

HIV/HCV Co-Infection Watch: 2018 Annual Monitoring Report



The HIV/HCV Co-Infection Watch is a publication of the Community Access National Network (CANN). It is a patient-centric informational portal serving three primary groups – Patients, Healthcare Providers, and AIDS Service Organizations.

Learn more: <http://www.tiicann.org>

Background

- Launched in January 2015
- Monthly summary on relevant data on co-infection of human immunodeficiency virus (HIV) and hepatitis C (HCV)
- Initially, limited focus on:
 - AIDS Drug Assistance Programs
 - Medicaid
 - Latest News related to HIV/HCV and Co-Infection
- Subsequently, expanded focus on:
 - Veterans
 - Patient Assistance Programs (PAPs)
 - Harm Reduction
 - Regional Trends
- Future Focus:
 - Incarcerated Populations

Background – What's included

- Overview
- Findings
- AIDS Drug Assistance Programs (ADAPs)
- Medicaid Programs
- Veterans Administration standards
- Patient Assistance Programs (PAPs)
- Harm Reduction Programs
- Regional Trends
- Latest News
- Contact Information
- Disclaimer
- Methodology
- References

ADAP HCV DAA Trends: 2015-2018

- **Coverage Trends**

- January 2015:

- States offering Expanded Coverage – 7 (CA, CO, HI, IA, MA, MN, NJ)
 - States offering only Basic Coverage – 24

- June 2015:

- States offering Expanded Coverage – 11 (AZ, AR, CA, CO, HI, IA, LA, MA, MN, NJ, SD)
 - States offering only Basic Coverage – 24

- January 2016:

- States offering Expanded Coverage – 17 (AZ, AR, CA, CO, DE, HI, IA, ME, MA, MN, NJ, OK, PA, TN, VA, WA, DC)
 - States offering only Basic Coverage – 18

- June 2016:

- States offering Expanded Coverage – 26 (AZ, AR, CA, CO, DE, FL, GA, HI, IL, IA, LA, ME, MD, MA, MN, NE, NH, NJ, OK, PA, SD, TN, VA, WA, DC, PR)
 - States offering only Basic Coverage - 16

- January 2017:

- States offering Expanded Coverage – 29 (AZ, AR, CA, CO, DE, FL, GA, HI, IL, IA, LA, ME, MD, MA, MN, NE, NH, NJ, NY, OK, OR, PA, SD, TN, VA, WA, WI, DC, PR)
 - States offering only Basic Coverage – 13

- August 2017:

- States offering expanded coverage – 33 (AZ, AR, CA, CO, DE, FL, GA, HI, IL, IA, LA, ME, MD, MA, MN, MO, MT, NE, NH, NJ, NY, ND, OK, OR, PA, SD, TN, TX, VA, WA, WI, DC, PR)
 - States offering only Basic Coverage – 12

ADAP HCV DAA Trends: 2015-2018

- **Coverage Trends**

- January 2018:

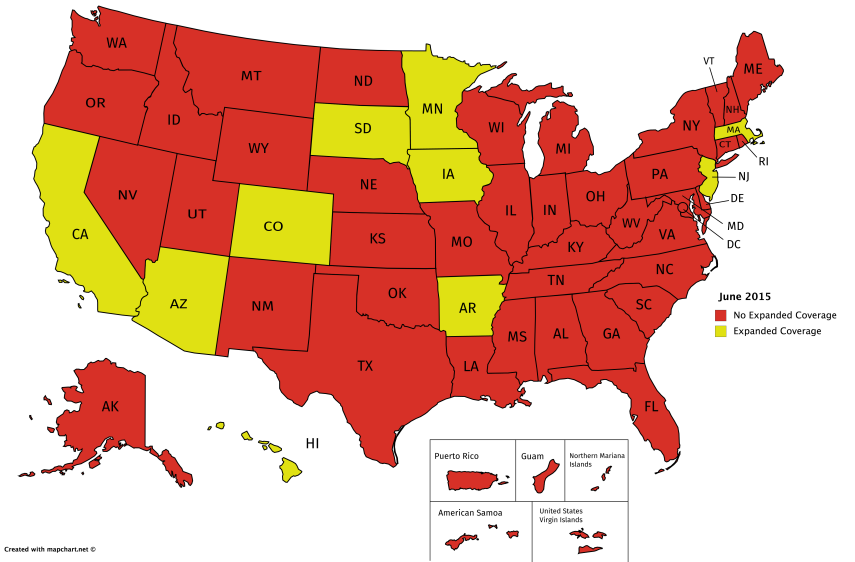
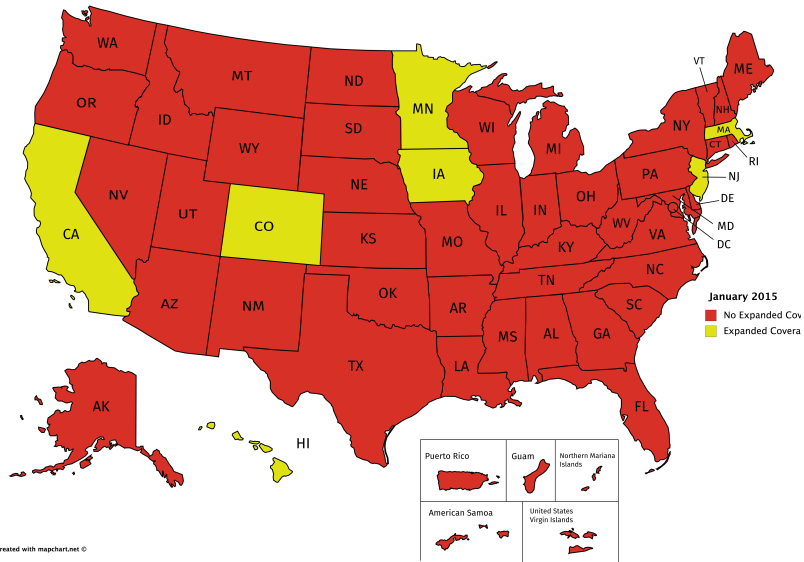
- States offering expanded coverage – 37 (AL, AZ, AR, CA, CO, DE, FL, GA, HI, IL, IA, LA, ME, MD, MA, MN, MO, MT, NE, NH, NJ, NY, NC, ND, OK, OR, PA, RI, SD, TN, TX, VA, WA, WV, WI, DC, PR)
 - States offering only Basic Coverage – 8

