testing projects being conducted by Do One Thing, the National Nursing Center Consortium, and Crosslink Medical Services; and support services being offered by organizations like MANNA

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- Have had special guests from Philly (Health Commissioner Don Schwarz), Harrisburg (Former PA Health Secretary Eli Avila), and New York (Ronnie Marks from Hep C Mentor and Support Group)
- Advocated for changes to state lab regulations that were preventing sites from being able to use the hepatitis C rapid test and for the USPSTF testing recommendations to be given an A or B grade
- Raised awareness with a Dancing Liver (thanks, Hep B Foundation!) in Love Park for World Hepatitis Day
- Kept up to date on emerging hep C treatment research through report-backs from conferences at HepCAP meetings and through monthly newsletter updates

Stacey and Alex proposed that HepCAP can make a BIG impact in Philadelphia by expanding on our primary care education idea. Stacey introduced HepCAP's big "shoot for the moon" idea. C Change will be implemented through a broad education and awareness campaign. The idea behind C Change is that making a sustainable impact against hepatitis C will require capacity building along the entire path of services someone living with hepatitis C might encounter: peers and family, social service agencies, and the medical system. The slide below shows how HepCAP could reach different communities to improve hep C testing rates, linkage to care and awareness.

Meeting participants were divided into three groups to brainstorm ideas for what sort of projects HepCAP could develop to meet its goals of improving hepatitis awareness and services among the general public, people living with hep C, and community based organizations. The following pages list the ideas HepCAP members came up with!

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What activities would help COMMUNITY BASED ORGANIZATIONS...

1) Increase awareness of hepatitis C among CBO staff in order to increase hep C education for CBO clients
2) Increase community-based testing or referral to testing and
3) Increase linkage to care for people living with hep C.

- Build capacity to do testing/rapid testing
- Prevention education
- Peer educators
- Education about the disease, provide people with reliable resources
- Funding sources
- Best practices
- Patient Navigator model development
- Trainings
- Mentorship; Peer to Peer = identify key point people at each CBO
- Big meeting – disseminate info among many different organizations
- Topics: education about treatment, linkage, insurance
- Skills building: delivering sensitive information, providing hepatitis info in a respectful and culturally appropriate manner
- Link people to resources in the community: website, small meetings, networking/mixers
- How to provide integrated messaging to clients: HIV and HCV, other diseases
- Addressing high risk populations: specific needs of specific communities
- Hep C Ambassadors
- Social Media

What activities would help PEOPLE LIVING WITH HEP C...

1) Empower and increase engagement in HepCAP and other local hepatitis efforts
2) Improve retention in care

- Logisticare (Non-emergency medical transportation)
- Evening support group
- New messaging around treatment and changes in HCV care
- Thinking outside the box/social media
- Buddy system; peer education – for patients AND providers
  o Give clinicians a chance to learn from patients’ experiences
- Incentives for going to providers; SEPTA vouchers to help people get to appointments
- Access to navigators
- Getting resources for ALL of Philadelphia
- Sponsor child care for patients seeking care
- Educate about effectiveness of NEW treatments
- Health care resources to help pay for treatment
- Support education of family members and partners
- Sensitivity training for providers – how to deliver results (patients educate providers)
- Link researchers to local HCV initiatives (lots of research happening, help connect with projects that could use help of researchers or educate community on research studies locally)
- Vaccines available for hep A and B
- Stress importance of early treatment
- Train peer educators – create best practices

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• Distribute money to support orgs that want to develop peer support
• Involve patients in PCP component of C Change – they can help educate providers
  o Have them explain what they need from providers
• Make sure patient voice is included in all trainings and materials
• Survey of people living with HCV: get more info about the patient experience and needs, get info that is representative of different groups (ex: VA, Boomers, methadone clinics, etc)

What activities would help the GENERAL PUBLIC...
1) Increase awareness of hepatitis C
2) Decrease stigma

• HCV awareness days in middle/high schools
• Talks for Baby Boomers (AARP)
• Engage with criminal justice system: formerly incarcerated, justice groups, parole officers
  o Linkage to care for prisoners
• Awareness in tattoo parlors: licensed parlors can increase non-licensed
• PCSI: use services for other infectious diseases
• Treatment can help prevent cancer, cirrhosis
• Address stigma around IDU, unsafe sexual practices
• Testing in churches: how to address linkage to care
• Support groups
• Media attention: funding vs. prevalence; lack of funding
• Normalize HCV testing
• Personal stories from people of different demographics, risk factors
• Materials from pharma (non-branded)

UPDATES & ANNOUNCEMENTS

Happy Holidays, HepCAPpers! HepCAP enters its THIRD year in 2014 and we would not be successful without the support of all you wonderful community partners. THANK YOU for being part of our coalition! We have a lot of big plans for 2014 so make sure you rest up over the holiday season.

