

# The New York City Public Health Approach to Hepatitis C

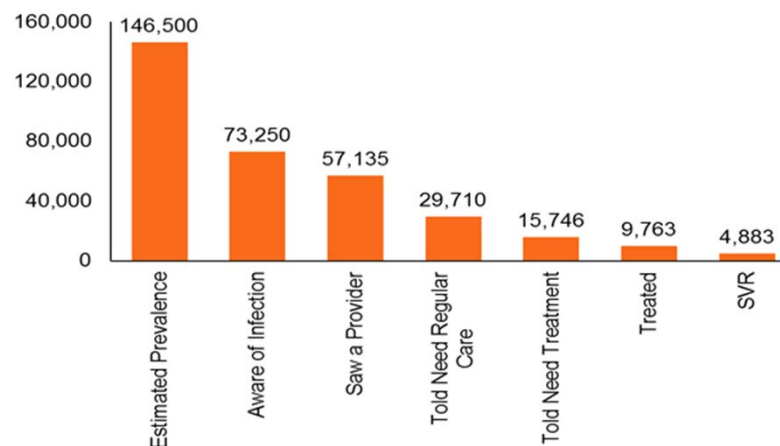
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Viral Hepatitis Surveillance, Prevention and Control

## BACKGROUND

- Of the estimated 146,000 persons with hepatitis C (HCV) infection in New York City (NYC), many remain undiagnosed, and few have been treated
- Gaps in RNA confirmation and provider capacity for treatment create barriers to care

In 2013, the NYC Department of Health and Mental Hygiene (DOHMH) published a strategic plan for HCV control and established a Viral Hepatitis Program. DOHMH's Six-Step HCV Control Strategy includes:

- Increasing provider knowledge and capacity
- Monitoring and reporting disease patterns
- Increasing screening and linkage to care
- Promoting primary prevention
- Enhancing public awareness
- Advancing health policy



## METHODS

- Clinical network
- Data collection and dissemination
- Care coordination
- Community coalition
- Evaluation

**DISCLAIMER:** NYC Check Hep C was funded in its second year by AbbVie, Gilead, Janssen, OraSure, and Roche

# RESULTS

## SURVEILLANCE and MONITORING

**NEGATIVE HCV RNA REPORTING** - made negative RNA reportable, allowing the identification of gaps in testing, and assess uptake in treatment and cure rates

**MONITORING** – surveillance analysis, geo-mapping, program evaluation, applied research

**QUALITY INDICATORS** - developed to monitor gaps in the care cascade at the facility level and to provide feedback to clinicians

The indicators include:

- Routine hepatitis C screening (age cohort)
- Confirmatory HCV RNA testing
- HIV screening
- Linkage to care
- Genotype prior to treatment
- Hepatitis B infection screening
- Vaccination against hepatitis A
- Vaccination against hepatitis B
- Evaluation for liver fibrosis
- Initiation of treatment
- HCV Viral Load 4 – 12 weeks into treatment and 12 weeks following cessation of treatment

**Hepatitis B and C Surveillance Report**

New York City, 2013  
(Published February 2015)

New York City Department of Health and Mental Hygiene  
Division of Disease Control  
Bureau of Communicable Diseases

**Hep C Risk Assessment**

- Were you born between 1945 and 1965?
- Have you ever injected drugs, hormones, steroids, silicone or cosmetics – even if it was once a long time ago?
- Did you have a blood transfusion or organ transplant before 1992?
- Are you HIV+?
- Were you born in Egypt, Pakistan, Russia or the former Soviet Republic?
- Did you have a blood transfusion or medical procedure in Egypt, Pakistan, Russia or the former Soviet Republic?
- Have you ever inhaled (snorted) drugs?
- Did your mother have hepatitis C when you were born?
- Have you ever gotten a tattoo or piercing from anyone other than a licensed professional?
- Have you had abnormal liver tests or been told you have liver disease?
- Have you ever been on long-term dialysis?
- Were you ever exposed to blood or stuck with a needle on the job?
- Have you ever been incarcerated?