- August 2018:

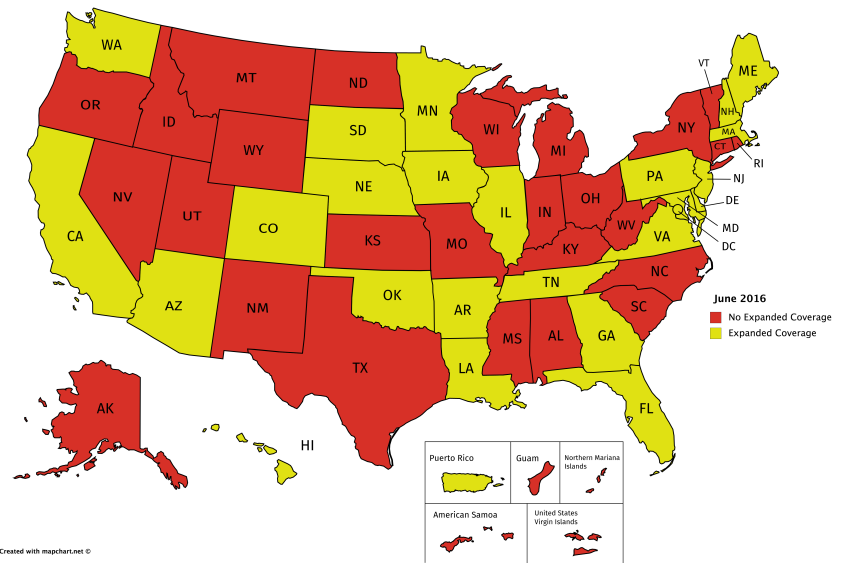
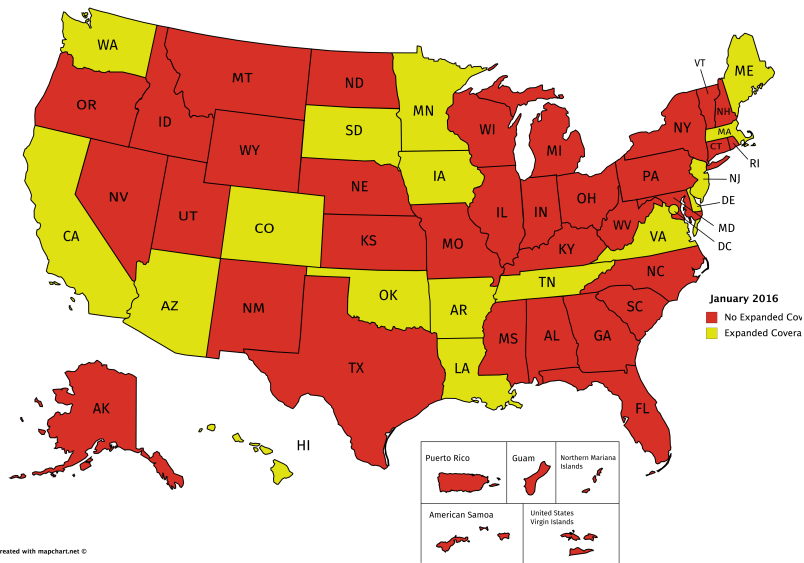
- States offering expanded coverage – 38 (AL, AZ, AR, CA, CO, DE, FL, GA, HI, IL, IA, LA, ME, MD, MA, MI, MN, MO, NE, NH, NJ, NM, NY, NC, ND, OK, OR, PA, RI, SD, TN, TX, VA, WA, WV, WI, DC, PR) – MT drops expanded coverage
 - States offering only Basic Coverage - 6

- States have continued to expand coverage as newer, cheaper HCV DAAs hit the market.
 - Expansion picked up marginally
 - Zepatier, Harvoni, and Mavyret are the most covered drugs – 33, 30, & 29, respectively
 - Olysio exited the market in May 2018; Technivie and Viekira XR will exit in January 2019
 - Mavyret has become the fastest adopted drug

