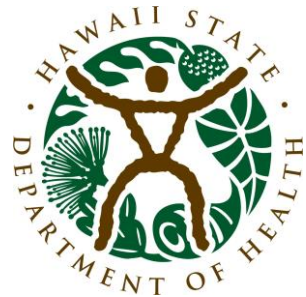


# HCR 205 Briefing

HEPATITIS ELIMINATION IN HAWAI'I



HepFree  
2030

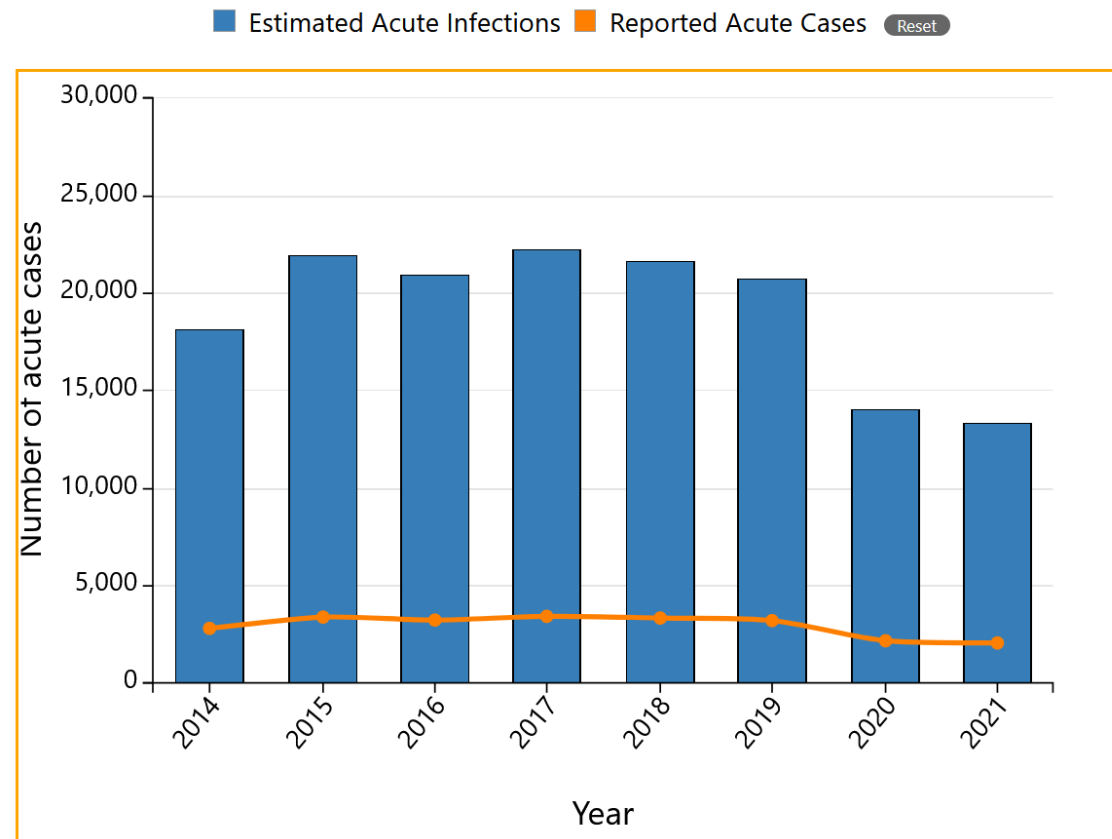
# Hepatitis in Hawai'i

**TIMOTHY MCCORMICK (HE, HIM)**

DOH HARM REDUCTION SERVICES BRANCH

HepFree  
2030 

# Hep B Burden in US, 2021



<https://www.cdc.gov/hepatitis/statistics/2021surveillance/index.htm>



# Hep B Burden in US, 2021

In 2021, the rate of newly reported chronic hepatitis B was **14x higher among non-Hispanic Asian/Pacific Islander persons** than among non-Hispanic White persons

<https://www.cdc.gov/hepatitis/statistics/2021surveillance/index.htm>

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# UNIVERSAL HBV VACCINES

April 2022

CDC now recommends all adults ages 19–59 years get vaccinated against hepatitis B

## Facts about hepatitis B



Spread through contact with blood and body fluids



Causes liver failure and liver cancer



Vaccination prevents infection

## Who should get a hepatitis B vaccine?



All infants and unvaccinated children



All adults ages 19 through 59 years **\*NEW\***



All adults ages 60 and older with risk factors



Talk to your healthcare provider about hepatitis B vaccination

[bit.ly/mm7113a1](https://bit.ly/mm7113a1)

MMWR

HepFree  
2030 

# UNIVERSAL HBV SCREENING

March 2023

**Update:** All adults should be tested at least once for hepatitis B. Have you been tested?

- Hepatitis B infection can cause liver cancer and early death
- Most people with the virus don't know they have it
- Treatment is available — **schedule your screening today**

