

### **ACCEPT**

Addiction & Co-morbid Conditions: Enhancing Prevention & Therapeutics

### Webex link to join from PC, Mac, iOS or Android:

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Join by phone: +1-415-655-0001

Meeting number/Access code: 120 276 9209

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For attendance, purposes please text the following code: <u>HULGEH</u> to <u>608-260-7097</u>

Session Date: Friday, August 18, 2023

### Didactic Topic and Presenter: Wisconsin Hanatitis Eliminatio

Wisconsin Hepatitis Elimination

Kailynn Mitchell, MPH
Viral Hepatitis Prevention Coordinator
Wisconsin Department of Health Services

12:15 PM: Attendance text-in – Introductions

• 12:25 PM: Didactic Presentation

o Presenter: Kailynn Mitchell, MPH

12:45PM: Question and Answer

1:15 PM End of Session

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2023 Universal Activity Number (UAN): JA0000358-0000-23-025-L01-P; JA0000358-0000-23-025-L01-T Continuing Education Units

The University of Wisconsin–Madison ICEP, as a member of the University Professional & Continuing Education Association (UPCEA), authorizes this program for 0.1 continuing education units (CEUs) or 1 hour.



#### **ECHO ACCEPT**

### Addiction & Co-morbid Conditions: Enhancing Prevention & Therapeutics 2022-2024

### Wisconsin Hepatitis Elimination 8/18/23

Didactic Presenter: Kailynn Mitchell, MPH

Provided by the University of Wisconsin–Madison Interprofessional Continuing Education Partnership (ICEP)

### **Intended Audience:**

Nurses, Nurse Practitioners, Pharmacists, Physicians, Physician Assistants, Pharmacy Technicians, Psychologists, Social Workers, Patient/Caregivers, Students

#### Objectives:

As a result of this educational regularly scheduled series, learners as members of the healthcare team will be able to:

- Describe the testing and vaccination recommendations for Hepatitis A, B, and C
- Explain how you and/or your health system can help eliminate hepatitis in Wisconsin.
- Describe the steps to engage in statewide hepatitis elimination planning

#### Policy on Disclosure

It is the policy of the University of Wisconsin–Madison Interprofessional Continuing Education Partnership (ICEP) to identify, mitigate and disclose all relevant financial relationships with ineligible companies\* held by the speakers/presenters, authors, planners, and other persons who may influence content of this accredited continuing education (CE). In addition, speakers, presenters and authors must disclose any planned discussion of unlabeled/unapproved uses of drugs or devices during their presentation. For this accredited continuing education activity, all relevant financial relationships have been mitigated and detailed disclosures are listed below.

\* Ineligible companies are those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. The ACCME does not

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Name	Role	Financial Relationship Disclosures	Discussion of Unlabeled/Unapproved uses of drugs/devices in presentation?	COI completion date
Randall Brown	RSS Chair	Usona Institute (Grant / Contract), multi-disciplinary association for psychedelic studies (Grant / Contract)	Yes	1/30/2023
Nada Rashid	RSS Coordinator	No relevant financial relationships to disclose	No	1/31/2023
Kathleen Maher	RSS Coordinator	No relevant financial relationships to disclose	No	1/30/2023
Ritu Bhatnagar	Planner	No relevant financial relationships to disclose	Yes	1/29/2023
Paul Hutson	Planner	No relevant financial relationships to disclose	Yes	1/28/2023
Susan Mindock	Planner	No relevant financial relationships to disclose	No	1/31/2023
Sheila Weix	Planner	No relevant financial relationships to disclose	No	2/3/2023
Kellene Eagen	Planner	No relevant financial relationships to disclose	No	1/27/2023
Joseph Galey	Planner	No relevant financial relationships to disclose	Yes	1/27/2023
David Leinweber	Planner	No relevant financial relationships to disclose	No	4/13/2023
Kailynn Mitchell	Presenter	No relevant financial relationships to disclose	No	8/10/2023

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## Wisconsin Hepatitis Elimination

**UW Madison Project ECHO Meeting | August 18, 2023** 



## Introduction

Kailynn Mitchell, MPH
Viral Hepatitis Prevention Coordinator
Wisconsin Department of Health Services
Harm Reduction Unit

## Agenda

- 1. Hepatitis Reminders
- 2. Hepatitis A Virus (HAV)
- 3. Hepatitis B Virus (HBV)
- 4. Hepatitis C Virus (HCV)
- 5. Hepatitis Elimination
- 6. Questions and Answers

## Hepatitis Reminders

## Viral Hepatitis

- Is often caused by a virus.
- Many people with hepatitis B and C don't know they have an infection.
- Testing is necessary to know if you have it.
- If a person has had one type of viral hepatitis in the past, they can still get the other types.