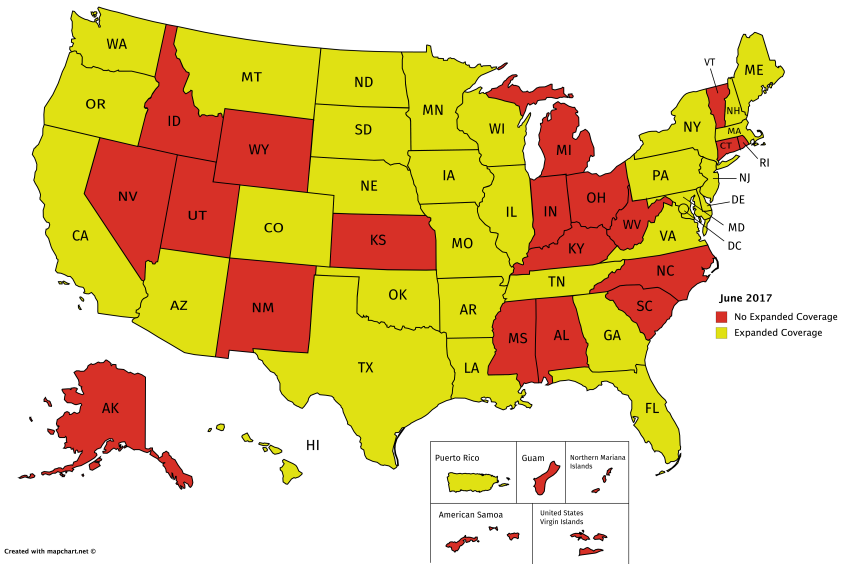
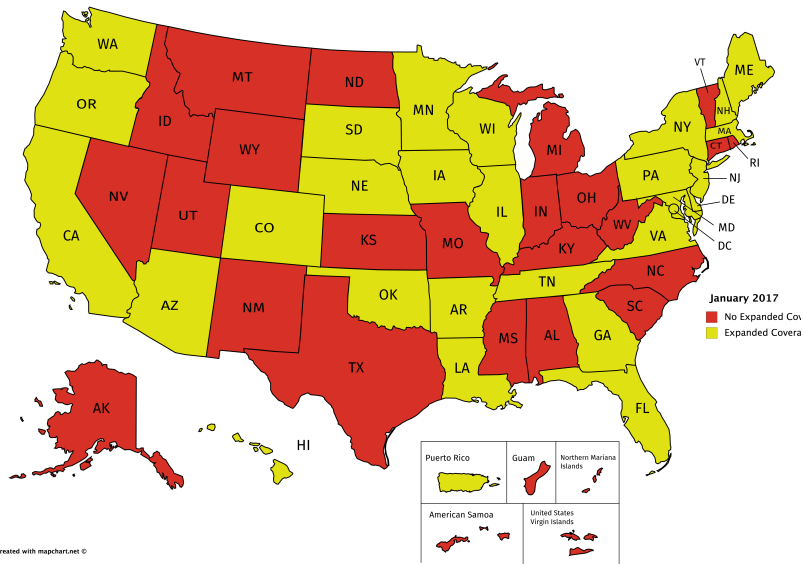
ADAP Expanded Coverage: January - June 2015



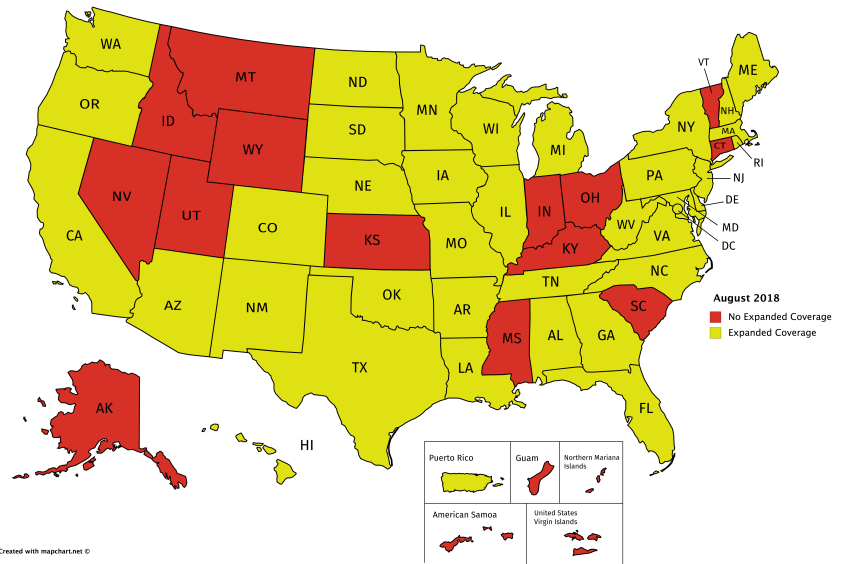
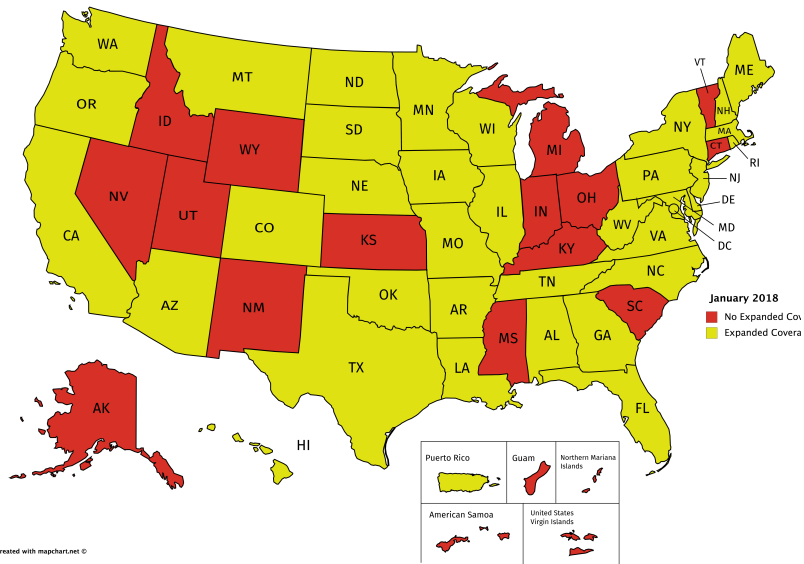
ADAP Expanded Coverage: January – June 2016