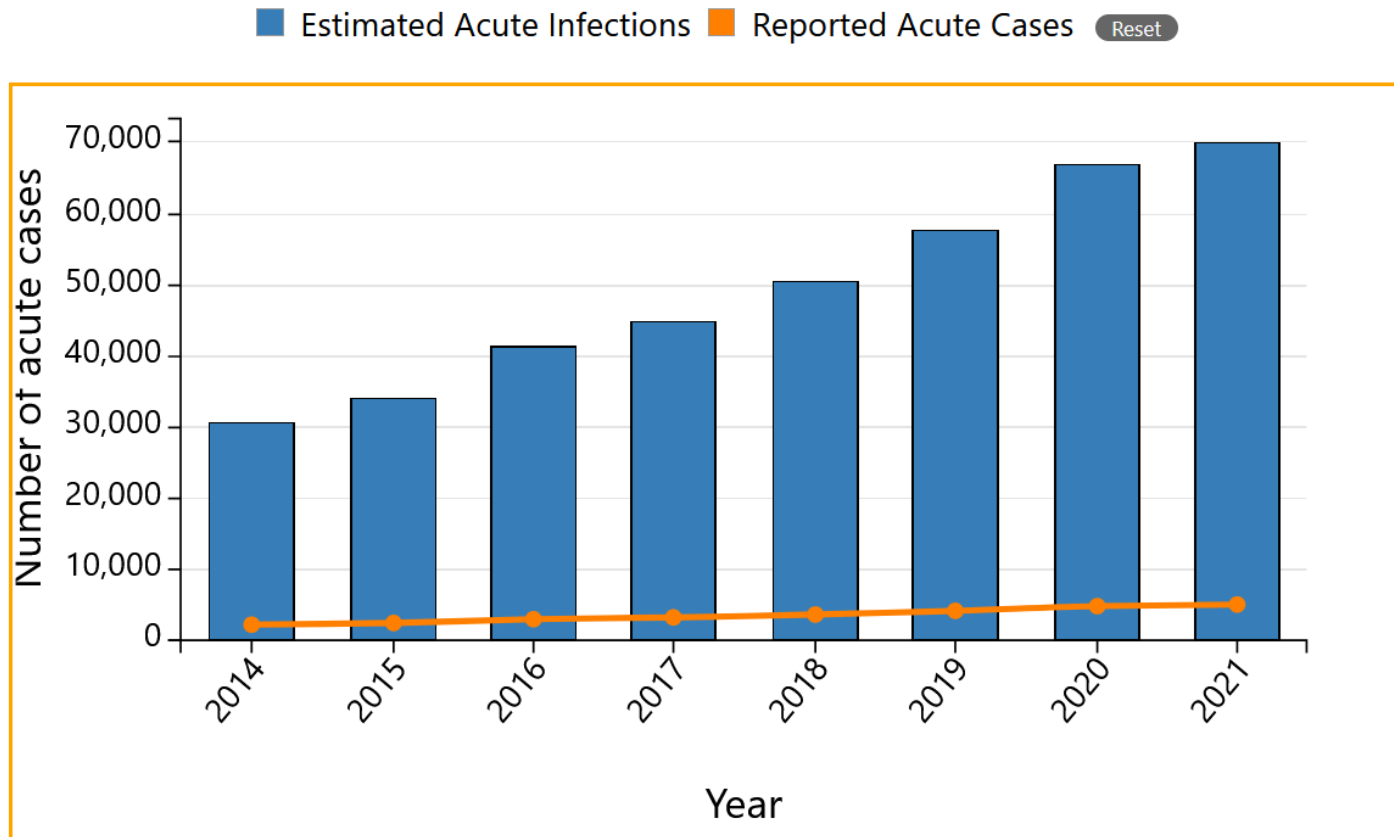


[bit.ly/rr7201a1](https://bit.ly/rr7201a1)  
MARCH 10, 2023

MMWR

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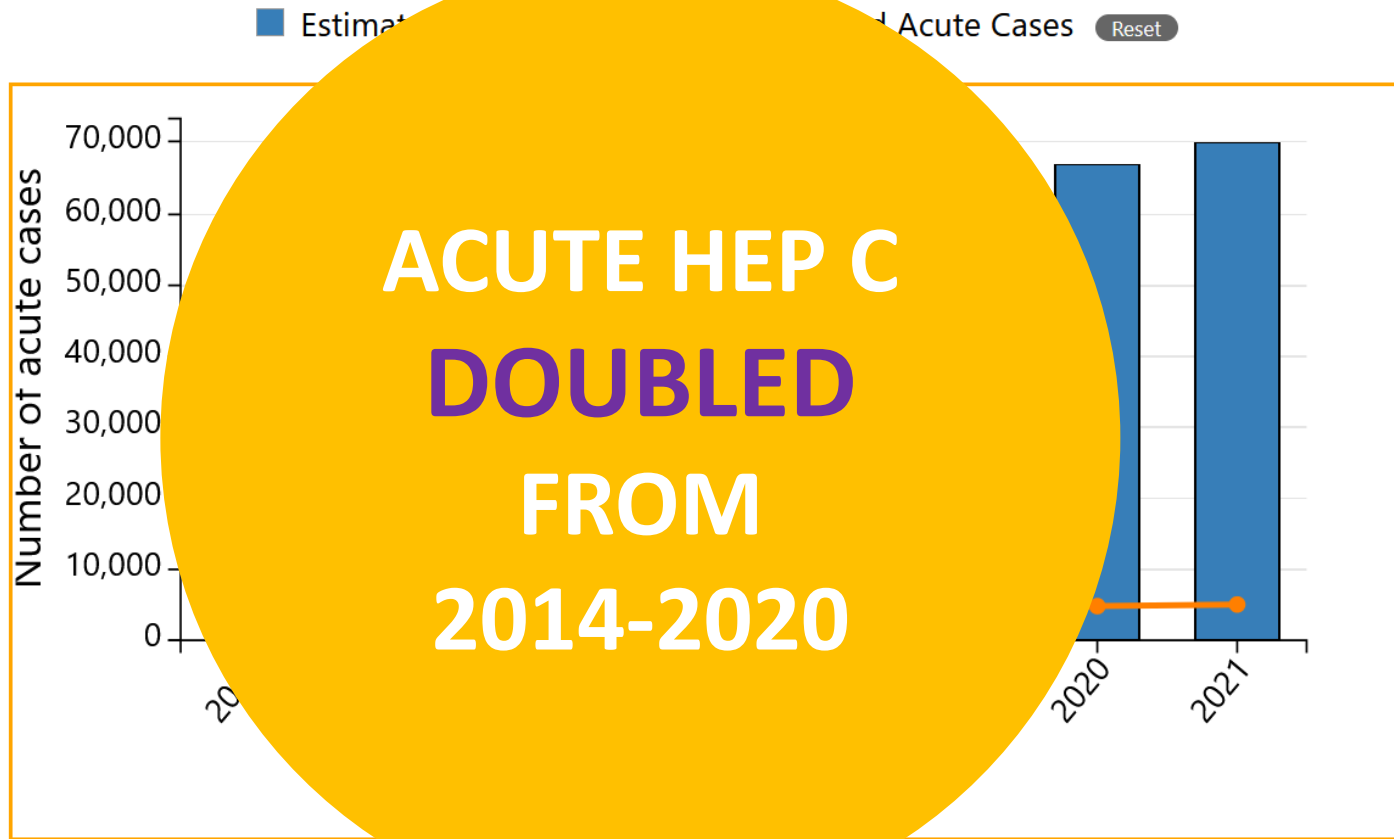
# Hep C Burden in US



<https://www.cdc.gov/hepatitis/statistics/2021surveillance/index.htm>

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# Hep C Burden in US

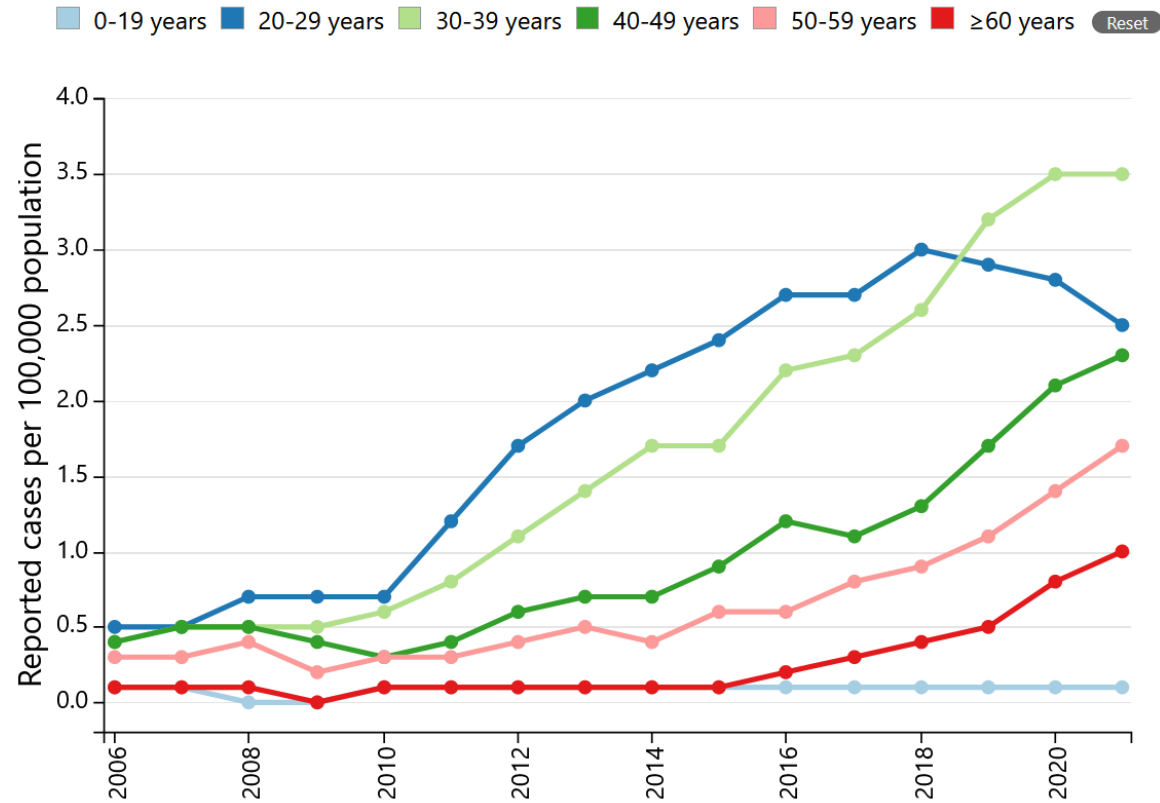


<https://www.cdc.gov/hepatitis/statistics/2021surveillance/index.htm>

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# Hep C Burden in US



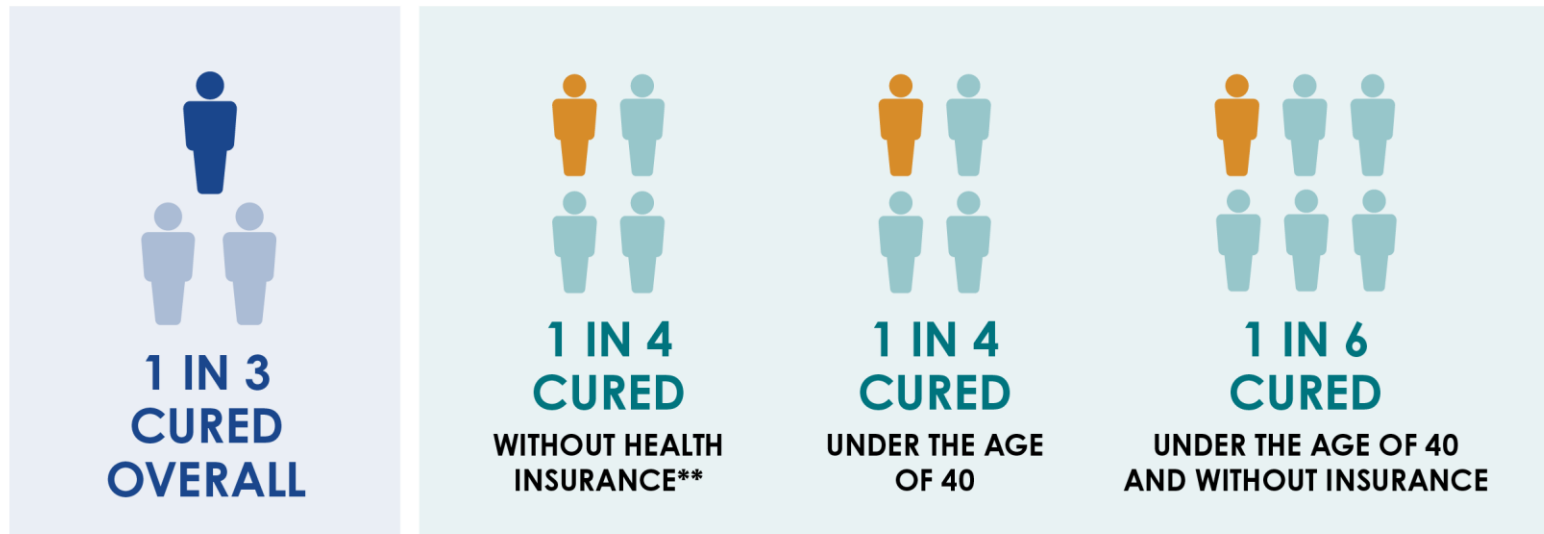
<https://www.cdc.gov/hepatitis/statistics/2021surveillance/index.htm>



# INSUFFICIENT HCV TREATMENT

June 2023

## ADULTS DIAGNOSED AND CURED\* OF HEPATITIS C IN THE U.S. 2013–2022



\*Cured is defined as viral clearance, which is an undetectable hepatitis C virus ribonucleic acid (HCV RNA) after a prior test result of detectable HCV RNA.

\*\*Referred to as Other (client or self-pay) in the analysis

Source: Centers for Disease Control and Prevention



# Hepatitis Burden in Hawai'i



## VIRAL HEPATITIS CAUSES LIVER CANCER

Hepatitis B and C account for 2 out of 3 of liver cancer cases in Hawai'i



## LIVER CANCER IS HIGH

Hawai'i has higher rates of liver cancer and deaths compared to U.S.