See you in 2014 – be sure to mark your calendar for next year’s meetings (meetings are held on the first Wednesday of every other months at 5:30pm at 500 S. Broad Street):

February 5th
April 2nd
June 4th
August 6th
October 1st
December 3rd

Please contact Alex Shirreffs at 215-685-6462 or alexandra.shirreffs@phila.gov if you have edits to these notes or feedback about HepCAP.

The next HepCAP meeting will be held on Wednesday, February 5th from 5:30pm-7pm at PDPH (500 S. Broad St)
At our October HepCAP meeting, we announced a new partnership with Health Federation. As co-chairs of HepCAP, we want this coalition to lead the charge against hepatitis C in Philadelphia. To do this will require more resources to launch projects that can benefit our coalition partners and engage new partners. We sincerely feel that partnering with Health Federation is a smart move for HepCAP. Below are some answers to questions you may have about this new partnership. If you’d like to discuss this partnership in more detail, we’d be happy to set up a time to chat in more detail.

Thank you for being part of HepCAP!

Alex and Stacey

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**Why does HepCAP need 501(c)3 (non-profit) status?**

HepCAP members have generated a lot of good ideas that we can work on together as a coalition. To put ideas into action though, we need funding. Funding could support anything from food at presentations to CME credits to a local hepatitis conference. But, in order to write grants for HepCAP, we need to have 501(c)3 status. It takes a lot of money and resources to start a non-profit, so making HepCAP its own organization doesn’t make sense, especially knowing that there were existing organizations we could partner with. This brings us to the next question...

**Why did you decide to partner with Health Federation?**

There were several factors we took into consideration when selecting our non-profit partner. We wanted an organization that has the infrastructure to take in grant money and provide additional support that we might need in the future. Health Federation has a great HR team, office space, and a track record of supporting other organizations — including the Department of Public Health! We also wanted an organization that understands public health but is relatively neutral. Health Federation is the Philadelphia Performance Site of the Pennsylvania/MidAtlantic AIDS Education and Training Center and supports the city’s federally qualified health centers. Their expertise can benefit HepCAP but because they don’t have any hepatitis-specific programs, HepCAP can also remain autonomous.

**What does this partnership mean for HepCAP?**

Right now, this means that HepCAP can submit grants to foundations and corporations. When HepCAP is awarded grants, it may be necessarily to adapt the organizational structure of our coalition to ensure that the process of raising and spending money is democratic, transparent, and in the best interest of the coalition. This will be an ongoing discussion for HepCAP in 2014.
No lifetime coverage cap on out-of-pocket limits are capped.

Young adults can stay on parents' plans up to age 26.

No pre-existing condition exclusions good news for people with:

* Connect with a licensed insurance agent.
* Learn about the plans available.
* Get advice on the best plan for your needs.

The Affordable Care Act
Employer-Based Insurance

Plans

- Eligible if:
  - Net worth lower than 50% of family's income
  - Family income below 133% of federal poverty line

Plans

- Cannot have other health insurance
- Cannot have CHIP
- VA benefits
- Medicare

Who is eligible for the Marketplace:

- Make between 100-400% of federal poverty line

Jan. 1, 2014
Will not have insurance as of Jan. 1, 2014

12/10/2013
Marketplace Plans

All plans offer:
- Essential Health Benefits
- Primary care services
- Preventive and wellness services and chronic disease management services
- Laboratory services
- Prescription drugs
- Ambulatory and emergency services
- Hospitalization (such as surgery)
- Maternity and newborn care

Good news:
- There are no eligibility requirements
- Get covered by health insurance even if you are
  - Not insured
  - Not able to afford health insurance
- Mixed status families: Family members who aren’t
  - Lawfully present
  - United States citizens or lawful permanent residents

Be a U.S. citizen or be lawfully present in the United States.
Resources

- Provide assistance (not enrollment) over the phone.
- Provide in-person enrollment assistance through
  consumer centers.
- Direct connect with existing organizations and their
  consumer centers in Southeast Pa.
- RHDA's program targets ten counties in PA with the
  highest rates of uninsured people, including

Program Approach of RHDA, Navigator

- RHDA is based in Philadelphia and runs human service
  nonprofit.
- RHDA, a consumer-focused, community-based
  marketplace
- Certified navigators for the Health Insurance
  Marketplace assist people to enroll in

What is a navigator?
The project described was supported by funding from the Department of Health and Human Services, Centers for Health Care and Human Services, Centers for Medicare and Medicaid Services. This centers for services, the authors and do not necessarily represent the official views of this or any of.

We welcome you to refer consumers.

