The Alliance for Patient Access hosted a meeting of the Hepatitis Therapy Access Working Group on May 3, 2023. Clinicians discussed state-level efforts as well as the National Hepatitis C Elimination Program.

**State Hepatitis Elimination Efforts**

Hepatitis elimination efforts in the United States vary across the country. Some states, like Louisiana and Washington, have taken a more holistic approach with a coordinated elimination plan and subscription model. Others have focused on incremental changes such as removing prescriber restrictions, sobriety restrictions and fibrosis requirements to access treatment.

Clinicians noted that while the subscription models in Louisiana and Washington were effective in obtaining the treatments for patients, a supply of “pills does not equal access.” Working Group members pointed out that, thus far, the results for subscription model states have not lived up to expectations, as the number of patients treated has actually decreased in some of the subscription model states.

However, while simply purchasing the treatments has not shown to be particularly successful, several providers reiterated that states, counties and clinics that have integrated wrap-around services and greater care coordination have seen significant success. While some prior authorization processes have been simplified, some patients still struggle to access appropriate treatments. In addition, authorization for patients seeking retreatment is a significant barrier.

**National Hepatitis Elimination Efforts**

Several of the clinicians shared enthusiasm that President Biden included over $11 billion in his annual budget request to create a National Hepatitis C Elimination Program. The plan provides optimism that
hepatitis will finally be something that is taken seriously on a national level. Key features of the president’s plan include access to rapid diagnostic testing, access to treatment for at-risk patient populations and improved surveillance strategies to better identify and track the spread of hepatitis C.

While there is excitement that hepatitis C remains a focus for the administration, meeting participants emphasized the importance that the White House plan reflects lessons learned by state hepatitis efforts. As one clinician described, the White House plan will utilize a subscription model, but it is critical to ensure some funding is dedicated to awareness, testing and care.

One clinician on the call noted that, while the plan is currently strictly focused on hepatitis C, it is important to ensure other hepatitis issues, like hepatitis B vaccination, are not neglected.

While the full details of the plan have yet to be released, Working Group members had several priorities for plan inclusion. Point-of-care testing was one such priority. Several providers noted that the ability to test, diagnose and prescribe in the same visit would be a very simple way to ensure that patients who test positive are immediately and adequately linked to care.

The rollout of the program is clinicians’ top priority, however. Ensuring that high-risk populations and communities are adequately targeted is critical to ensure success of the program. Providers agreed that the opportunity for patient and provider stakeholders to weigh in on the process will be important to make sure expert voices are heard. Overall, the providers echoed the sentiment that this is an exciting step forward in eliminating viral hepatitis.

**Clinician Advocacy Opportunities**

AfPA leadership explained opportunities to engage in ongoing policy debates surrounding access for hepatitis patients. Working group members also reiterated their desire to participate in advocacy opportunities regarding the National Hepatitis Elimination Plan, as well as local and statewide efforts.

To learn more about AfPA’s Hepatitis Therapy Access Working Group, contact Casey McPherson at cmcpherson@allianceforpatientaccess.org.