**Get Tested. Get Cured!**

For more info, text LIVER to 877-877 or visit [nyc.gov/health/hepatitis](http://nyc.gov/health/hepatitis).

**ГЕПАТИТ С ФАКТЫ**

## PRIMARY PREVENTION

**SOCIAL MEDIA** – twitter, Facebook ads

**TREATMENT AS PREVENTION** – reduce transmission; working with Methadone maintenance programs

## INCREASE PROVIDER KNOWLEDGE and CAPACITY

**CLINICAL NETWORK** - visiting NYC hospitals to raise awareness and foster collaboration around HCV services across hospital divisions; learning collaborative; collaboration with hepatologists for tele-mentoring

**TRAINING** - grand rounds, technical assistance conferences, toolkit

# RESULTS

## SCREENING and LINKAGE

**LINKAGE TO CARE** using surveillance data for patient information and mobile technology (texting)

### **CHECK HEP C Year 2 - (privately-funded)**

- Enrolled 459 participants, April 2014 – March 2015, at 4 sites
- 74.3% (132) initiated HCV treatment (eligible candidates = 279)
- 64.4% (85) completed HCV treatment

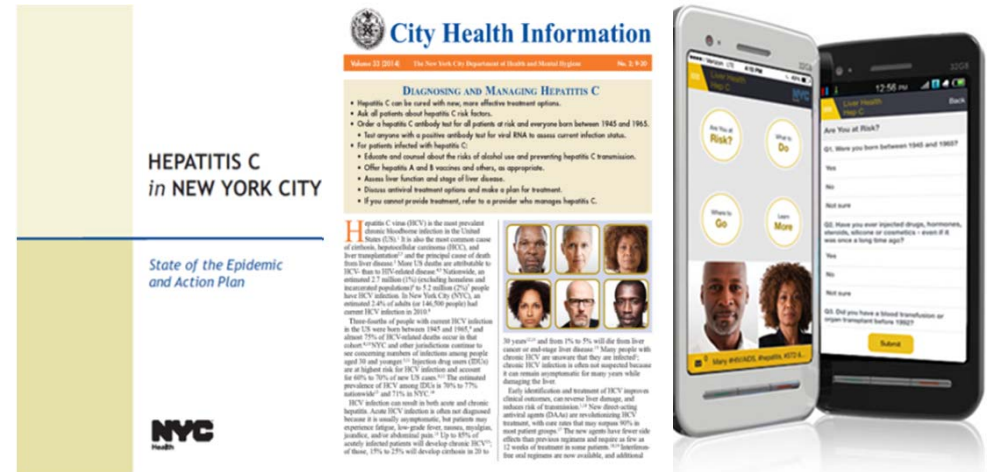
### **PROJECT INSPIRE [Centers for Medicare and Medicaid Services (CMS)-funded]**

- Standardized evidence-based intervention with a unique health promotion curriculum and material
- Current enrollment approx. 525 since January (3-year target: 3,200)
- Working with Medicaid managed care organizations to create and test a payment model to cover the above services

## ENHANCE PUBLIC AWARENESS

**NYC HEP C TASK FORCE** – network of over 100 organizations, holds 10 meetings and trainings a year leading to regular information exchange and development of new tools and intervention

**PUBLIC AWARENESS** – print materials, mobile App, texting campaign, website, awareness events



## POLICY

**LEGISLATIVE EVENTS** –collaborate with NY City Council to enhance awareness and gather policy support

**POLICY POSITIONS** –analyzed and identified policy issues regarding health insurance, the Affordable Care Act, and HCV medication pricing and approval for treatment meds to inform DOHMH HCV linkage to care and treatment programs

### **FOR MORE INFORMATION**

NYC DOHMH website: [www.nyc.gov/hepatitis](http://www.nyc.gov/hepatitis)  
NYC Hep C Task Force: [www.hepfree.nyc](http://www.hepfree.nyc)

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