

Hepatitis C Elimination Progress in Kentucky

KDPH Viral Hepatitis Program

October 2023

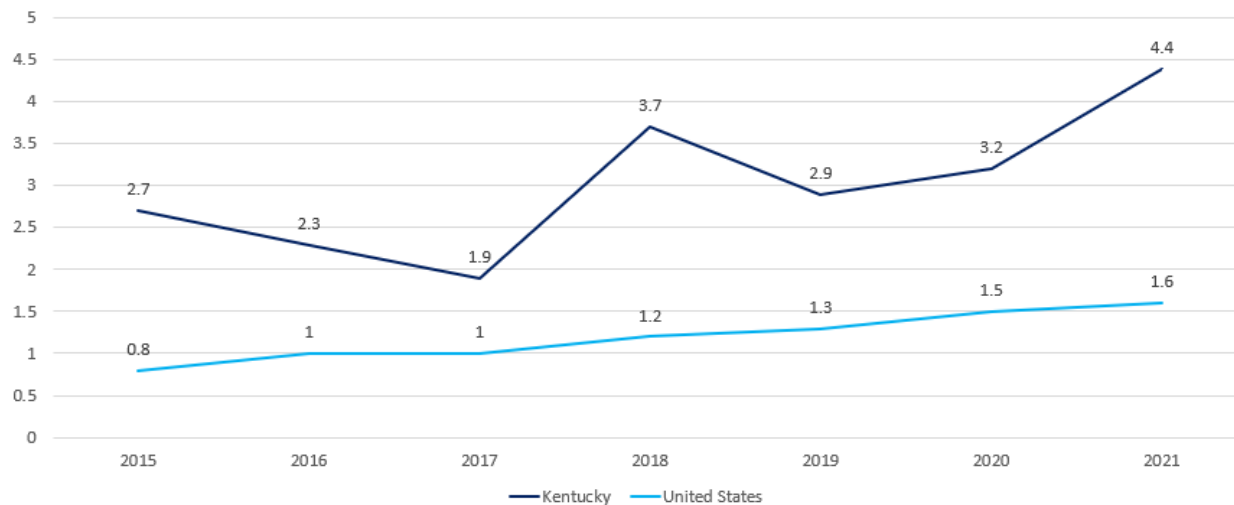


Executive Summary

- 🛡️ Hepatitis C (HCV) remains a major concern in Kentucky.
- 🛡️ Elimination efforts are underway by entities throughout the Commonwealth.
- 🛡️ Vital partners do the work to make elimination goals achievable.
- 🛡️ Social determinants of health beyond clinical care must be considered.
- 🛡️ There is work still to be done to accomplish elimination goals.
 - Significant investment is needed at the local, state, and national levels.
- 🛡️ Anyone and everyone can be involved to make their communities healthier.

Hepatitis C in Kentucky

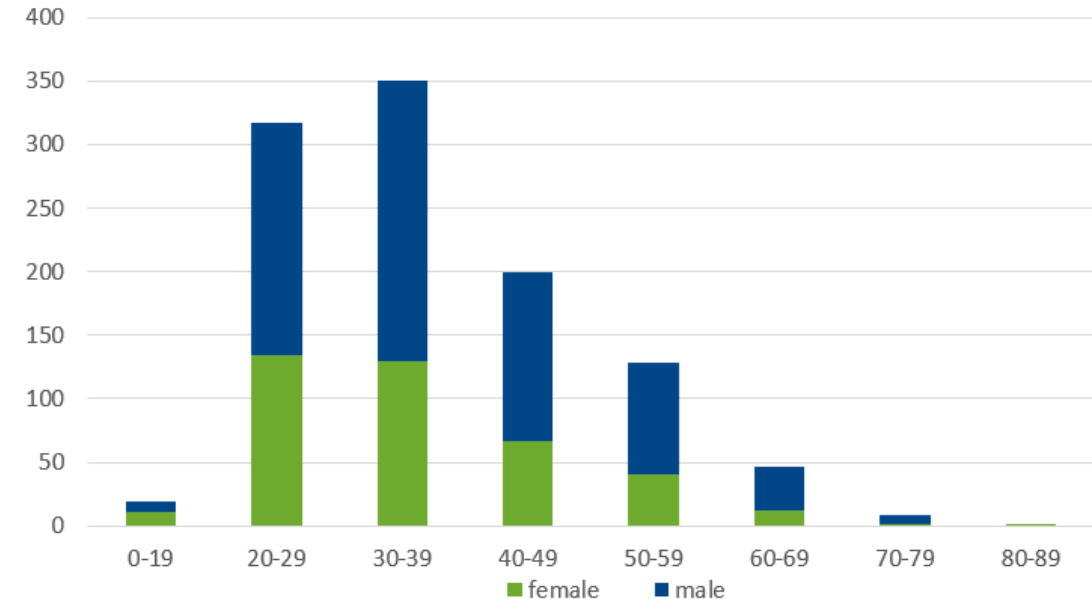
United States and Kentucky,
Acute Hepatitis C Rates, 2015-2021