Sources: Wong et al, AJS 2015; CDC, Cancer Statistics 2018

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# Hep C Mortality in HI



Residents with hepatitis C

**died 20 years  
earlier**

on average, compared to  
rest of state from 2016-  
2017.

<https://academic.oup.com/cid/article/71/5/1149/5581721>

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# Hep C Mortality in HI



Highest proportion of **Native Hawaiian, Pacific Islander, and Asian** deaths among HCV-listed deaths (2016-2017), compared to other states.

<https://academic.oup.com/cid/article/71/5/1149/5581721>

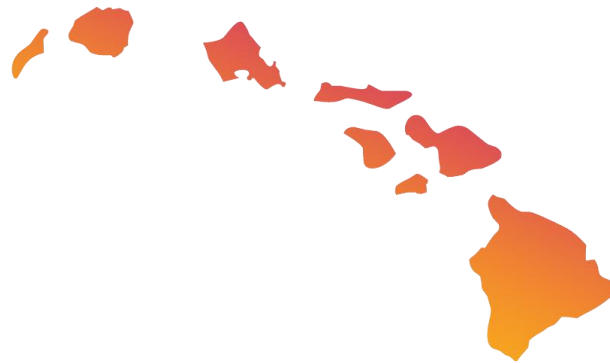
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# ▸ HIGHER RATES

## of Hepatitis B Deaths (2000-2020)

### 3 TIMES HIGHER IN HAWAI'I

In 2019, Hep B mortality rate for Hawai'i was **1.17 deaths per 100,000**, compared to 0.42 per 100,000 for the United States.



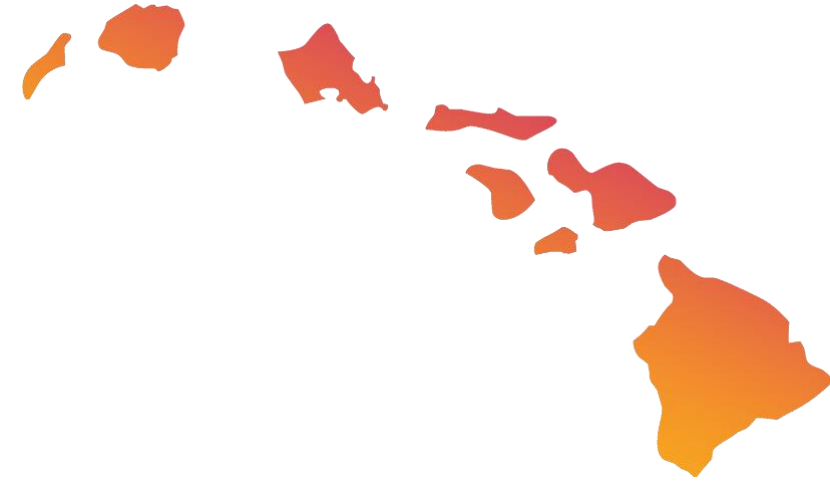
### API RESIDENTS IN HAWAI'I

Hep B mortality rates for Asian and Pacific Islander (API) residents were **up to 1.4 times state average** from 2000 to 2020.

<https://health.hawaii.gov/harmreduction/new-hep-b-mortality-article/>

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# Hep Infrastructure in DOH



## 1 FTE Prevention Coordinator

- CDC funds since 2002
- ~ \$75,000/year for programs (state)

## 1 FTE Surveillance Coordinator

- CDC funds since 2020
- Recently approved, pending hire
- No dedicated surveillance for over 12 years

# Hep Infrastructure in DOH



## 1 FTE Prevention Coordinator

- CDC funds since 2002
- ~ \$75000/year for programs (state)

## 1 FTE Surveillance Coordinator

- CDC funds since 2020
- Recently approved, pending hire
- No dedicated surveillance for over 12 years

**Community  
Collaboration**



# Hep Free 2030

**THADDEUS PHAM (HE, HIM)**

DOH VIRAL HEPATITIS PREVENTION PROGRAM

HepFree  
2030 



**HepFree**  
HAWAII

**MORE THAN 10 YEARS TOGETHER**



HepFree  
2030

**HEP FREE 2030:**

**THE HAWAI'I**

**HEPATITIS**

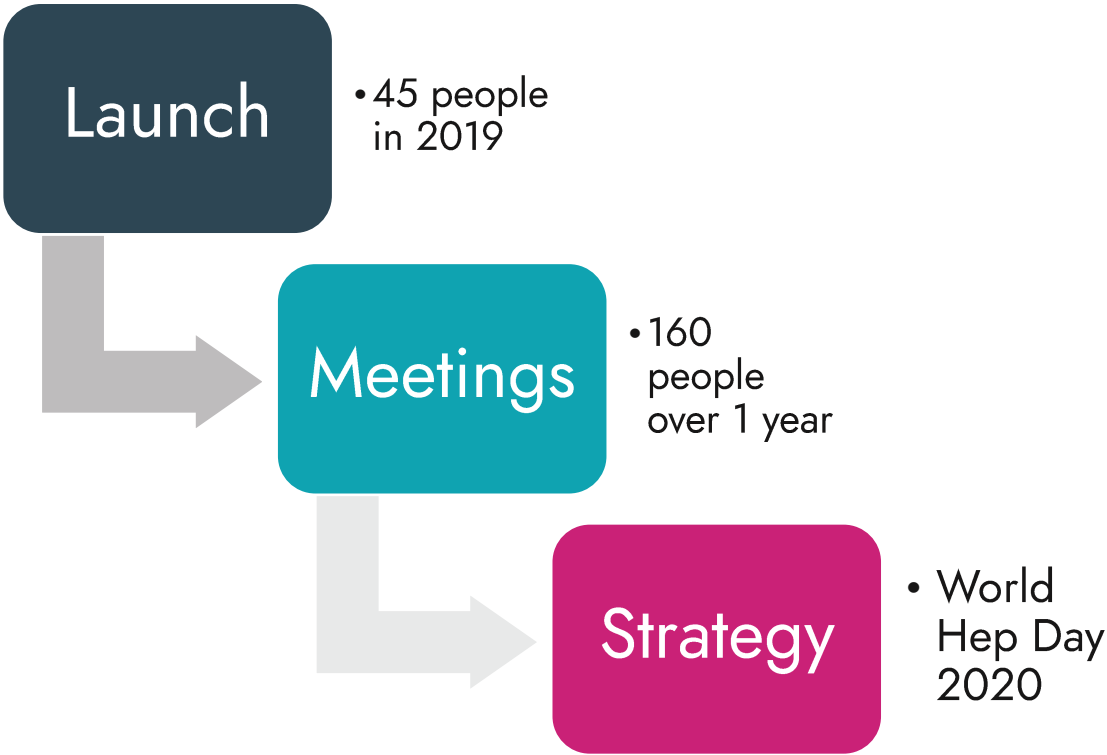
**ELIMINATION**

**STRATEGY**

**2020-2030**



# Strategy Process



# Fail Fast and Amplify Good



## WHAT DOES MICRO-ELIMINATION MEAN?

Micro-elimination means that we will work on many different, innovative, community-driven projects at the same time. This allows us to tailor hepatitis elimination to the needs of each community and to change direction quickly if things aren't working.<sup>xvi</sup>

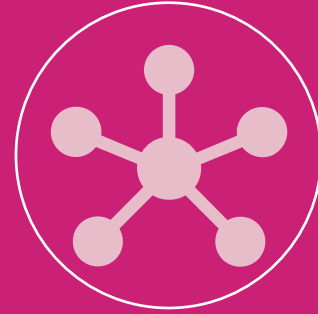
# Values in Practice



Harm  
Reduction



Social Justice



Intersectionality



Aloha



# Values in Practice

**"OUR FIGHT AGAINST HEPATITIS IS ALSO A FIGHT  
AGAINST STIGMA, DISCRIMINATION, AND INEQUITY."**

*- HFH Steering Committee Member, whose uncle had hepatitis B*



# Mission and Vision

## Mission

- To empower Hawai'i 'ohana to promote liver health and wellness
- To raise awareness and increase access for the prevention, diagnosis, and treatment of liver disease, especially viral hepatitis and related harms
- To erase stigma, social and racial inequity, and health disparities surrounding communities affected by liver disease

## Vision

- To create a Hawai'i free of hepatitis and other liver disease
- To promote liver health by integrating culturally appropriate services within a comprehensive system of care







**WE SAVE LIVES**



# Hep Free 2030 Priorities



# Priority 1: Awareness and Education



**DIGITAL  
PRESENCE**



**CULTURAL  
ENGAGEMENT**



**HUB FOR  
EXPERTISE**



**HEALTHCARE  
EDUCATION**

**HepFree  
2030**

# Hep C ECHO

- Case-based learning with experts
- Networking for providers and healthcare team
- Mondays (12-1:30 pm HST) until November 20
- ~60 attendees during sessions
- Register and present a case



The poster features a blue T-shaped graphic on the left and a background of white sand with brown speckles. The title 'Hawai'i Hepatitis C ECHO' is in the top right. A blue banner contains the schedule: 'EVERY MONDAY STARTING AUG 28' and '12-Week Series 12:00 PM - 1:30 PM (HST)'. Below the banner is a QR code and the text 'Register Here'. To the right of the QR code is contact information for Thaddeus Pham. At the bottom are logos for Hawai'i Learning Groups, Project ECHO, HepFree Hawaii, and the Hawai'i Health & Harm Reduction Center.

## Hawai'i Hepatitis C ECHO

**EVERY MONDAY  
STARTING  
AUG 28** | **12-Week Series  
12:00 PM - 1:30  
PM (HST)**

Our goals are to support all primary care providers to prevent, evaluate, treat, and eliminate hepatitis C. We also aim to decrease the need for patient travel for hepatitis care.

