**WELCOME & INTRODUCTIONS**

Forty-one people representing 25 agencies were in attendance at our June HepCAP meeting!

**HEPCAP RECAP: HEPATITIS AWARENESS MONTH 2014**

HepCAP was all over Philadelphia in May, promoting Hepatitis Awareness month with a variety of educational events. HepCAP members presented on activities they helped host with their agencies. Thank you to all the HepCAP members who came out to attend or volunteer at May’s events – we appreciate your hard work and support!

- **May 3: Science Carnival on the Parkway.** Monika Burke described HepCAP’s 2nd appearance at the Science Carnival on the Parkway, the big wrap event for the Philadelphia Science Fest. HepCAP’s booth asked, “How do you cure a virus?” Adults received info about hep C and children got to decorate bean bag “medicines”, which they could then toss to attack a hep C “virus.” HepCAP volunteers distributed 500 “cures” on a beautiful spring afternoon! Thanks to the Hep B Foundation for bringing O’Liver to join us!

- **May 5: HCV Advocate Hep C Training.** Alex Shirreffs announced thirty-six people representing 19 agencies came to this training, hosted at the Office of HIV Planning (thanks for letting us use your space!). This training was very comprehensive but a full day might be too long to keep people’s full attention. The interest in this training suggests that there are a lot of agencies that want more hepatitis C information, suggesting that there would probably be decent interest from social service agencies if HepCAP started offering more trainings (shorter than a full-day). Thanks to Lucinda Porter from the Hep C Advocate (HCVadvocate.org) for coming all the way to Philadelphia from California!

- **May 8: City Council Resolution and Briefing; May 21-23: Hep B United National Conference.** This was Daniel Chen’s last Hep B United update to HepCAP! Many of you know Daniel as the city’s Hep B Hero, showing up at events in his B A Hero shirt and Superman cape. He has been a wonderful partner of HepCAP and has done so much to help advance the cause of hepatitis B in Philadelphia. Thanks for all your hard work, Daniel, and
good luck as you start a new chapter in DC! Luckily, Daniel gets to leave on a high note, with two great May events to brag about. First was the City Council Resolution at City Hall. Chari Cohen and Alex Shirreffs proudly accepted Hepatitis Awareness Month proclamations from City Council on behalf of Hep B United and HepCAP. But the real news is that over 50 Hep B United and HepCAP partners came out to show that Philadelphia’s hepatitis coalitions are a force to be reckoned with! With our bright green shirts, dozens of signs, and an appearance from O’Liver we definitely stood out! Pictures are included in the attached slide set! At the end of May, Hep B United also hosted a national meeting of all the HBU chapters from across the country in Washington, DC. This was a great gathering of national advocates and Philadelphia is definitely leading the way when it comes to partnerships between our hep B and hep C coalitions.

- **May 19: Hepatitis Testing Day at Prevention Point.** For Hepatitis Testing Day, Prevention Point offered clients testing, education sessions, and vaccination for hepatitis A and B. Over 100 Prevention Point clients took advantage of these services throughout the day!

- **May 22: Hep C Treatment Update with Tracy Swan.** Over 30 people came to this educational lunch session hosted by P-HOP (Philadelphia Hepatitis Outreach Project). HepCAP members who attended the event reported that Tracy was great at translating research data so that a diverse set of participants could understand it. This event was another example from the month of community based orgs turning out for more hep C information. How can HepCAP keep filling in the knowledge gaps in Philadelphia?

Slides featuring pics from these events will be posted with the Meeting Highlights on hepCAP.org!

**HEP C DATA: COMPARISON OF CONFIRMED AND UNCONFIRMED ANTIBODY-POSITIVE HCV CASES IN PHILA**

For over a year, Drexel MPH student Christine Witt worked with PDPH’s Hepatitis Surveillance team. Her Master’s project, presented to HepCAP, compared cases reported to the health department that did not have a confirmatory HCV result with cases that had both an antibody and confirmatory test. Conclusions from her project indicated:

- Demographic and risk factor profiles were not indicators of whether an HCV patient would receive the confirmatory test.
- Provider facility and provider type did differ between individuals who did and did not receive the confirmatory test.
- In addition, far fewer antibody-only cases were informed of their HCV test results or referred to a specialist than controls. Potential reasons:
  - Patients were unaware they were tested
  - Providers were unable to contact patients
  - Providers were waiting for a follow up appointment
  - Providers were waiting for RNA test results

Christine’s findings highlight a need to educate providers on the importance of confirmatory testing and of initiating and maintaining provider-patient communication. There is also a need to raise patient awareness around HCV testing and follow-up. Christine’s presentation generated a

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good discussion about hepatitis C reporting requirements and the process of interviewing newly reported cases. Slides featuring pics from these events will be posted with the Meeting Highlights on www.hepCAP.org!