Contact us locally:

1-855-668-9536

Health Insurance Marketplace

Health Navigator Program

Resources for Human Development

ACA Resources

www.healthcare.gov
Need health Insurance?

Do you have questions? Are you confused?

RHD Navigators can help you apply for health insurance. We are here to assist you!

RHD’s Health Insurance Navigators can meet with individuals and groups to talk about how to apply and get help paying for health insurance.

Our free services are available in the following counties:

- Philadelphia
- Montgomery
- Bucks
- Chester
- Delaware
- Allegheny
- Lancaster
- York
- Berks
- Lehigh

Contact us:
www.rhd.org/navigator
healthinsurance@rhd.org
1-855-668-9536

The project described was supported by Funding Opportunity Number CA-NAV-13-001 from the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services. The contents provided are solely the responsibility of the authors and do not necessarily represent the official views of HHS or any of its agencies.
¿Usted o alguien que usted conoce necesita seguro de salud?

¿Tiene usted alguna necesidad de seguro de salud? ¿Tiene alguna pregunta? ¿Está confundido?

Los navegantes de Recursos para el Desarrollo Humano pueden reunirse con las personas y los grupos para hablar acerca de cómo las personas pueden solicitar y recibir ayuda para pagar a las nuevas opciones de seguro médico.

Póngase en contacto con nosotros.
Llamada: 1-855-668-9536
www.rhd.org/navigator
healthinsurance@rhd.org

¡Los Navegantes pueden ayudar!

Nuestros servicios gratuitos están disponibles en los siguientes condados

- Philadelphia
- Montgomery
- Bucks
- Chester
- Delaware
- Allegheny
- Lancaster
- York
- Berks
- Lehigh

El proyecto fue apoyado por número de Oportunidad CA-NAV-13-001 de la U. S. Departamento de Salud y Servicios Humanos, Centros de Medicare y Medicaid
El contenido es de la exclusiva responsabilidad de los autores y no representan necesariamente la opinión oficial de HHS o alguno de sus organismos.
Need Health Insurance?
You can apply now under ObamaCare!

It’s time to sign up for health insurance through the Affordable Care Act (ObamaCare.) Insurance coverage begins on January 1, 2014.

Who Can Get Help?

If you are a single person who makes $11,490 - $45,960 a year, (or $220 to $883 a week) you can get help to pay for health insurance under the new law.

If your family of 4 makes $23,550 - $94,200 a year (or $452 - $1,811 a week) you can get help to pay for health insurance under the new law.

Don’t miss this chance to get the health care you deserve!

To apply call 1-800-318-2596 or go to www.healthcare.gov.
Working poor and unemployed
Left out by the Governor

Shouldn’t there be help for people who make less?

If you are a single person who makes less than $11,490 a year ($220 a week), or a family of 4 who makes less than $23,550 a year ($450 a week) you are not eligible to get help to pay for health insurance in Pennsylvania. Not until the Governor agrees to expand Medical Assistance in Pennsylvania.

The new health law (Obamacare) pays for states to expand medical assistance so people who make less than federal poverty level (less than $11,490 for one person, or less than $23,550 for 4 people) can have insurance. Low income people in states all around us—NJ, NY, Ohio, Maryland—will be covered as of Jan. 1, 2014. But not in Pennsylvania! Governor Corbett has refused to expand Medical Assistance, leaving uninsured low income Pennsylvanians with nowhere to turn.

The Governor has sent a new plan for Medical Assistance to Washington for approval, but it will not start until 2015 at the earliest—and maybe later.

People can not wait for health care!

Governor Corbett should expand Medical Assistance now, so uninsured low income Pennsylvanians can get the help they need starting Jan. 1, 2014. If you think low income people in Pennsylvania should have health insurance as soon as possible, let the Governor know!

Call the Governor at 1-717-787-2500. Urge him to expand medical assistance in Pennsylvania right now. And send an email to the Governor at: RA-PWHealthyPA@pa.gov

Contact Healthy Philadelphia at 215.850.2846 or admin@healthyphiladelphia.org now.
deemed Philadelphian

a Public health problem

Mission Statement

in Philadelphia,
care, and support services
hepatitis C prevention,
improving the continuum of
collective dedicated to

1/2/10/2013
We need to change:

- Build on Phyll’s strengths
- Measure outcomes
- Leverage education
- Pilot an existing new model of locally customized
- Create unbranded and unbranded materials
- Develop a dynamic multi-disciplinary and multi-

Impact on the Affordable Care Act
- Focus on enrolling disenfranchised populations
- Addressing referrals to a broader to care
- Schooling and linkage to care programs
- Increase living with HCV and General Public
- Community
- Phyll’s career and subsequently
- Phyll’s career and subsequently
- Educational and awareness campaigns

12/10/2013