**Register Here**

**For more information:**  
Thaddeus Pham, Department of Health  
Thaddeus.Pham@doh.hawaii.gov

In partnership with:

HepFree  
2030

# Priority 2: Access to Services



IMMUNIZATIONS

---



TESTING

---



LINKAGE  
TO CARE

---



TREATMENT

---



PRESCRIBER  
CAPACITY

---

# Hep C in Corrections

- MOA with Public Safety for 340B pricing
- Trained over 70 healthcare staff
- Piloting Hep C rapid testing on-site
- Coordinate post-release transition w community



Credit: Cory Lum/Civil Beat/2022

# Priority 3: Policy at All Levels



HEALTH DEPT.  
CAPACITY



POLICY  
INTEGRATION



INSURANCE  
COVERAGE



COMMUNITY  
ADVOCACY



PROVIDER  
ADVOCACY

# MedQUEST Reduces Hep C Restrictions



FOR IMMEDIATE RELEASE  
January 18, 2023

CONTACT: Heather Lusk, Co-Director, Hep Free Hawai'i, [hlusk@hhrc.org](mailto:hlusk@hhrc.org)  
Christina Wang, Medical Director, Hawai'i Health & Harm Reduction Center,  
[cwang@hhrc.org](mailto:cwang@hhrc.org)

## Hep Free Hawai'i Applauds Med-QUEST Memo Reducing Barriers to Hepatitis C Treatment

*Policy Change Will Expand Access for Under Resourced Patients Under National Best Practice Guidelines  
& Strengthen Hawai'i's Hepatitis Elimination Efforts*

*Move Comes after Hawai'i Receives a "D" Grade in 2022 Nationwide Report*

*Hepatitis C Virus a Leading Cause of Liver Cancer in Hawai'i*

(Honolulu, HI)—Hep Free Hawai'i (HFH), a local coalition dedicated to increasing access to viral hepatitis

<https://www.hepfreehawaii.org/press>

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# Priority 4: Equity in Everything



SHARED  
LEADERSHIP



PEOPLE  
FIRST



STIGMA  
REDUCTION



DATA  
EVALUATION

# Local Hep Storytellers



- ❖ Okee's story on Youtube— [English](#) or [Korean](#) subtitles
- ❖ Promoted by social media, email, website, press release
- ❖ Storytellers become leaders, locally and nationally
- ❖ <https://www.hepfreehawaii.org/storytellers>

# Priority 5: Data for Decision-Making



DATA TO ACTION  
(CARE CASCADES)



CROSS-CUTTING  
EVALUATION



SURVEILLANCE  
INFRASTRUCTURE



EQUITY  
METRICS

# Voices of PWUD

- ❖ DOH report featuring “talk story” interviews w PWUD on HCV treatment
- ❖ Developed infographic with DOH
- ❖ <https://www.hepfreehawaii.org/news/hep-c-voices-report>



## “I WANNA LIVE A FULL LIFE”

### WHAT PEOPLE WHO USE DRUGS SAY ABOUT HEP C CURE



In June 2023, the Hawai‘i Department of Health released a landmark report that highlighted insights from people who use drugs to guide hepatitis C elimination programs. Such qualitative research aligns with “Equity in Everything”, a chief priority of the Hep Free 2030 strategy ([www.hepfreehawaii.org/hep-free-2030](http://www.hepfreehawaii.org/hep-free-2030)).

## VOICES OF LOCAL PEOPLE

### On Meaningful Hepatitis C Treatment

#### USE SYRINGE EXCHANGES

Syringe exchanges are **essential hubs for hepatitis C treatment** and other related services.

“Just come to the same spot where the van is. There could be a doctor here who could prescribe.”

#### PROVIDE INFO, REDUCE STIGMA

People who use drugs are **concerned about their health**, although stigma and misinformation persist.

“I feel like they think that like people that have it are like, dirty.”

#### SHORT, DIRECT MESSAGES

People prefer **visual, directive messaging**, especially print materials at syringe exchanges.

“Listen...Hep C is curable!”; “Things have changed. Read this.”; “Look. It’s curable!”

#### FOR MORE VOICES, SEE THE FULL REPORT

<https://health.hawaii.gov/harmreduction/people-who-use-drugs-talk-about-hep-c>



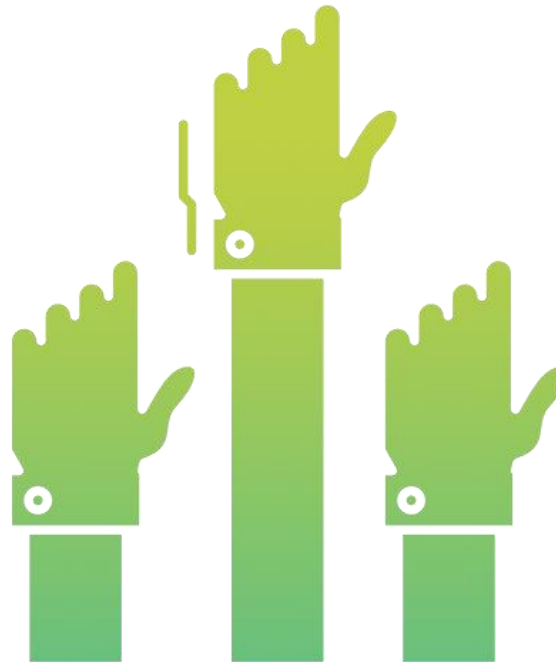
Updated July 31, 2023

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# CALL TO ACTION

**JOIN  
COALITION**

**JOIN A  
WORKGROUP**



**GIVE  
FEEDBACK**

**USE YOUR  
VOICE**

**FOLLOW ON  
SOCIAL MEDIA**

**HepFree  
2030**

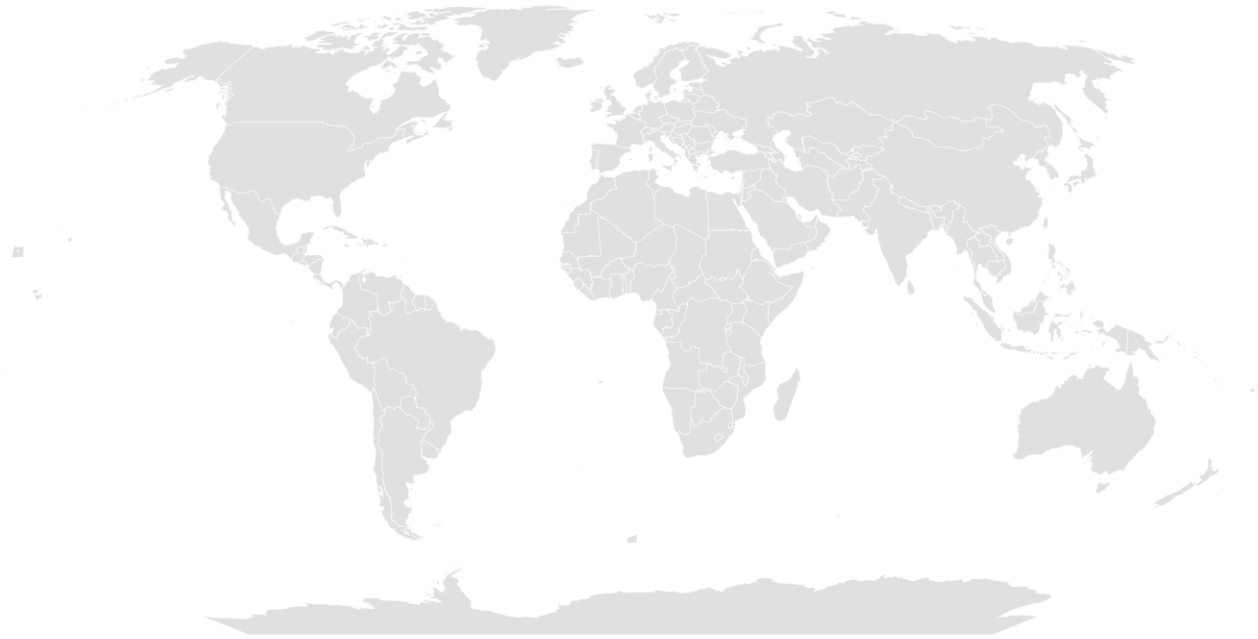


# Clinical Perspective

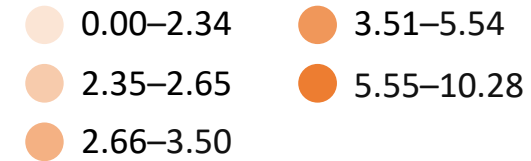
**DR. NAOKY TSAI (HE, HIM)**

JABSOM; PRACTICING HEPATOLOGIST

# Rates\* of death with hepatitis C virus infection listed as a cause of death† among residents, by state or jurisdiction United States, 2020



## Cases/100,000 Population



Color Key	Death/100,000 Population	State or Jurisdiction
Lightest orange	0.00–2.34	IL, DE, CT, NH, NJ, ME, NY, MA, MI, UT, ND
Medium-light orange	2.35–2.65	IA, GA, PA, MO, WI, NE, IN, VA, HI, NC
Medium orange	2.66–3.50	AL, NV, SD, MN, OH, FL, SC, AZ, AR, RI
Medium-dark orange	3.51–5.54	KS, MD, ID, MS, TX, WA, CA, VT, AK, MT
Darkest orange	5.55–10.28	LA, WV, TN, CO, KY, WY, NM, OR, DC, OK

© Australian Bureau of Statistics, GeoNames, Microsoft, Navinfo, Open Pl

Source: CDC, National Center for Health Statistics, Multiple Cause of Death 1999–2020 on CDC WONDER Online Database. Data are from the 2016–2020 Multiple Cause of Death files and are based on information from all death certificates filed in the vital records offices of the fifty states and the District of Columbia through the Vital Statistics Cooperative Program. Deaths of nonresidents (e.g., nonresident aliens, nationals living abroad, residents of Puerto Rico, Guam, the Virgin Islands, and other US territories) and fetal deaths are excluded. Numbers are slightly lower than previously reported for 2016 due to NCHS standards which restrict displayed data to US residents. Accessed at <http://wonder.cdc.gov/mcd-icd10.html> on January 13, 2022. CDC WONDER dataset documentation and technical methods can be accessed at <https://wonder.cdc.gov/wonder/help/mcd.html>.