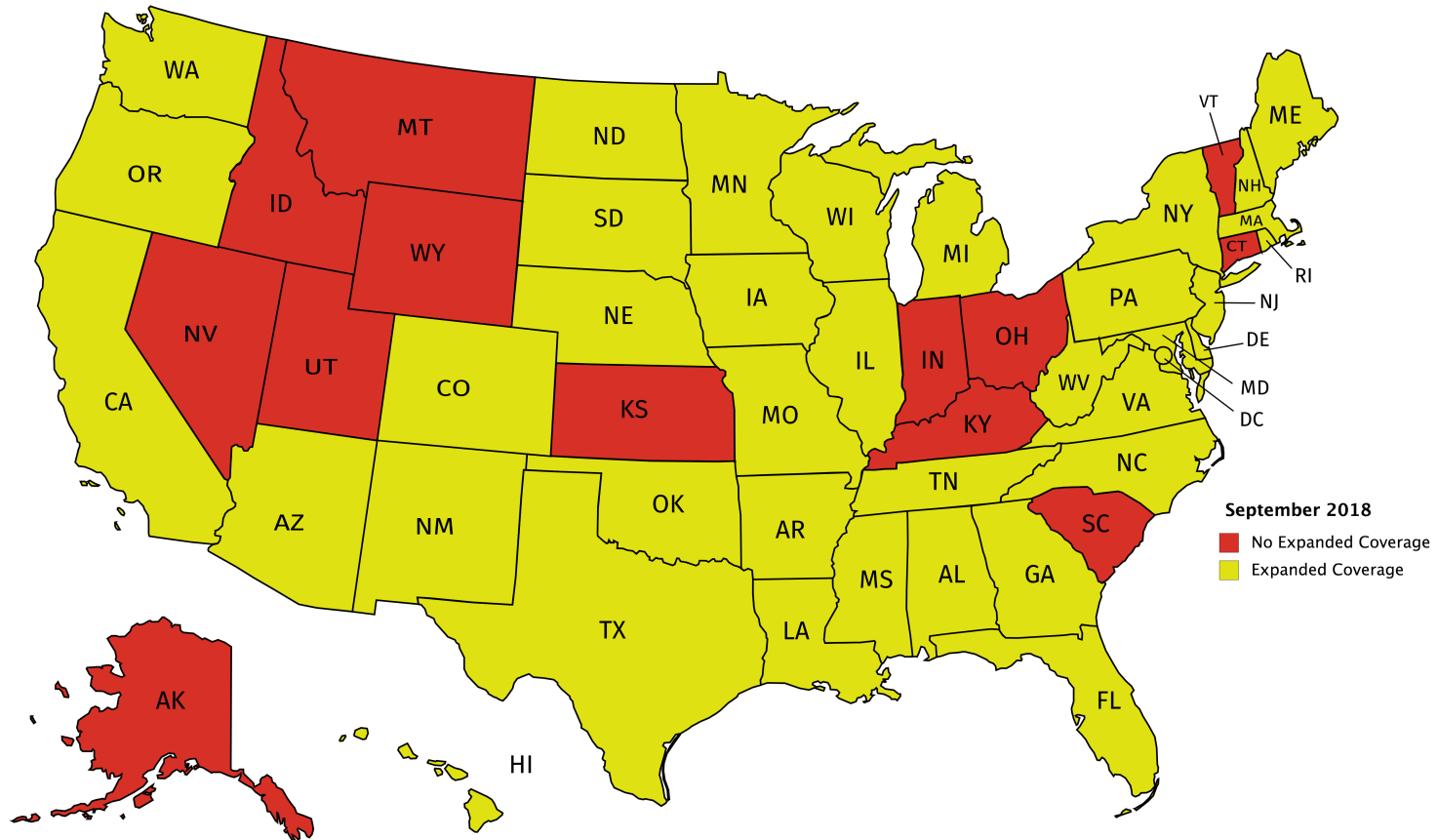
ADAP Expanded Coverage: January - June 2017