In Kentucky, the 30-39 age group reports the highest incidence, while 20-29 is not far behind. The population for new cases is very young.

KY is ranked as one of the top states most affected by HCV. The rate of acute HCV has consistently been well above the national average, and this has largely been driven by use of nonsterile injection equipment.

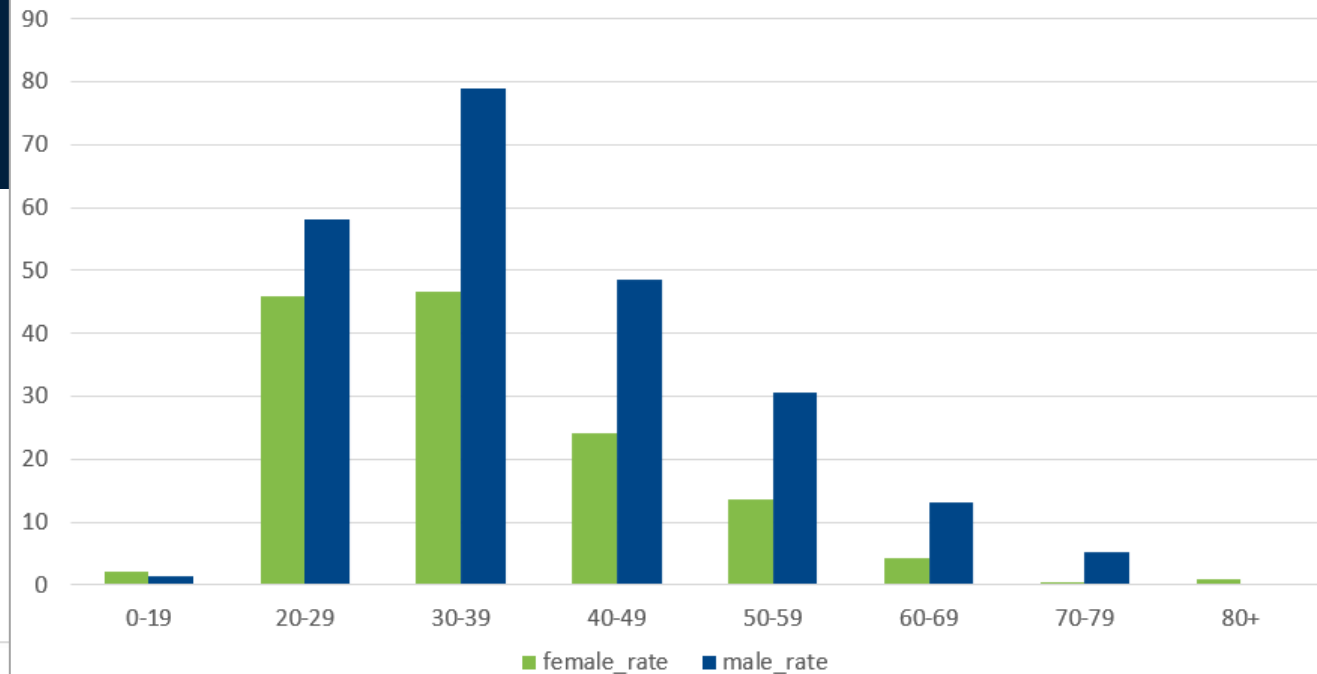
Case Count by Patient Current Gender and Age Group,
Kentucky 2015-2021