\* Rates are age-adjusted per 100,000 US standard population in 2000 using the following age group distribution (in years): <1, 1–4, 5–14, 15–24, 25–34, 35–44, 45–54, 55–64, 65–74, 75–84, and ≥85. For age-adjusted death rates, the age-specific death rate is rounded to one decimal place before proceeding to the next step in the calculation of age-adjusted death rates for NCHS Multiple Cause of Death on CDC WONDER. This rounding step may affect the precision of rates calculated for small numbers of deaths. Missing data are not included.

† Cause of death is defined as one of the multiple causes of death and is based on the International Classification of Diseases, 10th Revision (ICD-10) codes B17.1, and B18.2 (hepatitis C).

Centers for Disease Control and Prevention. Viral Hepatitis Surveillance Report – United States, 2020. <https://www.cdc.gov/hepatitis/statistics/2020surveillance/index.htm>. Published September 2022.

Table 3.7 – Part 1 of 4

## Numbers and rates\* of deaths with hepatitis C listed as a cause of death† among residents, by state or jurisdiction

### United States, 2016–2020

State or Jurisdiction	2016 No.	2016 Rate*	2017 No.	2017 Rate*	2018 No.	2018 Rate*	2019 No.	2019 Rate*	2020 No.	2020 Rate*
Alabama	166	2.63	188	2.97	167	2.54	134	2.06	178	2.67
Alaska	50	5.38	38	4.38	40	5.00	41	4.66	46	5.17
Arizona	500	5.81	480	5.45	348	3.84	277	3.01	329	3.36
Arkansas	184	4.91	169	4.43	150	3.86	134	3.45	138	3.43
California	2,917	6.33	2,630	5.58	2,391	4.98	2,114	4.36	2,209	4.54
Colorado	385	5.74	386	5.62	387	5.48	376	5.24	424	5.84
Connecticut	123	2.52	130	2.61	89	1.72	102	2.03	102	1.97
Delaware	47	3.63	49	3.80	34	2.33	26	2.12	30	1.94
District of Columbia	95	13.37	83	11.42	70	9.40	75	10.08	73	9.65
Florida	1,222	4.26	1,222	4.16	1,005	3.34	1,025	3.31	1,012	3.22
Georgia	368	2.98	344	2.66	326	2.46	313	2.33	318	2.38
Hawaii	70	3.75	67	3.48	49	2.42	45	2.38	55	2.63
Idaho	115	5.40	84	3.82	108	4.87	93	4.07	90	3.88
Illinois	354	2.18	288	1.72	279	1.67	221	1.31	288	1.68
Indiana	295	3.60	269	3.16	259	2.98	241	2.76	223	2.56

\* Rates are age-adjusted per 100,000 US standard population during 2000 by using the following age group distribution (in years): <1, 1–4, 5–14, 15–24, 25–34, 35–44, 45–54, 55–64, 65–74, 75–84, and ≥85. For age-adjusted death rates, the age-specific death rate is rounded to 1 decimal place before proceeding to the next step in the calculation of age-adjusted death rates for NCHS Multiple Cause of Death on CDC WONDER. This rounding step might affect the precision of rates calculated for small numbers of deaths. Missing data are not included.

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Source: CDC, National Center for Health Statistics, Multiple Cause of Death 1999–2020 on CDC WONDER Online Database. Data are from the 2016–2020 Multiple Cause of Death files and are based on information from all death certificates filed in the vital records offices of the 50 states and the District of Columbia through the Vital Statistics Cooperative Program. Deaths of nonresidents (e.g., nonresident aliens, nationals living abroad, residents of Puerto Rico, Guam, the Virgin Islands, and other US territories) and fetal deaths are excluded. Numbers are slightly lower than previously reported for 2016 because of NCHS standards that restrict displayed data to US residents. Accessed at <http://wonder.cdc.gov/mcd-icd10.html> on January 13, 2022. CDC WONDER data set documentation and technical methods can be accessed at <https://wonder.cdc.gov/wonder/help/mcd.html>.

Centers for Disease Control and Prevention. Viral Hepatitis Surveillance Report – United States, 2020. <https://www.cdc.gov/hepatitis/statistics/2020surveillance/index.htm>. Published September 2022.



# Universal HCV Screening for American Adults

## Screening for Hepatitis C Virus (HCV) Infection

Chronic HCV is a common infection in the United States that can lead to liver failure, liver transplantation, and death. Antiviral treatment for HCV is highly effective in curing it



### Population

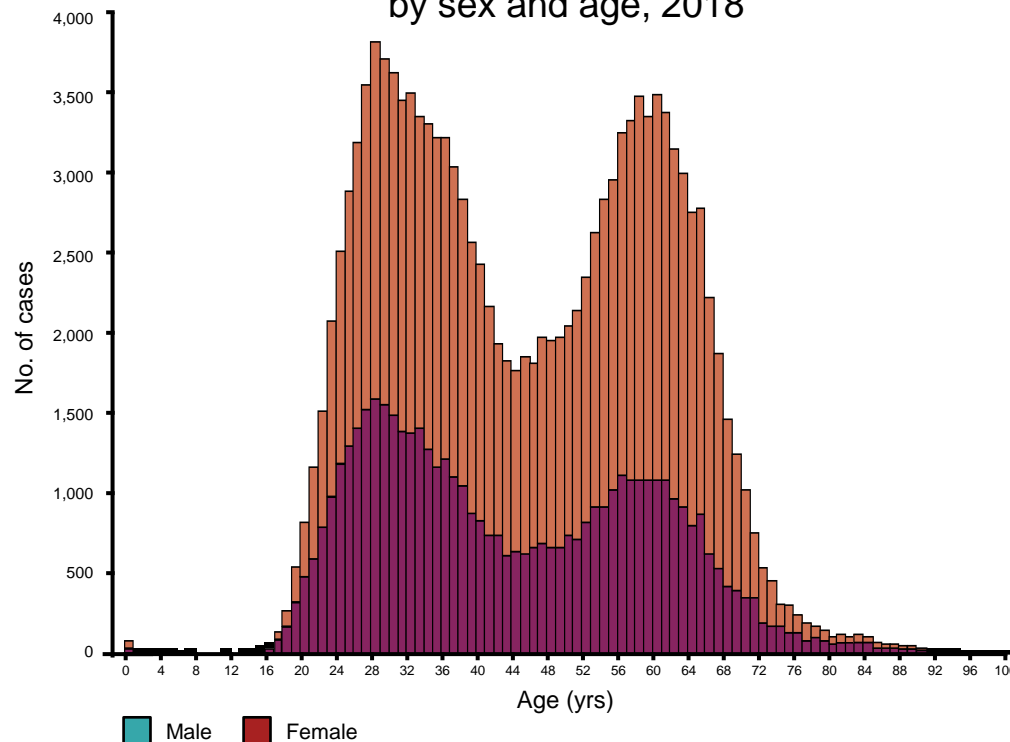
Adults aged 18 to 79 years (including pregnant persons) who do not have any signs or symptoms of HCV infection and who do not have known liver disease



### USPSTF recommendation

The USPSTF recommends screening for HCV infection in adults aged 18 to 79 years

Number of newly reported chronic HCV by sex and age, 2018



All persons with risk factors (eg, persons with HIV, prior recipients of blood transfusions, persons who ever injected drugs and shared needles, and persons who are born to an HCV-infected mother) should be tested for HCV, with periodic testing while risk factors persist



*Treatment is recommended for all patients with chronic HCV infection, except those with short life expectancies owing to comorbid conditions*

