



NVHR's Response to the Hidden Casualties of the Opioid Epidemic

March 14, 2018 By [NVHR](#)

On March 8, 2018, NVHR participated HHS's webinar, Hidden Casualties: National Partners' Response to the Opioid Epidemic and Infectious Diseases. Below is a transcript of NVHR's portion of the webinar.

The National Viral Hepatitis Roundtable (NVHR) is a national coalition with more than 500 members ranging from volunteer-led grassroots groups to large national advocacy partners. We also build relationships with healthcare providers, state and local health departments, and other government and industry partners to work together to eliminate hepatitis B and C in the U.S.

Our policy priorities include work at state and federal levels to increase access to hepatitis B and C prevention, testing, and treatment. We include a focus on expanding access to hep C treatment in the criminal justice system, which is particularly relevant given the criminalization of drug use. We also advocate for expanded access to syringe and harm reduction services as well as linking people who use drugs to hepatitis screening, hep B vaccination, and treatment and ongoing healthcare.

We advocate for increased funding to CDC's Division of Viral Hepatitis, which currently receives an inadequate \$34 million annually. We recently joined over 90 partner organizations in calling for an additional \$100 million dollars in appropriations to allow DVH to better respond to hepatitis B and C. We work to protect Medicaid and the ACA by providing public comment and action alerts to bring attention to the importance of our healthcare safety net for those living with or at risk for hepatitis B and C.

A highlight of NVHR's policy work has been the Hepatitis C State of Medicaid Access project in partnership with Harvard Law. We provided a comprehensive review of state Medicaid restrictions on access to hep C treatment by looking at policies regarding liver damage, sobriety, and prescriber requirements. You can find more details, including the grades and maps, on our interactive website: www.stateofhepc.org

Despite the important public health potential of a cure for hep C and the opportunity to eliminate this disease, many state Medicaid programs continue to limit access – these limitations run counter to clear guidance from CMS and the treatment guidelines of the leading medical societies. We are pleased to note that at least 16 states have lowered their restrictions in the months since

the publication of our report. However, these changes have mostly come in the form of dropping disease severity requirements and many of the restrictions related to sobriety and prescriber limitations have remained in place or improved only modestly.

These restrictions are the types most likely to block progress in addressing the hidden casualties of the opioid epidemic, as they bar access to hep C treatment for individuals who are currently or recently using drugs and those who reside in rural communities with less access to specialty providers. Please contact us at info@nvhr.org to join us in advocacy efforts to improve access to hep C treatment in your state.

In our program department, we offer capacity building and technical assistance to partner organizations in the community and healthcare providers working to increase routine screening and linkage to care for individuals at risk for or living with hep C. We provide educational webinars on topics such as the success of routine hep C screening in Emergency Department settings and on the recent increases in hep C among pregnant women and infants which have occurred in parallel to the opioid epidemic.

We also convene working groups for clinicians and publish fact sheets, including a recent series highlighting the variety of hep C-related health conditions that may occur outside the liver. We also offer mini-grants to community partners working on the frontlines to address hep C in a variety of settings, including homeless services, syringe exchanges, and prisons.

Finally, a few words about one of our signature programs working to address barriers to hep C care faced by individuals who use drugs. Our [More than Tested, Cured project](#) has worked with three grassroots partners to engage folks who use drugs to identify the barriers and define the solutions to improve access to hep C care. We've worked directly with drug users to develop appropriate educational materials and worked with syringe exchange programs and local healthcare providers to better understand the barriers to hep C care and develop the solutions to expand access.

NVHR is very proud of our work to support community-driven and drug user-led solutions to hep C and we believe our findings will continue to have national implications.