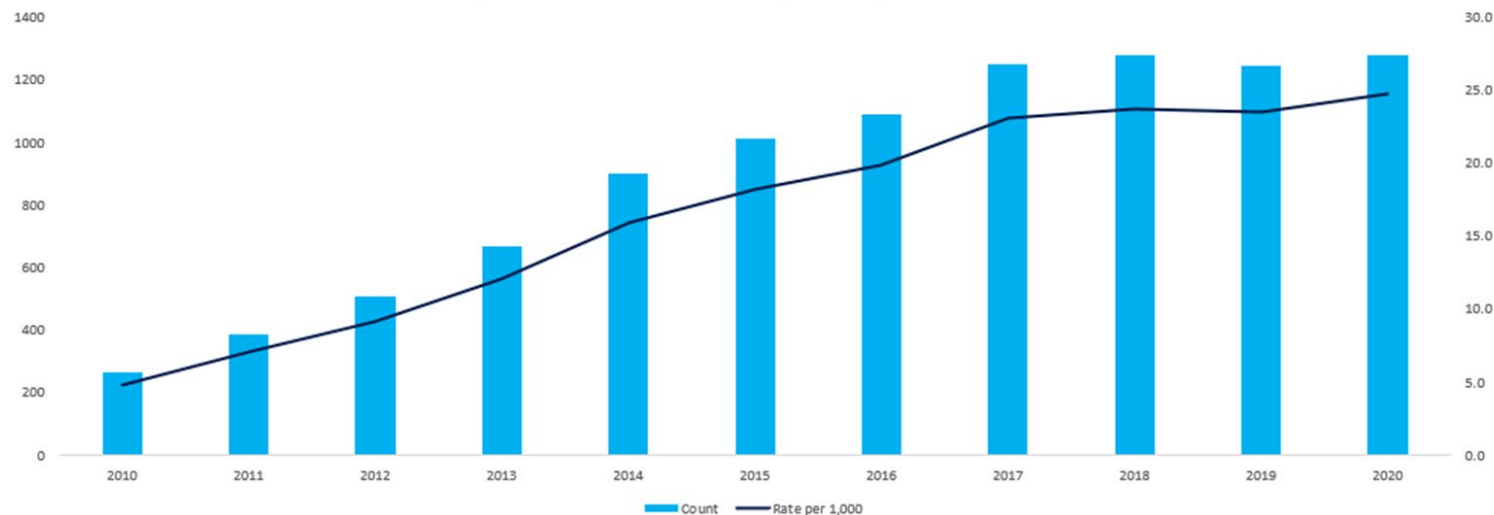
HCV in Kentucky

Furthermore, the gender gap is smallest in the 20-29 age group, indicating a high proportion of individuals of child-bearing potential who are living with HCV.

Case Rates by Patient Current Gender and Age Group, Kentucky, 2015-2019



Reported Hepatitis C Status of Mother among Kentucky Resident Births, 2010-2020



The rate and count of individuals with HCV giving birth has steadily increased.

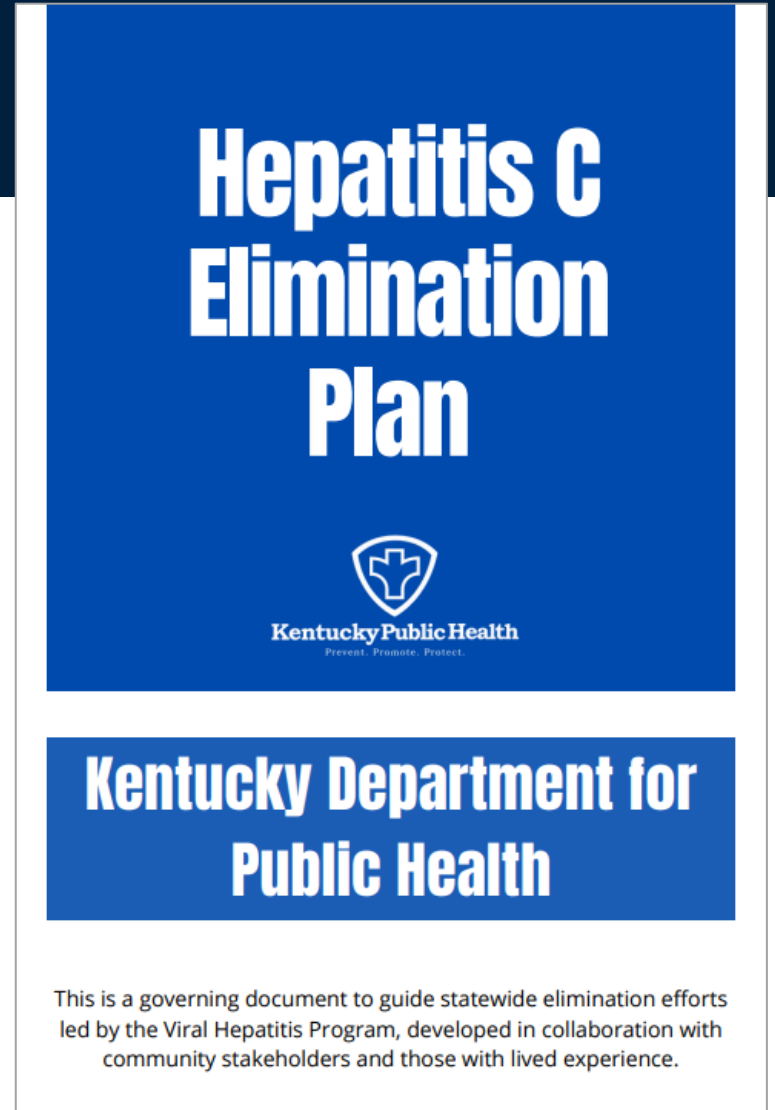
The most frequently reported risk factor is injection drug use.