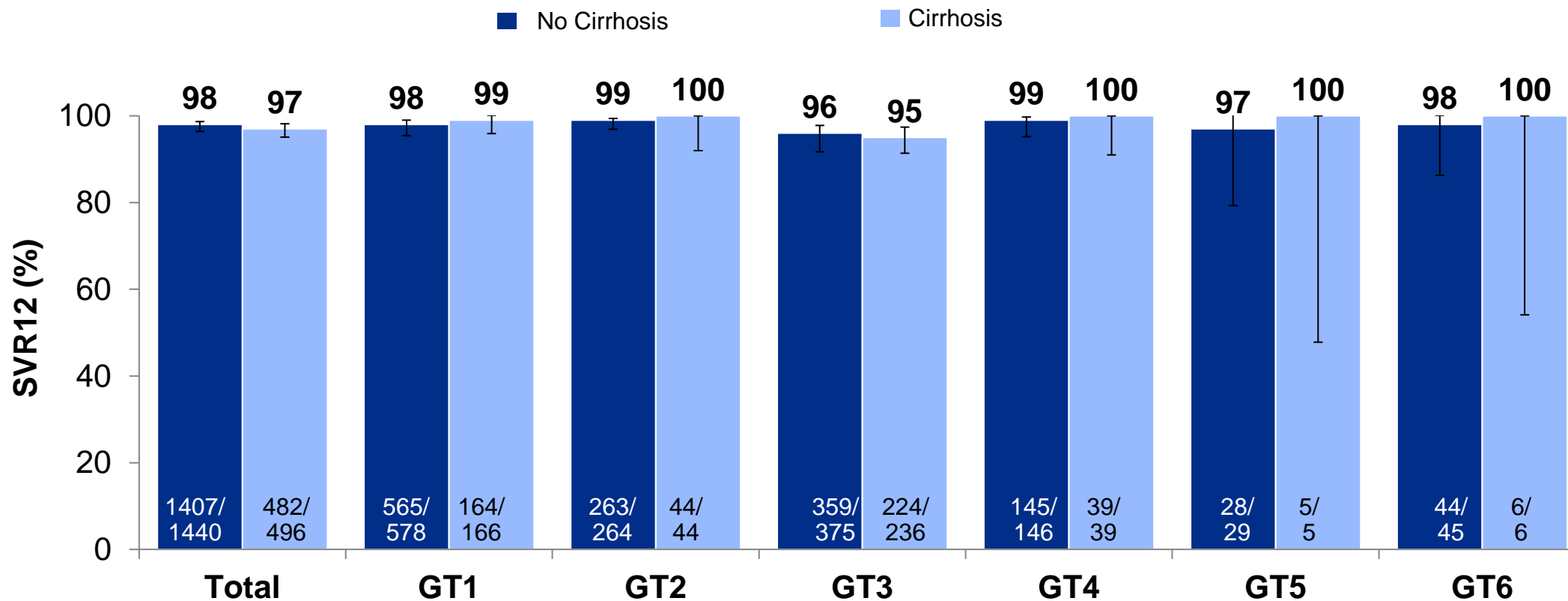
**MOST PATIENTS WITH HCV VIREMIA SHOULD BE CONSIDERED TREATMENT CANDIDATES IF THEY CAN COMPLY WITH THERAPY**

**AASLD-IDSA Treatment Guidelines**

# Recommended Regimens

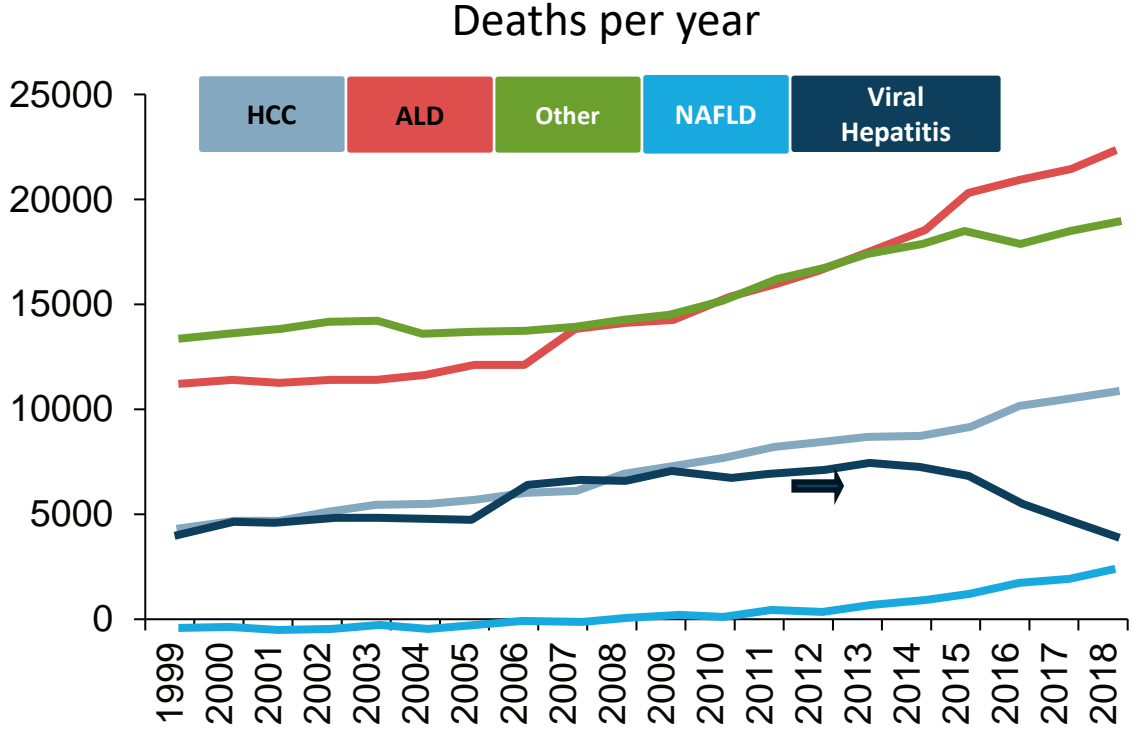
- Glecaprevir (300 mg)/Pibrentasvir 120 mg).
  - 3 tablets orally once a day with food for 8 weeks.
- Sofosbuvir (400mg)/Velpatasvir (100 mg)
  - One tablet orally daily for 12 weeks.

## SVR12 by Cirrhosis (ITT Analysis)



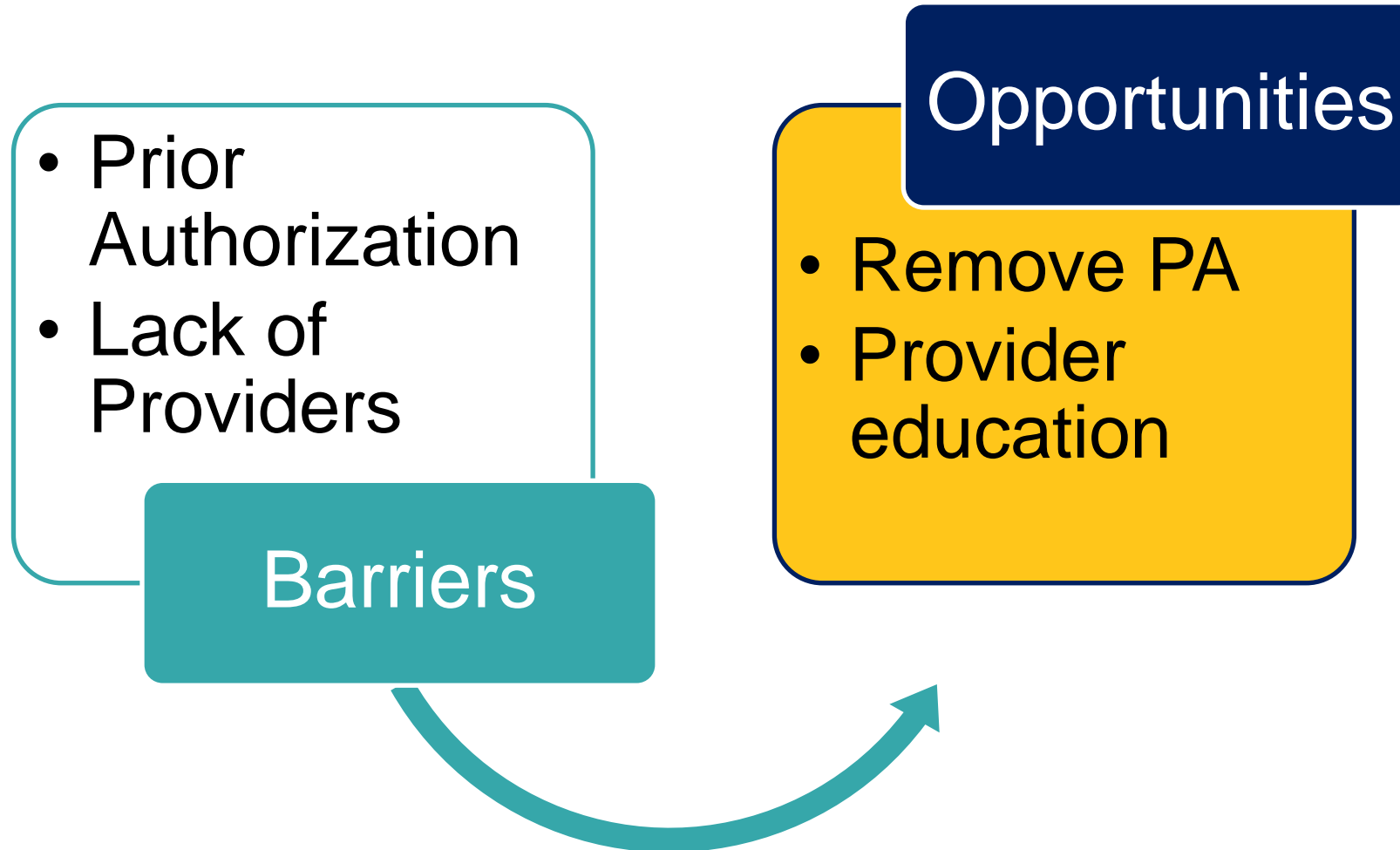
# The 22-year trend of liver diseases in the US

Data were extracted between 1999 - 2018 from the annual National Vital Statistics Reports (deaths: Final Data) from the CDC



HCC, hepatocellular carcinoma; ALD, alcoholic liver disease; NAFLD, non-alcoholic fatty liver disease.