ADAP Expanded Coverage: January - August 2018



ADAP Expanded Coverage: September 2018



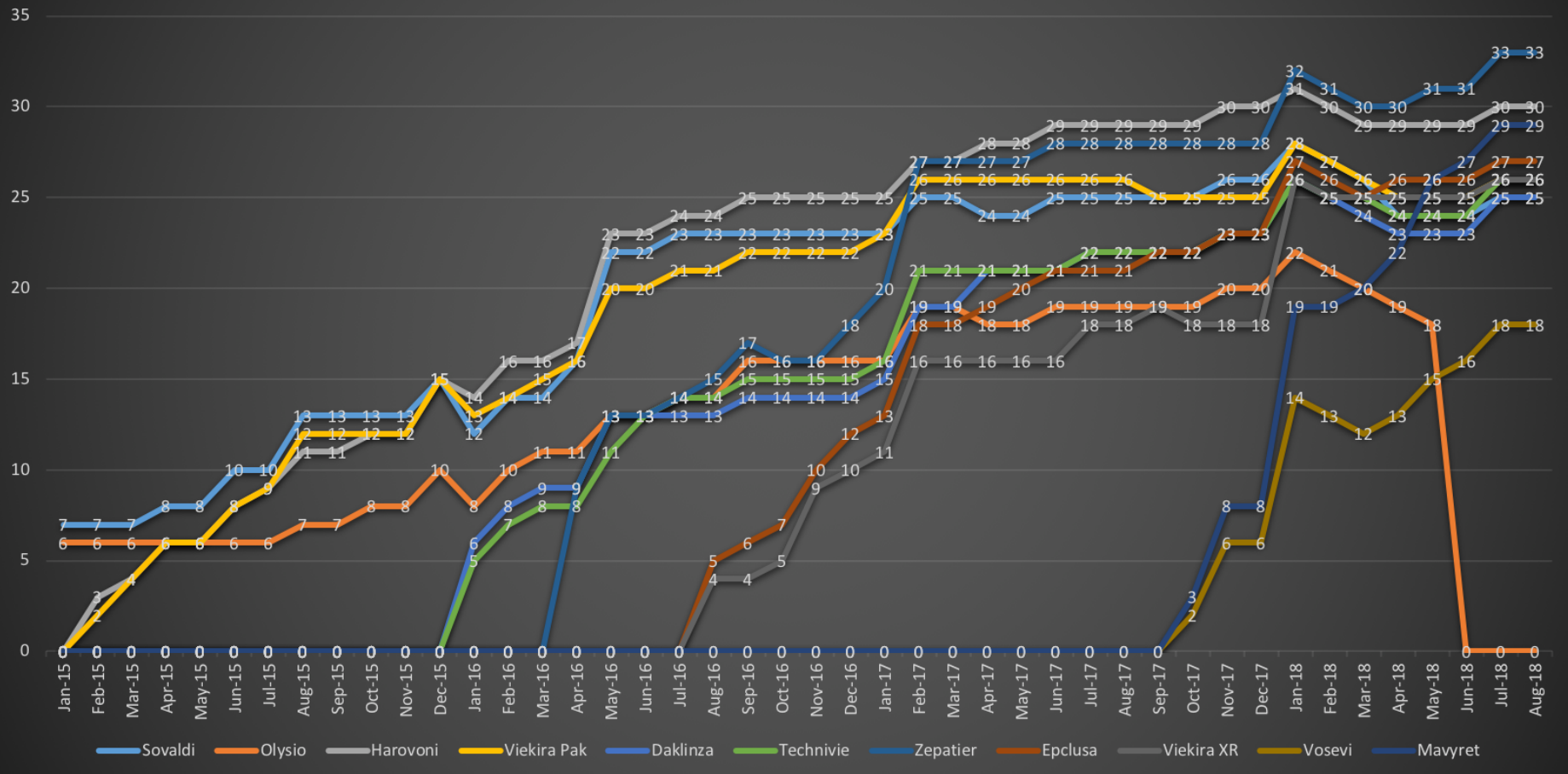
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Co-Infection Watch

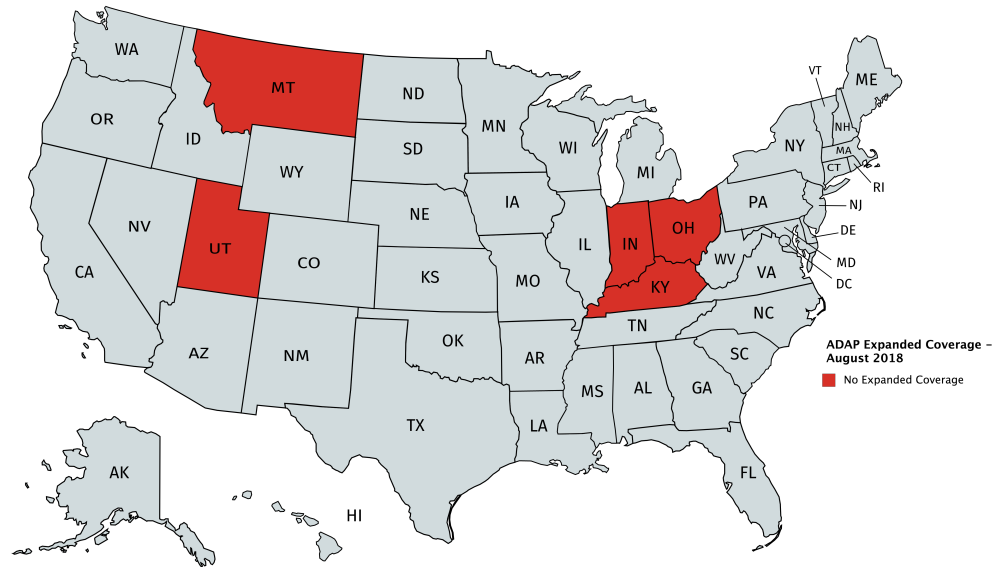
ADAP HCV Drug Utilization: January 2015 – August 2018

ADAP HCV Drug Adoption: January 2015 - August 2018



Top Ten HCV Rates Compared to Expanded ADAP HCV Coverage

Ten Highest Rates of HCV Infection (2016)		
1	Massachusetts	6.2
2	West Virginia	5.1
3	Delaware	2.6
4	Utah	2.5
5	Kentucky	2.3
	South Dakota	2.3
	Tennessee	2.3
6	Indiana	2.2
7	Maine	1.9
	Montana	1.9
8	Pennsylvania	1.8
	Wisconsin	1.8
9	Ohio	1.6
10	New Jersey	1.4