Elimination Efforts

The Kentucky HCV Elimination Plan was released August 2022. It was the first comprehensive statewide strategy.

Goals

- ① Prevent New Hepatitis C Infections
- ② Promote Comprehensive HCV Testing and Treatment for Overall Improved Health Outcomes
- ③ Improve Hepatitis C Surveillance and Data Usage
- ④ Approach Hepatitis C Elimination in the Context of the Syndemic of Viral Hepatitis, HIV, Other Infectious Diseases, and Substance Use Disorders




[HepatitisCEliminationPlan.pdf \(ky.gov\)](https://chfs.ky.gov/agencies/dph/dehp/idb/Documents/HepatitisCEliminationPlan.pdf)

<https://chfs.ky.gov/agencies/dph/dehp/idb/Documents/HepatitisCEliminationPlan.pdf>

Advocacy and Awareness

The Viral Hepatitis Program has engaged in efforts to raise awareness about the implications of hepatitis C in Kentucky and educate communities about prevention and elimination strategies.

 **YouTube**


SSP Site Visits

Site Visit Locations

- Locations:
 - Northern Kentucky (Campbell County)
 - Carter County
 - Graves County
 - Louisville (Jefferson County)
 - Barren River
- Staff, participant, peer interviews
- Gift cards for participants

Play (k) [video player controls]

Hepatitis VLC: Engaging Non-Traditional Partners and People with Lived Experience...

 **NASTAD1992**
293 subscribers

Subscribe

<https://www.youtube.com/watch?v=nQ0wSTU2INc>



Proclamation
by
Andy Beshear
Governor
of the
Commonwealth of Kentucky



To All To Whom These Presents Shall Come:

WHEREAS, The hepatitis C virus is prevalent in Kentucky communities, being in the top three states with highest rates for much of the last decade; and

WHEREAS, Effective antiviral treatments are available, making hepatitis C a curable disease; and

WHEREAS, Treating people with hepatitis C infection decreases likelihood of others being infected, making it a successful prevention strategy; and

WHEREAS, The Kentucky Department for Public Health is partnering with the U.S. Centers for Disease Control and Prevention, clinical, behavioral, and social service providers, professional organizations, local public health and community organizations and corrections to promote awareness and elimination of hepatitis C;

NOW, THEREFORE, I, ANDY BESHEAR, Governor of the Commonwealth of Kentucky, do hereby proclaim July 25-29, 2022, as

HEPATITIS C ELIMINATION WEEK
in Kentucky.

DONE AT THE CAPITOL, in the City of Frankfort the 11th day of July, in the year of Our Lord Two Thousand Twenty-Two and in the 231st year of the Commonwealth.


ANDY BESHEAR
GOVERNOR


Michael G. Adams
Secretary of State



Equity

Hepatitis disproportionately affects populations. Current and planned elimination projects remain consistent with our values including a focus on equity, priority populations, and harm reduction principles. Disparities experienced among those dealing with substance use, incarceration, racism, housing instability, and poverty are unacceptable.

“The Office of Health Equity at the Kentucky Department for Public Health supports this strategic plan in its efforts to be intentional in addressing the disparities that exist among specific demographics in our state. This also includes the disparities seen by geography and other structural and institutional barriers and challenges that impact prevention and treatment. Recognizing how this disease impacts different populations in different ways provides a platform for utilizing a multipronged approach in ensuring equitable treatment outcomes and access to care.”