POLICY UPDATES

USPSTF: B Grade for Revised Hep B Recommendations! This is great news for Hep B advocates because it means that testing for high-risk populations is considered a recommended preventive service; Medicaid and other insurance plans will likely provide no-cost screenings to risk populations as a result of USPSTF’s recommendation (as was the case with the updated hep C recommendations). Under these recommendations, high-risk populations include:

- People who were born in countries where hepatitis B is common
- U.S.-born people who were not vaccinated against hepatitis B when they were babies and whose parents came from
countries where hepatitis B is common
- People with HIV infection, who have a weakened immune system, or are being treated for kidney failure with dialysis
- Injection drug users
- People living with or having sex with people infected with hepatitis B
- Men who have sex with men

- A summary of these recommendations can be found here:
- A consumer fact sheet on the recommendations is here:

Good Samaritan/Naloxone Bill (PA). Since hepatitis C disproportionately affects people who inject drugs, HepCAP feels it is important to lend support to harm reduction-oriented legislation that supports the health and well-being of drug users. Variations of Good Samaritan and Naloxone legislation have been moving through the PA legislature for several months. Since the HepCAP meeting on June 4th, PA Senator Pileggi has pushed through Senate Bill 1164. An amended version of the bill, which extends naloxone access to friends and family of drug users, is currently waiting for vote in the PA House. It is unclear if this bill will be voted on before state legislators break for summer.

- Stay updated on action steps you can take on this legislation by following the PA Overdose Prevention Action Network on Facebook:
  - https://www.facebook.com/PAODAction
- More information about Overdose Prevention policies can be found here:
  - http://www.drugpolicy.org/drug-overdose
  - http://harmreduction.org/issues/overdose-prevention/

Hep C Testing Bills:

National: H.R. 3723, the Viral Hepatitis Testing Act, would authorize $80 million over three years to expand targeted hepatitis B and C testing and linkage to care services. Passage of this legislation would demonstrate the commitment of Congress to fight the viral hepatitis epidemic and would help advance the goal of the Viral Hepatitis Action Plan to increase the number of people who know they
have chronic hepatitis B or C.

- Find details on how to support this bill here:
  - [http://nvhr.org/content/action-alert-take-two-actions-support-viral-hepatitis-testing-act](http://nvhr.org/content/action-alert-take-two-actions-support-viral-hepatitis-testing-act)

**Pennsylvania**: House Bill 2003 - *An Act providing for hepatitis C testing and treatment and for duties of the Department of Health* - has moved into the PA Senate. The group discussed some of the pros and cons of this legislation.

- **Pros**: Raises awareness of hepatitis C; part of a national movement of similar legislation; emphasizes the importance of hepatitis C screening guidelines for Baby Boomers and other risk populations
- **Cons**: Does not have funding attached – without funding there is no way to promote testing guidelines, evaluate the impact of the bill, or enforce the mandate; does not include any sort of education, awareness, or evaluation component; in other states similar bills have drawn opposition from medical associations, which are the sort of groups we need to be on board with hep C testing
  - Ex: “House Bill 2003 is well-meaning legislation intended to aid in the detection of Hepatitis C. However, the Pennsylvania Medical Society (PAMED) opposes this bill because of its policy to oppose legislation that mandates elements of the physician/patient relationship.”

While HepCAP leadership does not want to oppose a bill that does help raise awareness about hepatitis C, there was some agreement in the room that HepCAP could send a letter expressing the coalition’s concerns with the current bill. Part of the challenge is that no bill with funding attached is likely to pass through the legislature; however HepCAP thinks it is important that legislators understand the challenges of testing more people and linking infected individuals to care. There was a discussion about sending out a summary of HepCAP’s concerns to coalition members and letting individual agencies/organizations decide if they want to sign on to a letter to PA legislators.

- Text of the bill can be found here:

**CMS and VA policies on new HCV meds.** Hepatitis C advocates are watching closely to see how insurance companies manage coverage of the newest hepatitis C drugs. This agenda items generated a lot of feedback from clinicians in the room, many of whom have had to go through a time-consuming appeals process to get patients’ Simeprevir/Sofosbuvir regimens covered by insurance companies. They are also reporting that some of the insurance companies are starting to get stricter about labwork and other tests that are required before they will approve treatment coverage. Many of the clinicians feel like the requirements are particularly discriminatory against people with a history of drug use. HepCAP discussed convening a clinicians meeting soon to have a more detailed discussion of reimbursement issues and to develop action steps.

- Stay up to date on the latest HCV Treatment Guidelines!
- Recent national reports and guidelines of note:
  - The Oregon Report (Sofosbuvir for the Treatment of Hepatitis C and Evaluation of the 2014 AASLD Treatment Guidelines; this report is being used by the Assoc. of State Medicaid Directors to justify limiting coverage of new HCV medications):

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