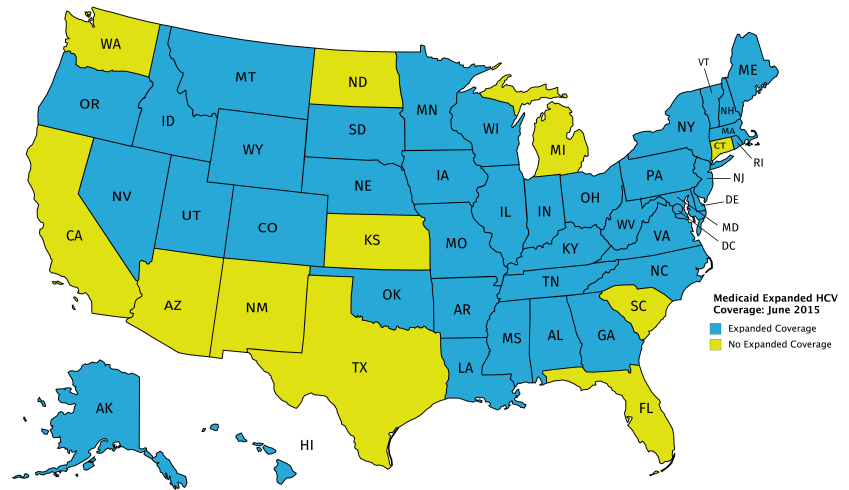
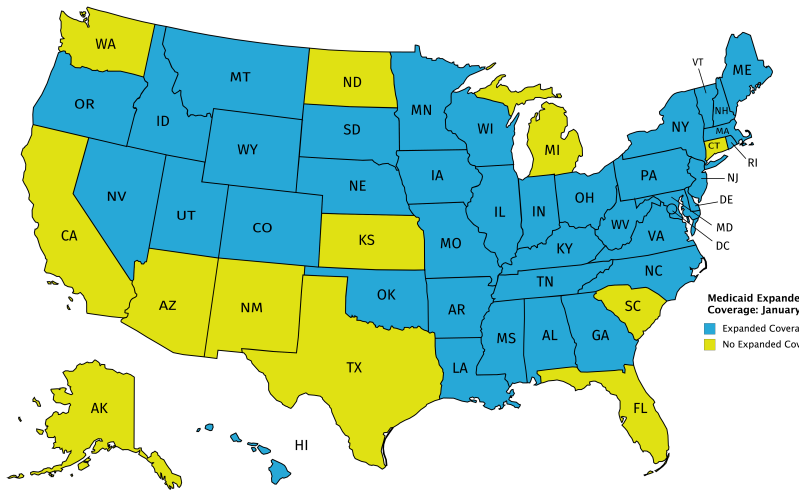


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2015-2018 Trends: Medicaid

- **Coverage Trends**
 - January 2015:
 - States offering Expanded Coverage – 38
 - States offering only Basic Coverage – 12 (AK, AR, CA, CT, FL, KS, MI, NM, ND, RI, SC, TX)
 - June 2015:
 - States offering Expanded Coverage – 39
 - States offering only Basic Coverage – 11 (AR, CA, CT, FL, KS, MI, NM, ND, SC, TX, WA)
 - January 2016:
 - States offering Expanded Coverage – 49
 - States offering only Basic Coverage – 2 (AR, MI)
 - June 2016:
 - States offering Expanded Coverage – 50
 - States offering only Basic Coverage – 1 (AR)
 - August 2016 – August 2018:
 - States offering Expanded Coverage – 51
 - States offering only Basic Coverage – 0
 - All states currently offer Expanded Coverage for HCV drugs
 - Medicaid programs quicker to adopt HCV drugs than ADAPs
 - States with multiple coverage plans are likelier to have plans offering only one or two HCV DAAs

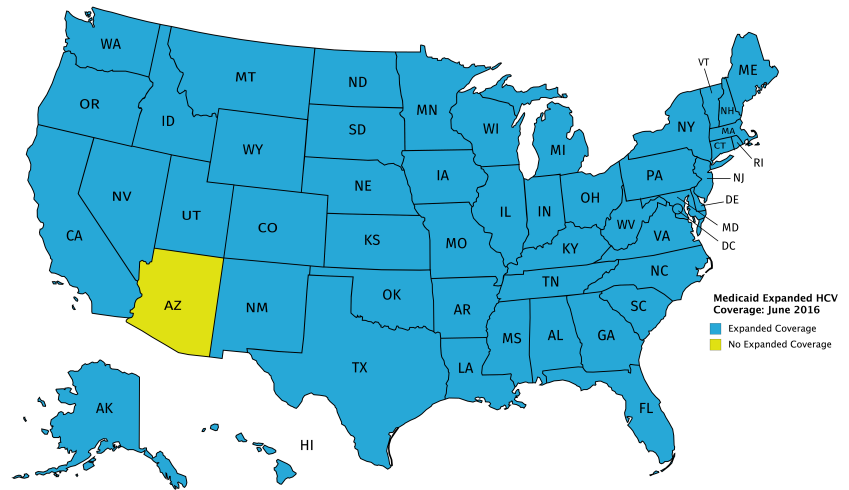
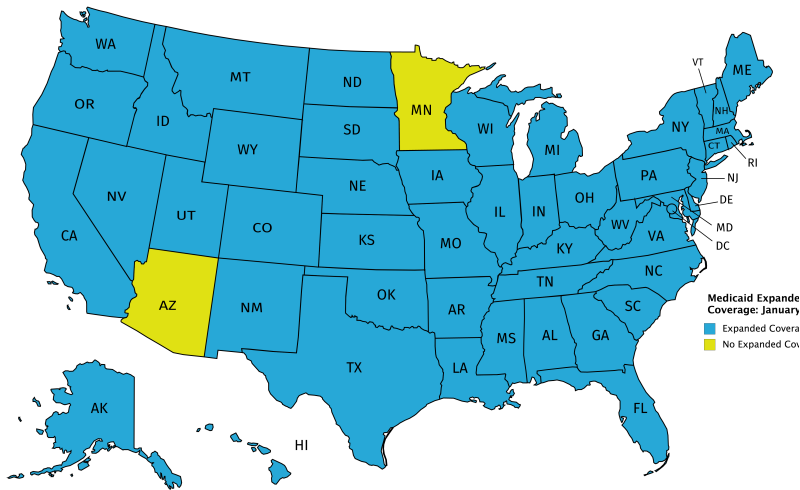
Medicaid Expanded Coverage: January 2015 – June 2015