Kentucky Department for Public Health Office of Health Equity
<https://www.chfs.ky.gov/agencies/dph/oc/Pages/heb.aspx>

Priority Populations

- People who use drugs (PWUD)
- Incarcerated individuals
- Historically excluded racial and ethnic populations
- Baby boomers
- Pregnant/parenting persons
- Children in foster care
- People with prior HCV infection
- Rural communities

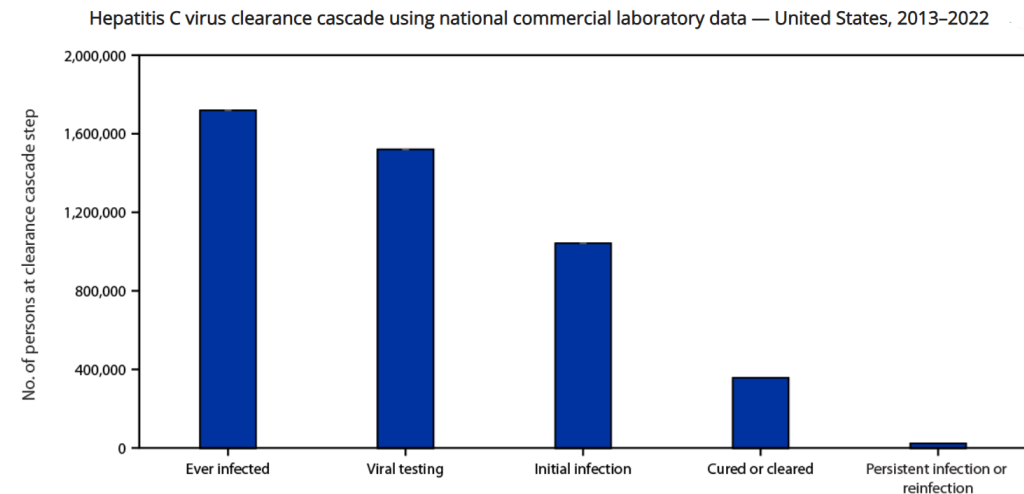
Implementation

Many projects are in progress. Some of the more comprehensive endeavors include:





- Surveillance Enhancement
- Hepatitis Outbreak Planning
- Perinatal Efforts
- Multi-level Correctional Projects
- Medicaid Policy

Surveillance Enhancement

- 🛡️ We have increased capacity of the surveillance teams by filling 2 vacant epidemiology positions this year.
- 🛡️ A survey to assess the data needs of partners throughout the state is underway.
 - This survey will help inform our surveillance strategy, including regularly published, public reports and other data products
- 🛡️ Many projects are in the works to improve surveillance and data usage.
 - Clearance Cascade
 - Chronic surveillance tool
 - Electronic Case Reporting
 - Clearer reporting guidance
 - Adult Hepatitis B surveillance



Hepatitis Outbreak Detection and Response Planning

-  We are in the process of developing a comprehensive outbreak plan which will include Hepatitis A, B, & C.
-  A work group meets monthly. Members represent: KDPH HIV, HAI, Reportable Disease, VPD, Preparedness, Harm Reduction, Regional Epidemiologists, Kentucky Primary Care Association, UK Infectious Disease, UK KIRP, UK Specialty Pharmacy, Walgreens Specialty Pharmacy, VA, Immunize KY Coalition
-  We have obtained technical assistance from national organizations and consultation with other jurisdictions and CDC experts.
-  We are working to develop protocols, secure funding, and initiate HCV genomic sequencing (in partnership with Division of Laboratory Services) to better identify outbreaks and deploy rapid response.