## **Hepatitis Prevention**

- Hepatitis A and B vaccines
- Testing for hepatitis B and C
- Hepatitis C treatment

## **Hepatitis Prevention**

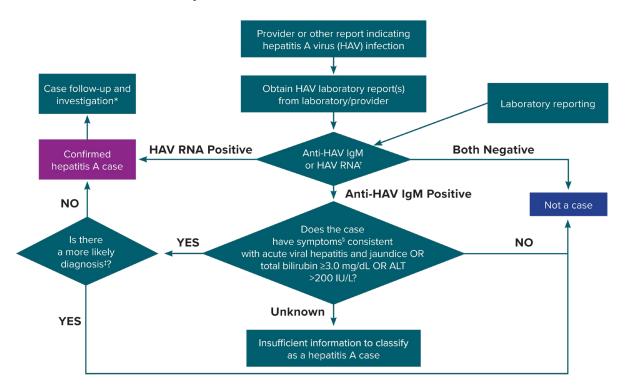
People who use or inject drugs should be vaccinated against hepatitis A and hepatitis B.

People who use or inject drugs should be **tested** for hepatitis B and hepatitis C.

## Hepatitis A Virus (HAV)

## **HAV Screening Recommendations**

### Process for Hepatitis A Case Ascertainment and Classification



### **HAV Vaccination Recommendations**

### All adults over the age of 18 years old:

- 2 dose series HepA (Havrix or Vaqta)
- 3 dose series HepA-HepB (Twinrix)

 Vaccine dose given within 2 weeks of HAV exposure to all unvaccinated people aged >12 months of age.

## **HAV Vaccination Recommendations**

### Who should get vaccinated:

- People with chronic liver disease
- People living with HIV
- Those who have male-male sexual contact
- People who use drugs

- People experiencing homelessness
- Those who travel outside U.S.
- Pregnant individuals

## **HAV Summary**

- HAV age-range vaccination recommendations.
- Critical role of public health partners in getting adults caught up on vaccination.
- Vaccination is cost-saving to the health care system.

### **HAV Resources for Health Professionals**

**CDC Hepatitis A Guidelines and Recommendations** 

**CDC Hepatitis A Serology Training** 

CDC Hepatitis A Questions and Answers for Health Professionals

**CDC HAV Surveillance Guidance** 

## Hepatitis A Program Contacts

<u>Kimberly Meinholz</u> – <u>Kimberly Meinholz@dhs.wisconsin.gov</u>

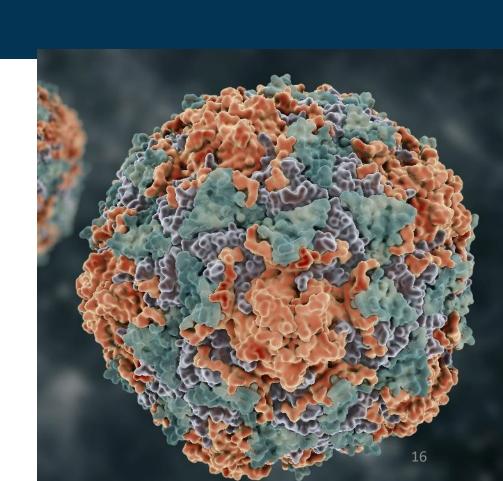
Susann Ahrabi-Fard - Susann.AhrabiFard@dhs.wisconsin.gov

DHS Wisconsin Hepatitis A Webpage

## Hepatitis B Virus (HBV)

## **HBV**

- HBV Can be acute or chronic.
- Chronic HBV can lead to cirrhosis, liver cancer, and death.
- Treatments are available, but no cure exists.
- Vaccination is best way to prevent hepatitis B.



# New HBV Universal Screening Recommendations – March 2023

- All adults aged 18 years and older at least once, using triple panel test
- Pregnant people during each pregnancy
- People who are at ongoing risk for exposure should be tested periodically



Anyone who requests HBV testing should be tested.