# Access Barriers for Hepatitis C Treatment



# Resource Barriers for Hepatitis C Treatment

Funding for medication

Funding for health center and providers

Funding for addiction management

# Community Perspective

**DR. MELISSA BUMGARDNER (SHE, HER)**

DIRECTOR OF PHARMACY SERVICES, HAWAII ISLAND  
COMMUNITY HEALTH CENTER

HepFree  
2030 



# HERO Project

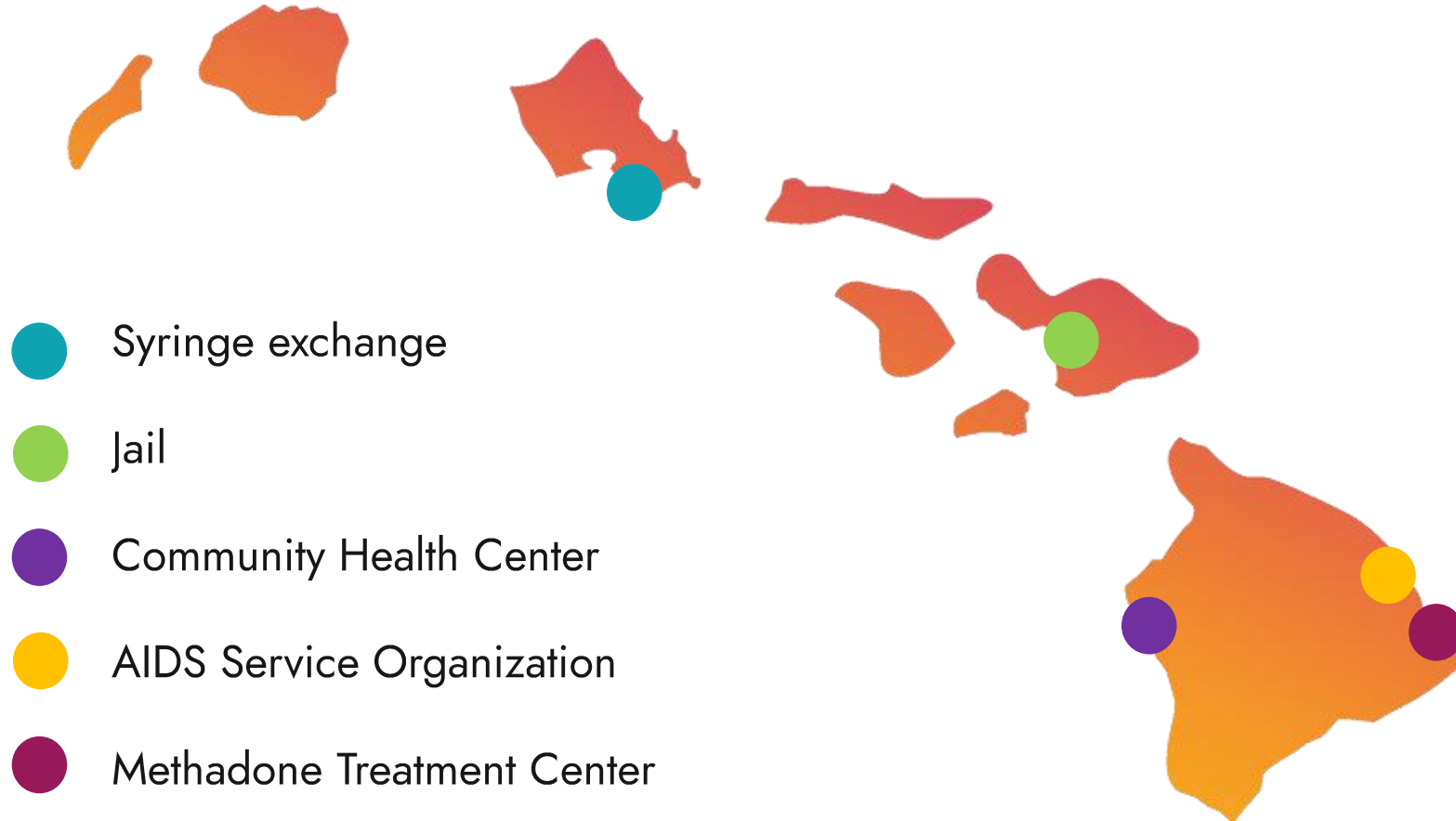
“Health Enhancement to Reduce Opioid-use-disorder”

Funded by DOH State Opioid Response Grant

Care Coordination for Hep C and Opioid Use Disorder

Since April 2021

# HERO Sites



# Medications for Opioid-Use Disorder

Screened existing HCV pts

MOUD improves HCV cure rates

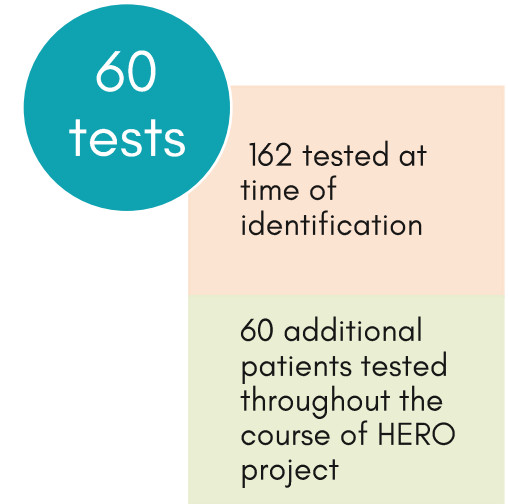
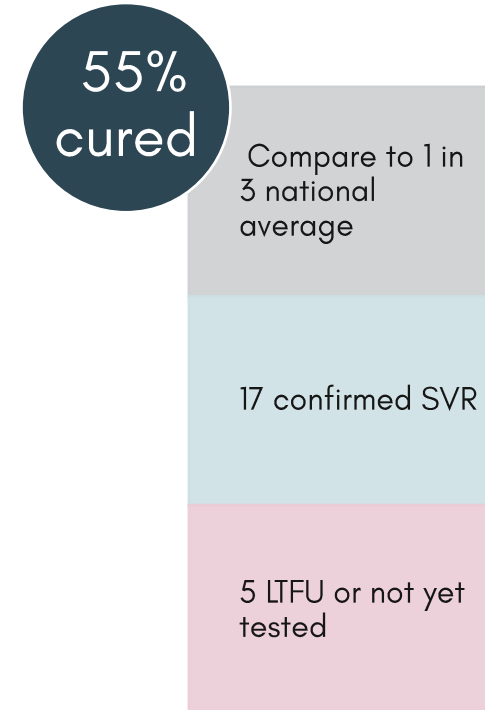
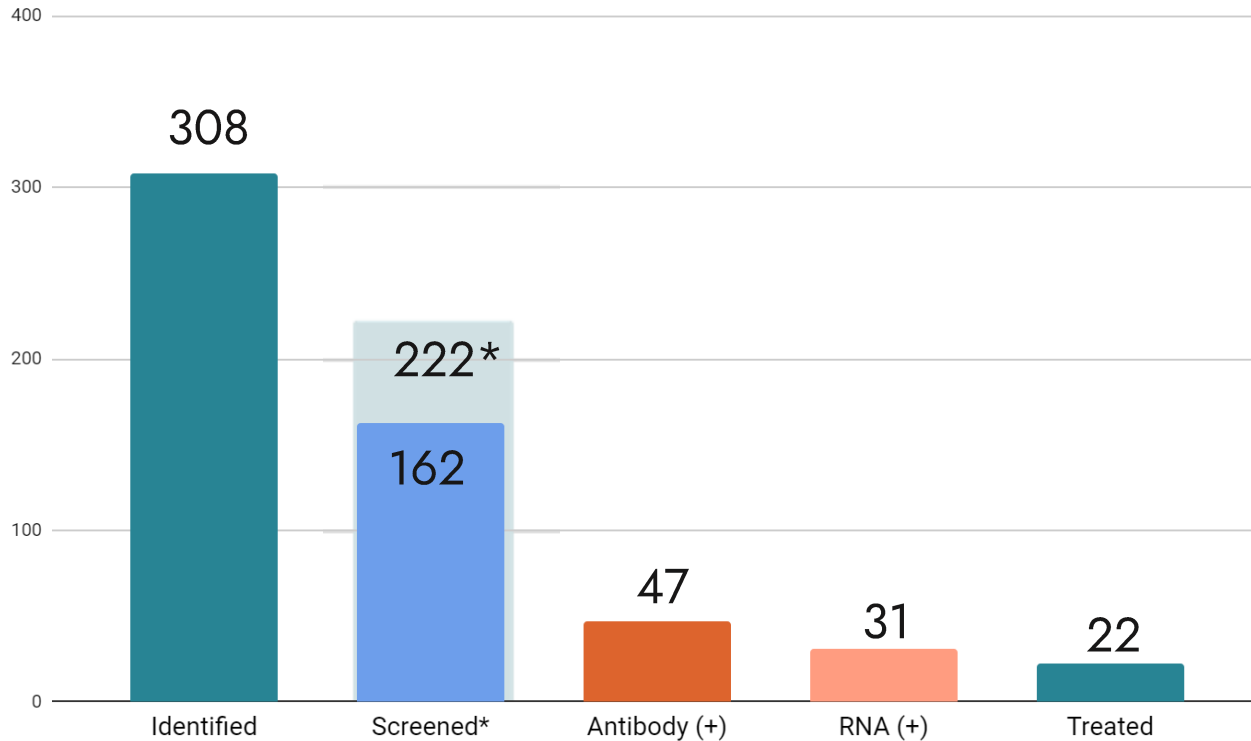
## HERO MOUD DATA

- 224 patients referred
- 181 received MOUD

# 1 in 10

Persons with HCV is also diagnosed with OUD


# Care Cascade 4/2021 to 3/2023



# Patient Perspective

**KENSON ALIK (HE, HIM)**

MICRONESIAN EDUCATION FOR LIVER WELLNESS  
PROJECT

A man and a woman are shown from the chest up, smiling and looking towards the right. The man, on the left, has dark hair and is wearing a light-colored shirt with a white lei around his neck. The woman, on the right, has dark hair pulled back and is wearing glasses and a maroon top. They appear to be in an indoor setting with a white door or wall in the background.

I've learned a lot from my experiences, what I went through  
with my community members.

# Micronesian Education for Liver Wellness Program (MELWP)

How can we take care of our own communities?