Perinatal Efforts

Funding from SETNET/ELC Project W

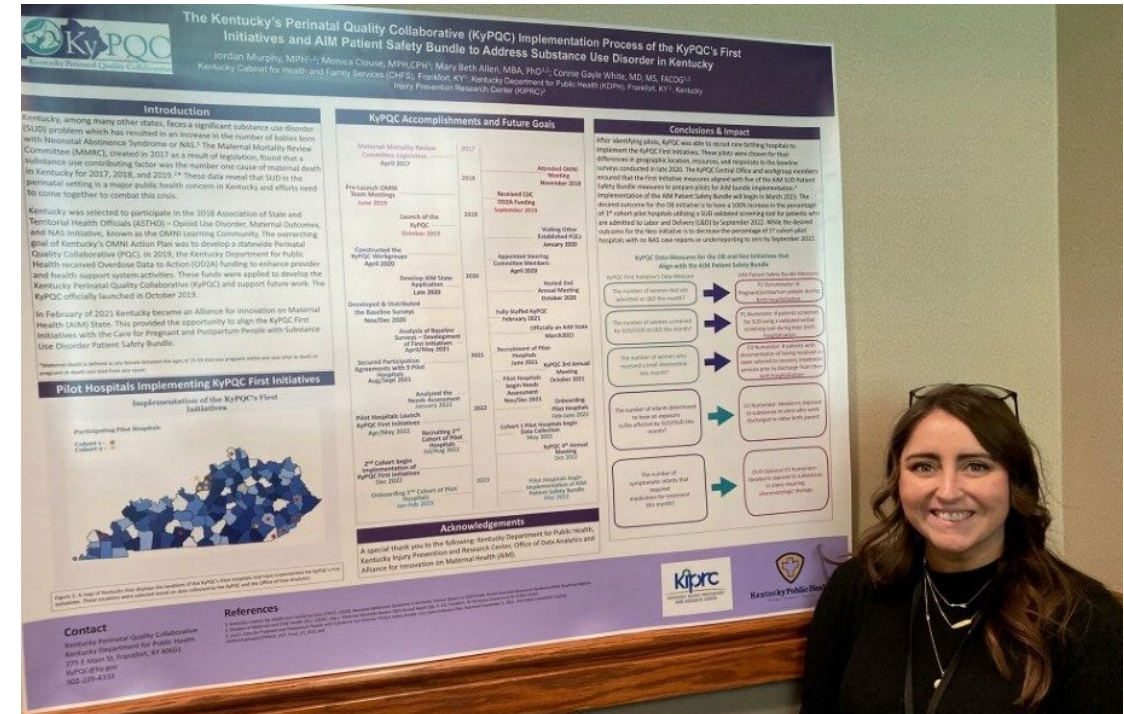
- Hired Perinatal Epidemiologist
- Two Student Interns

Projects:

- Assess appropriate testing for exposed children
- Linking lab data, birth certificate data, and Gentrack data
- Determine risk factors of mothers
- REDCap of perinatal cases
 - Goal to use for linkage to care
 - Using NEDSS¹ to identify cases

Future Projects






- Partnership with KyPQC²
 - Participate in a KyPQC Webinar
 - Partner with KyPQC Workgroups
- Training Videos
 - NEDSS Investigations, DDE³ forms, EPIDs⁴



Correctional Strategies

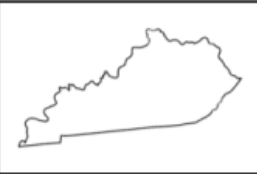
Incarcerated individuals experience a disproportionate amount of HCV. Strategies for HCV care within prisons and jails are needed, including enhanced infrastructure/support system for treatment (provider/staff education), more testing/education inside facilities; linkage/reentry navigation upon release; partnerships with organizations working with released individuals.

Accomplishments:

-  Strengthened partnership with Kentucky Department of Corrections (DOC)
 - 340B collaboration, including educational and surveillance components
-  Viral Hepatitis Corrections Workgroup
 - Bimonthly meetings
-  Partnerships to increase testing, linkage, and treatment
 - KDPH Harm Reduction Program, UK KIRP, Healthy Re-entry Coalition of Kentucky
-  Broader KDPH/DOC meetings and collaborations
-  Collaboration with HIV Branch for jail survey (HCV testing, treatment, referrals) and other areas

Medicaid Policy

- Areas of concern: Prior Authorization requirement; Re-treatment restrictions; unclear or unsupported denial of care
- Opportunities to increase access to care: [1115 Waiver](#); case management
- Technical Assistance from national experts; consultation with other jurisdictions
- Work group to be initiated

Hepatitis C: State of Medicaid Access Report Card	
Kentucky	
	
Grade	Recommendations to Improve Patient Access
B	<ul style="list-style-type: none">Remove prior authorization for HCV treatment.Remove retreatment restrictions related to substance use.Remove additional restrictions as described below.

<https://stateofhepc.org/wp-content/uploads/2021/05/Kentucky-June-2022.pdf>

Nationally Recognized Progress of Elimination Efforts

HEPELIMINATION

Hep Elimination, a National Evaluation of States' Capacity for Viral Hepatitis Elimination, is an advocacy tool to bring awareness to policymakers, public health agencies, and communities about a broad range of key considerations for elimination.

Implementation strategies have moved Kentucky further in the effort to eliminate HCV.