# **Hepatitis B Test Results**

### **CDC:** Interpretation of Hepatitis B Serologic Results

Test and Result	Interpretation
HBsAg—Positive Total anti-HBc — Positive IgM anti-HBc — Positive Anti-HBs — Negative	Acute infection

## Link to care

## Hepatitis B Test Results

### **CDC:** Interpretation of Hepatitis B Serologic Results

<b>Interpretation</b>
Chronic Infection

## Link to care

### CDC: Interpretation of Hepatitis B Serologic Results

## Hepatitis B Test Results

Test and Result	Interpretation
HBsAg — Negative Total anti-HBc — Positive	Resolved Infection
Anti-HBs — Positive	

## Counsel about HBV infection reactivation risk

### CDC: Interpretation of Hepatitis B Serologic Results

## Hepatitis B Test Results

Test and Result	Interpretation
HBsAg — Negative	Immune from
Total anti-HBc — Negative	receipt of prior
Anti-HBs — Positive	vaccination
	(if documented
	complete series)

If no documentation of full vaccination, then complete vaccine series per ACIP recommendations

### **CDC: Interpretation of Hepatitis B Serologic Results**

# **Hepatitis B Test Results**

Test and Result	Interpretation	
HBsAg — Negative	Susceptible,	
Total anti-HBc — Negative	never infected	
Anti-HBs — Negative <sup>3</sup>	(if no	
	documentation	
	of HepB vaccine	
	series	
	completion)	

## Offer HBV vaccine per ACIP recommendations

## Vaccines For Adults Program

- Adults aged 19 and older are eligible to receive free vaccines if they are uninsured or underinsured.
- Most local and Tribal health departments are VFA providers.

Wisconsin Vaccines for Adults Program

## **HBV Vaccination Recommendations**

All adults over the age of 19 years old should complete a 2- or 3- or 4- dose series of Hepatitis B vaccinations.

- 2 dose series Heplisav-B
- 3 dose series Engerix-B, PreHevbrio, or Recombivax
- 3 dose series HepA-HepB (Twinrix)

4-dose series HepA-HepB (Twinrix)

## **HBV Vaccination Recommendations**

### Who should get vaccinated:

- Age 19–59 years
- Age 60 and older with risk known exposure factors
- People with chronic liver disease
- People living with HIV

- Those who have sexual exposure risk
- People who use drugs
- Traveling outside U.S.

## **HBV Summary**

- All adults aged 19-59 should receive a hepatitis B vaccine series.
- All adults aged 18 and older should be screened for HBV at least once and during every pregnancy.
- Vaccination against hepatitis B is cost-saving to the healthcare system and is the best way to prevent HBV infections.
- Opportunity for providers to get adults screened and vaccinated to achieve the goal of hepatitis B elimination.

### **HBV** Resources for Health Professionals

<u>University of Washington: Hepatitis B Online course</u>

**CDC Online Serology Training** 

CDC Recommendations for HBV Screening, Testing, and Vaccination

**CDC Hepatitis B Information** 

## Hepatitis B Program Contacts

<u>Stephanie Borchardt</u> - <u>Stephanie.Borchardt@dhs.wisconsin.gov</u>

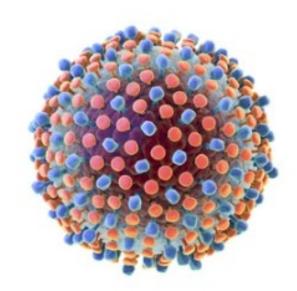
Sarah Born - Sarah.Born2@dhs.wisconsin.gov

DHS Wisconsin Immunization - Hepatitis B Website

## Hepatitis C Virus (HCV)

## **HCV**

- HCV can be acute or chronic.
- Chronic hepatitis C can lead to cirrhosis, liver cancer, and death.
- HCV is curable, but reinfection can happen.
- Testing is the only way to know if you have HCV.