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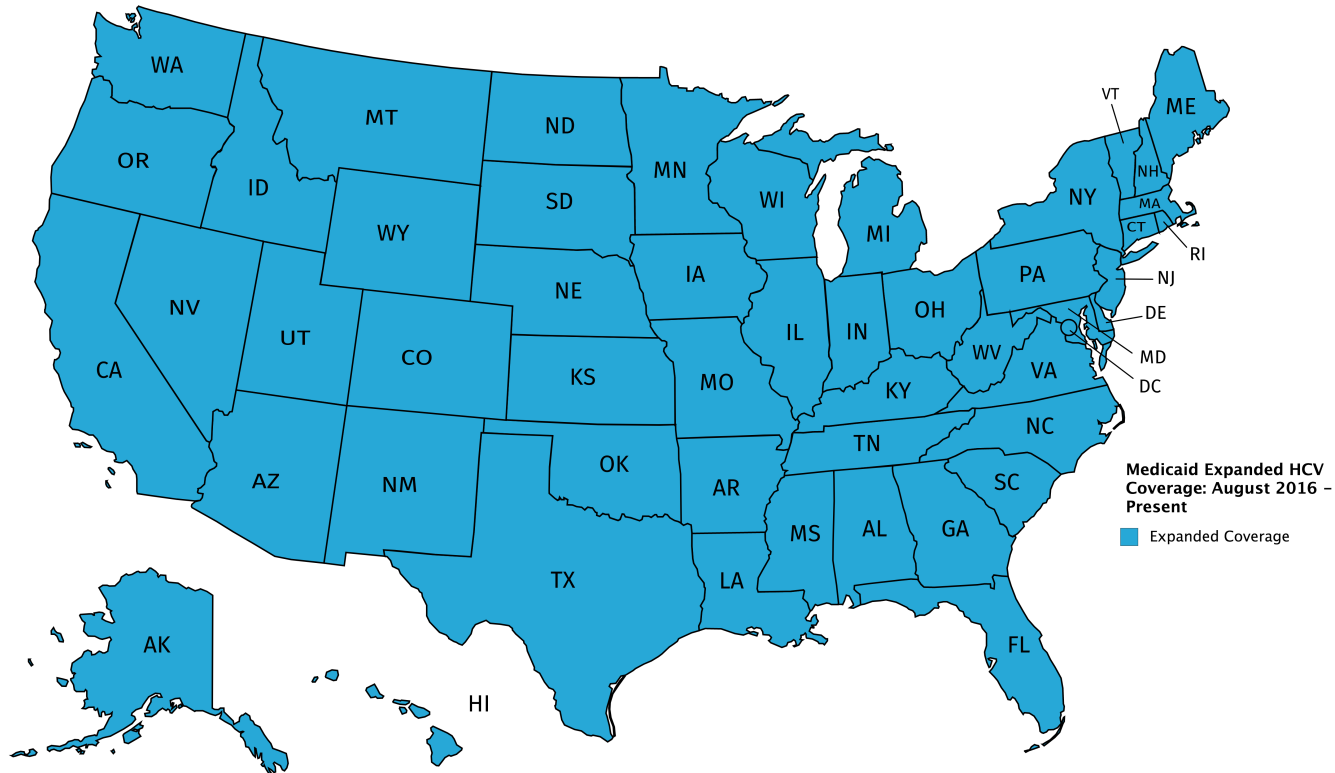
Medicaid Expanded Coverage: January 2016 – June 2016