<https://www.hepfreehawaii.org/micronesia-education-program>



# LANGUAGE

Educators speak own language

Materials in Micronesian languages

Work with Office of Language Access





# EDUCATION

Culturally respectful talk story sessions

Where community already goes: church, sports, parks

Giveaways, incentives



# SUPPORT

Individual outreach

In-person and by phone

Community referrals



# ADVOCATE

Local: more hep B resources

National: meetings and policy

Global: ambassadors and World Hep Alliance



# Policy Opportunities

**HEATHER LUSK (SHE, HER)**

HAWAI'I HEALTH & HARM REDUCTION CENTER

HepFree  
2030 

# POLICY RECCOMENDATIONS TO MAKE HAWAII HEP FREE BY 2030

Remove pre-authorizations  
for HCV treatment

State-funded viral hepatitis  
program

Opioid settlement funds for  
hepatitis efforts

**THE TIME FOR VIRAL HEPATITIS  
ELIMINATION IS NOW**

**25** State Medicaid programs have removed ① prior authorization on HCV treatment, one of the most stubborn barriers blocking access to care for millions of Americans.

**AND THE COUNTDOWN IS ON...**

YEARS	MONTHS	DAYS
<b>6</b>	<b>3</b>	<b>2</b>

until the WHO's 2030 target for global viral hepatitis elimination.

[SEE YOUR STATE'S REPORT CARD](#) [READ OUR LATEST REPORT](#) [GET CONNECTED](#)

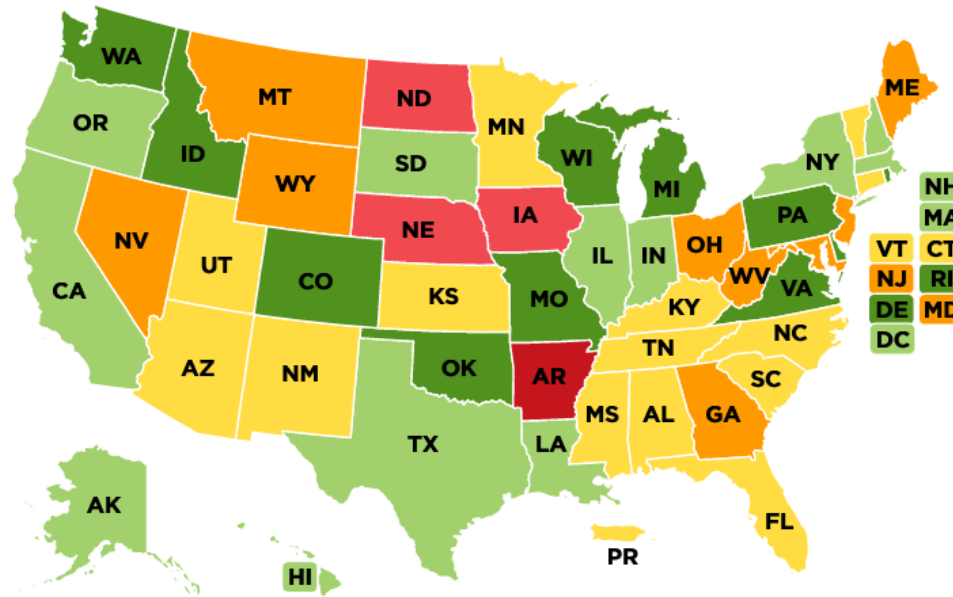
HepFree  
2030

# REMOVING PA FOR HCV TREATMENT

Hawaii had failing grade  
– now an A

MedQuest Memo 12.22  
with attestation

Pharmacy barriers



As of August 2023, the following 25 states have removed prior authorization for most patients: Alaska, Arizona, California, Colorado, Delaware, District of Columbia, Florida, Hawaii, Idaho, Illinois, Indiana, Louisiana, Massachusetts, Michigan, Missouri, New Hampshire, New York, Oklahoma, Oregon, Pennsylvania, Rhode Island, Texas, Virginia, Washington, Wisconsin.

The above grades reflect our most up-to-date assessment of Medicaid recipients' ability to access HCV treatment in jurisdictions across the country. For a more detailed breakdown of our assessment criteria, check out our comprehensive rubric or complete state-by-state assessments.

Citation: Center for Health Law and Policy Innovation & National Viral Hepatitis Roundtable, Hepatitis C: State of Medicaid Access (2023), [www.stateofhepc.org](http://www.stateofhepc.org)

<span style="color: green;">■</span> A+	PA removed for most patients; no other restrictions
<span style="color: lightgreen;">■</span> A	PA removed for most patients <b>OR</b> PA required for all patients; minimal restrictions
<span style="color: yellow;">■</span> B	PA removed for most patients; some restrictions <b>OR</b> PA required for all patients; minimal restrictions
<span style="color: orange;">■</span> C	PA required for all patients; some restrictions
<span style="color: red;">■</span> D	PA required for all patients; many restrictions
<span style="color: darkred;">■</span> F	PA required for all patients; harsh restrictions



# STATE-FUNDED HEPATITIS PROGRAM

Currently \$75,000  
annually in state funds

Leverage intersectionality  
and HFH plan

Testing, vaccination and  
care coordination

Based on the core values of harm reduction, social justice, intersectionality, and aloha, our community partners identified five priorities to eliminate hepatitis A, B, and C in Hawai'i:

1. Awareness and Education
2. Access to Services
3. Advocacy at All Levels
4. Equity in Everything
5. Data for Decision-Making

Evaluation of goals, objectives, and critical issues will take place during monthly meetings and annual stakeholder convenings through 2030.



**"NO MATTER WHAT, IF YOU HAVE HEPATITIS... OR WHATEVER YOU HAVE THAT'S DETRIMENTAL, YOU CAN OVERCOME IT."**

*- HFH volunteer, now cured of hepatitis C*

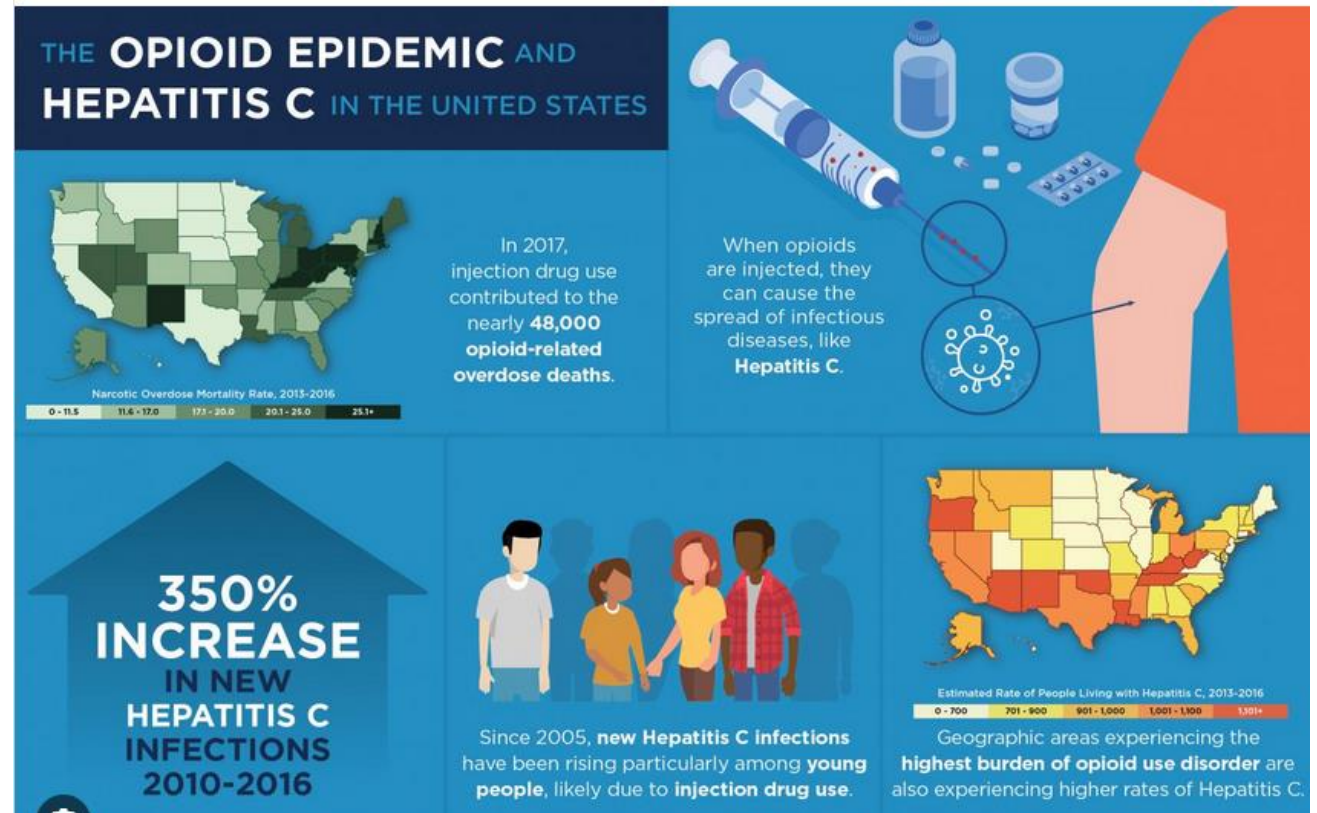
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# OPIOID SETTLEMENT FUNDS

People with history of using opioids have higher rates of hepatitis C

Some states using opioid settlement to support hepatitis elimination

SB 1394/HB 1096 would provide HCV testing in opioid treatment programs





# QUESTIONS?



<https://www.hepfreehawaii.org/hep-free-2030>





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