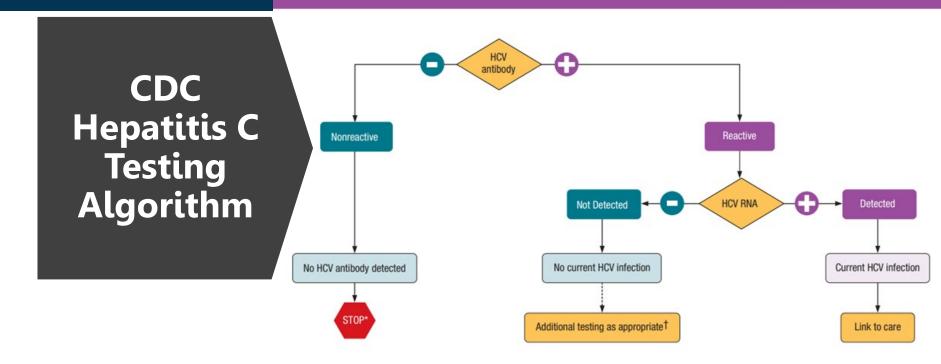


## **Universal HCV Testing Recommendations**

Who should be screened for hepatitis C?	How often?
All people aged 18 and older	At least once in lifetime
All pregnant people	During every pregnancy
All people with certain conditions, including people living with HIV	One-time testing
People with ongoing risk factors, including people who inject drugs	Routine, periodic testing

## Recommended Testing Sequence for Identifying Current Hepatitis C Virus (HCV) Infection





#### **HCV Treatment**

#### Direct Acting Antivirals (DAAs):

- Are an oral medication.
- Have more than 95% cure rate.
- Are covered under WI Medicaid and HIV/AIDS Drug Assistance Program (ADAP).
- Have patient assistance programs available.
- Are more accessible through improved pharmacy partnerships.

### **Eligibility for HCV Simplified Treatment**

Eligible for Simplified Treatment	Not Eligible for Simplified Treatment
Adults with HCV infection (any genotype); treatment-naive and without cirrhosis	Prior HCV treatment
	Cirrhosis
	Known or suspected hepatocellular carcinoma
	Prior liver transplantation
	HIV or HBsAg positive
	Current pregnancy 34

#### Wisconsin Medicaid HCV Treatment has...

- No sobriety restrictions.
- No provider restrictions.
- No disease severity restrictions.
- No prior authorization needed.
- Retreatment considered.

### Hepatitis C Treatment Locator

Allows people to enter their zip code and find nearby health organizations that treat HCV.

If clinic would like to be added, use this online request form.



Enter your zip code below to find a hepatitis C treatment provider.

25	~
miles of	1,27
Zip Code	Find

C may depend on where you live and what insurance you have.

Please contact organizations directly for information on services and costs.

## Hepatitis C Disease Intervention Specialist (DIS)

- Emily Hacker, MPH
- Email: <u>Emily.Hacker@dhs.wisconsin.gov</u>
- Cases they assist LTHDs with upon request:
  - Acute cases
  - Pregnant cases
  - Perinatal cases (aged 3 years or less)

# Cost Effectiveness of HCV Screening and Treatment

 Untreated chronic HCV can lead to health complications.

HCV treatment reduces the risks of these health issues.

Cost of HCV treatment has decreased.

State-of-Hep-C-Treatment-Costs-Fact-Sheet.pdf (stateofhepc.org)

### Resources for Health Professionals

Wisconsin Hepatitis C Guidelines for Local Public Health

AASLD/IDSA Hepatitis C Guidelines

<u>University of Washington: Hepatitis C Online Course</u>

UCSF National Clinician Consultation Center for HCV

### **Hepatitis C Program Contact**

Kailynn Mitchell - Kailynn.Mitchell@dhs.wisconsin.gov

Wisconsin Hepatitis C Webpage

Nationwide hepatitis elimination goals by 2030 are:

To prevent new hepatitis infections and deaths.

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- To increase the number of people who know their hepatitis status.

#### Nationwide hepatitis elimination goals by 2030 are:

- To prevent new hepatitis infections and deaths.
- To increase the number of people who know their hepatitis status.
- To ensure that every person living with hepatitis has health care and treatment, free from stigma and discrimination.

Prevents HIV, HBV, HCV and other infections

#### Services offered:

Hepatitis C, HIV, and STI testing

Prevents HIV, HBV, HCV and other infections.

- Hepatitis C, HIV, and STI testing
- Health education about infectious diseases

Prevents HIV, HBV, HCV and other infections.

- Hepatitis C, HIV, and STI testing
- Health education about infectious diseases
- Access to sterile supplies and exposure reduction education

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- Connects clients to community resources like food banks, shelters, substance use treatment centers, healthcare systems, insurance, etc.

Improve universal HBV and HCV screening at health systems

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- Attend elimination community webinars
- Join elimination planning groups
- Provide feedback on draft elimination plan

### **Hepatitis Elimination Planning**

Email questions, suggestions, comments about hepatitis elimination planning in Wisconsin and what you would like to see included in the statewide plan.

DHSHepatitisEliminationPlan@dhs.wisconsin.gov

Planning groups will begin in September!

### Questions?