January 2022

KENTUCKY
CAPACITY RUBRIC
TOTAL GRADE: 26 / 55 POINTS

C

[VIEW THE GRADING SCALE](#) [Open All / Collapse All](#)

I. STATE VIRAL HEPATITIS ELIMINATION PLAN DEVELOPMENT
(0 / 5 POINTS)

In this section we assess whether a jurisdiction has drafted a publicly available viral hepatitis plan that is current and reflects the priorities outlined in the HHS Viral Hepatitis National Strategic Plan and the World Health Organization's goals to eliminate hepatitis by 2030.

Does the state have a viral hepatitis elimination plan? ¹	0 / 3 points
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October 2022

KENTUCKY
CAPACITY RUBRIC
TOTAL GRADE: 34 / 55 POINTS

B

[VIEW THE GRADING SCALE](#) [Open All / Collapse All](#)

1 State Viral Hepatitis Elimination Plan Development (4 / 5 POINTS)

In this section we assess whether a jurisdiction has drafted a publicly available viral hepatitis plan that is current and reflects the priorities outlined in the HHS Viral Hepatitis National Strategic Plan and the World Health Organization's goals to eliminate hepatitis by 2030.

Does the state have a viral hepatitis elimination plan? ¹	3 / 3 points
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<https://eliminatehep.org/>

Vital Partners- Doing the Work

This progress is not possible without countless partners throughout Kentucky who are “on the ground” every day working to eliminate HCV in our communities.

A few of these tireless individuals from dedicated organizations are highlighted next. They include:



UK KIRP Target4 Program staff

<https://kirpky.com/>



Local Health Department (LHD) and Syringe Services Programs (SSP) staff

<https://www.chfs.ky.gov/agencies/dph/dehp/hab/Pages/kyseps.aspx>

Barren River District

HCV testing occurs onsite at SSPs and through outreach at many different locations.

“We have been able to provide outreach testing at our local LifeSkills facilities, Hart County Jail, Brightview, YouTurn, Drug Courts in Allen, Monroe, Simpson, and Warren, Behavioral Health Group, Live the Proof, Spero Health, and walk-in testing availability at our local health departments as well as community events at many different locations in the Barren River District. We have a great relationship with the GI Clinic at TJ Samson. Traci Anderson, APRN, has been a great asset for referring HCV positive clients for treatment via telehealth. We also use the UK HealthCare Bluegrass Clinic for referrals of HCV positive clients.”



“Our peer support specialist from LifeSkills, Tim Russell, has been invaluable to the testing and harm reduction services we provide clients. Every program should utilize peer support.”

Graves County

In far western Kentucky, KIRP and LHD staff work to eliminate HCV in their community. HCV testing is offered via outreach in Marshall, McCracken, Graves, and Calloway Counties. Furthermore, HCV education is provided at a rehabilitation center in Fulton County. This is particularly effective as it decreases the stigma associated with HCV as well as the myths and misinformation that persist.

At the Graves County SSP, when an HCV test comes back reactive and the client is ready, the nurse, Alicia, does a venipuncture onsite to confirm an active infection. Then, a call is made to KentuckyCare to set up an appointment with the client. If transportation is an issue, they try to arrange it with the mobile van, peer support, Medicaid, or any other available resource.

“I think the biggest thing is when we test individuals that have been IV drug users, now in recovery, and they have never been tested because ‘they just know they have it’. When you are able to do outreach testing and provide them with that result – whatever it is. We make that referral and connection. I enjoy the conversations I have with people. I thoroughly enjoy educating and reducing stigma.”

“We know that it is important to treat individuals in active use because if someone uses after them, they won’t get HCV. Our clients are also so good about staying engaged in our program to obtain sterile equipment.”



The partnership with KentuckyCare has been one of our biggest successes in treating people with HCV. It started as networking and a conversation because I could not find anyone without a 6-month waitlist AND they wanted the clients to be in sobriety for 2 years. KentuckyCare started providing peer support services during covid because everyone else just wanted to do virtual. As you know sometimes in person, especially peer support, is just better.



Pike County

In Eastern Kentucky, housing instability has become an increasingly prevalent concern for many individuals at highest risk for HCV and related issues.

Rapport is being built as basic needs are taken care of. In addition, harm reduction staff are leading up to HCV testing with education and counseling.

In a sober living house, an individual who would otherwise be homeless states that most residents were homeless or would be homeless without this resource. This individual explained to harm reduction staff that “all they ever wanted” was a Barbie but were always too poor to have one. They made this bread tie ‘Barbie’.



Harm reduction staff deliver supplies to a homeless encampment.



A veteran lives in this encampment. He requested naloxone, condoms, educational material, and any other harm reduction supplies to share in their community. This individual gathers used needles and burns them.

Looking Forward

- 🛡️ Continue and expand implementation projects; Work toward initiatives not yet started.
- 🛡️ Syndemic focus: work to integrate efforts wherever possible as a multi-epidemic approach to improve equitable outcomes.
- 🛡️ A National Hepatitis C Elimination Program has been proposed. The three-pronged approach focuses on point-of-care diagnosis, medication access, and a comprehensive public health infrastructure to enable elimination. We are following this closely.

VIEWPOINT

A National Hepatitis C Elimination Program in the United States

A Historic Opportunity

Rachael L. Florence, MSc, PhD
Executive Office of the President, The White House, Washington, DC.

Francis S. Collins, MD, PhD
Executive Office of the President, The White House, Washington, DC.

One of the most dramatic scientific achievements of the last few decades has been the development of direct-acting antivirals (DAAs) that can cure hepatitis C in more than 95% of people infected. But 9 years after the first such treatment was approved in the United States, the simple 8- to 12-week oral cure is not reaching a significant fraction of the more than 2.4 million US residents chronically infected with hepatitis C.¹ More than 15 000 US residents die of hepatitis C every year unnecessarily. In its fiscal year 2024 budget proposal, the Biden-Harris administration has put forward a bold 5-year pro-

Among those diagnosed, hepatitis C treatment coverage is far below what is needed to achieve elimination goals. Only about one-third of people diagnosed with hepatitis C who have private insurance, Medicare, or Medicaid get treated, and the proportion is probably even lower for those without insurance.⁴ This is in part due to current restrictions, such as requirements for patient sobriety, requirements to document evidence of liver fibrosis, and the restriction of access to treatment only to those seen by specialists, that have been put in place by public and private insurers in reaction to the high

<https://pubmed.ncbi.nlm.nih.gov/36892976/>




Be a Part of Eliminating Hepatitis C in Kentucky

Interested in Being Involved?

We encourage anyone who would like to be part of the larger hepatitis coalition, any working groups, or who is interested in any project or topic concerning hepatitis B or C to contact us.

Gratitude

Special thanks to:

-  Partners throughout the Commonwealth including those with lived experience, for your tireless pursuit of better health for all Kentuckians.
-  NASTAD for technical assistance and resources; jurisdictions throughout the U.S. whom we have reached out to for help.
-  CDC Project Officers for support and guidance

References and Resources

- 🛡️ [Together We Can Eliminate Hepatitis by 2030 | Eliminate Hep](https://eliminatehep.org/)
<https://eliminatehep.org/>
- 🛡️ [Kentucky | Hepatitis C: State of Medicaid Access \(stateofhepc.org\)](https://stateofhepc.org/)
- 🛡️ [KDPH Health Equity Branch - Cabinet for Health and Family Services \(ky.gov\)](https://www.chfs.ky.gov/agencies/dph/oc/Pages/hep.aspx)
<https://www.chfs.ky.gov/agencies/dph/oc/Pages/hep.aspx>
- 🛡️ KHAMP- Kentucky Hepatitis Academic Mentorship Program <https://kyrha.org/khamp>
- 🛡️ [NASTAD](https://nastad.org/) <https://nastad.org/>
- 🛡️ Integrated Viral Hepatitis Surveillance and Prevention Funding for Health Departments https://www.cdc.gov/hepatitis/policy/2103_CoAg.htm
- 🛡️ Fleurence RL, Collins FS. A National Hepatitis C Elimination Program in the United States: A Historic Opportunity. JAMA. 2023;329(15):1251–1252.
doi:10.1001/jama.2023.3692

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KDPH Viral Hepatitis Program Website:

[Viral Hepatitis Program - Cabinet for Health and Family Services \(ky.gov\)](https://chfs.ky.gov/agencies/dph/dehp/idb/Pages/vhp.aspx)

<https://chfs.ky.gov/agencies/dph/dehp/idb/Pages/vhp.aspx>



Kentucky Hepatitis C Elimination Plan: [HepatitisCEliminationPlan.pdf \(ky.gov\)](https://chfs.ky.gov/agencies/dph/dehp/idb/Documents/HepatitisCEliminationPlan.pdf)

<https://chfs.ky.gov/agencies/dph/dehp/idb/Documents/HepatitisCEliminationPlan.pdf>