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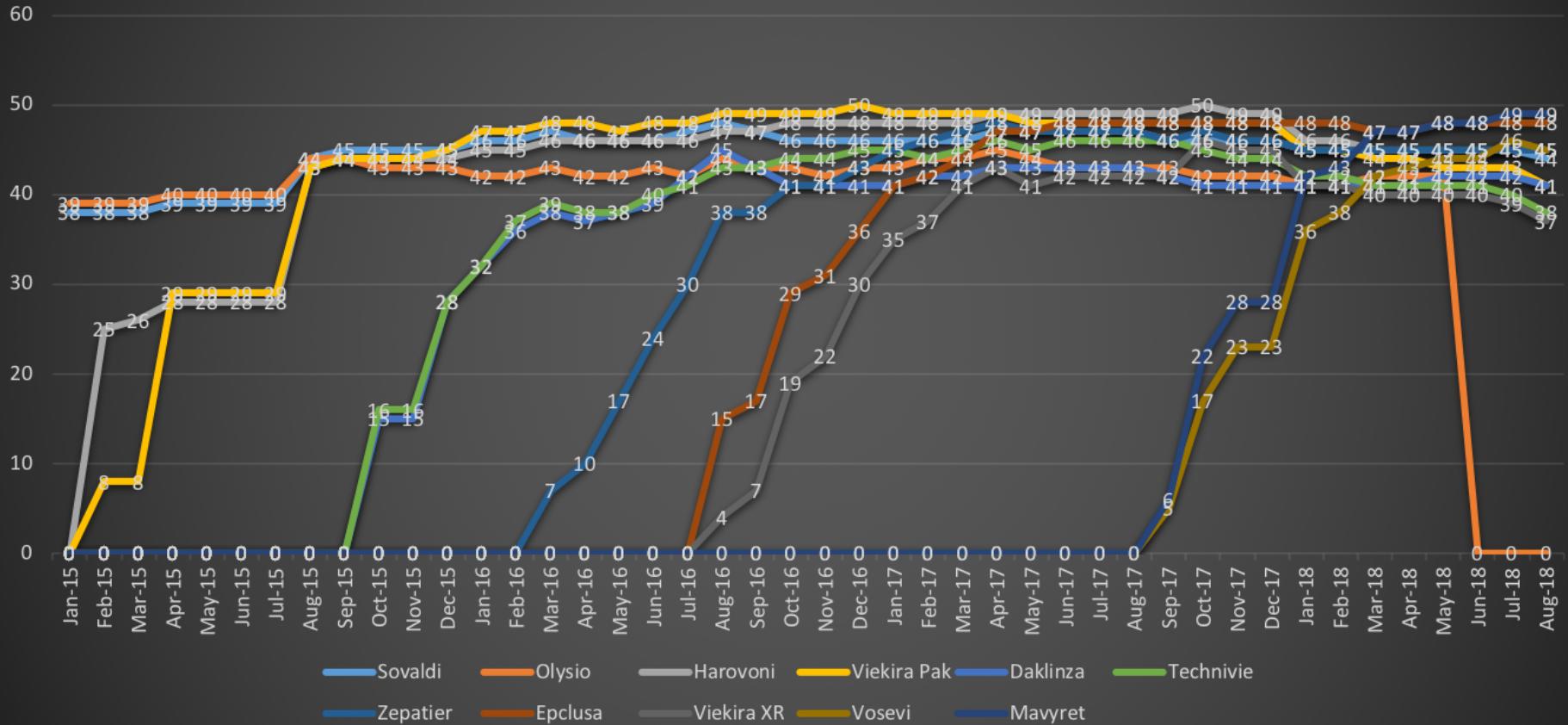
Medicaid Expanded Coverage: August 2016 – Present



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Medicaid HCV Drug Utilization: January 2015 – August 2018

Medicaid HCV Drug Adoption: January 2015 - August 2018



2018 Trends: Veterans Affairs

- **Coverage Trends:**
 - The Report began covering VA HCV coverage in March 2016
 - Coincided with VA announcement of universal coverage for all eligible VA members
 - Most-used drugs: Zepatier, Mavyret, Harvoni, Epclusa, Vosevi (in treatment experienced)
 - VA continues to provide most effective treatment program in government-funded healthcare

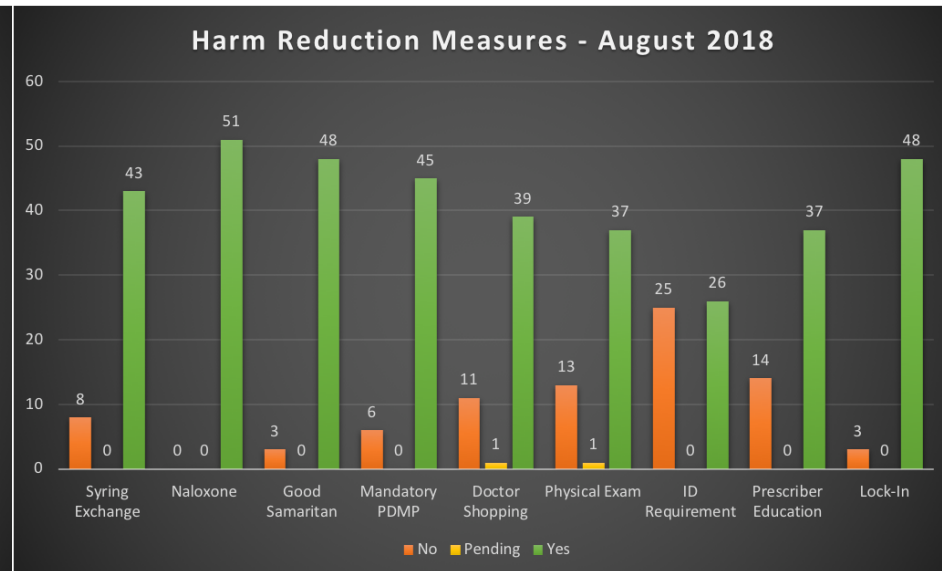
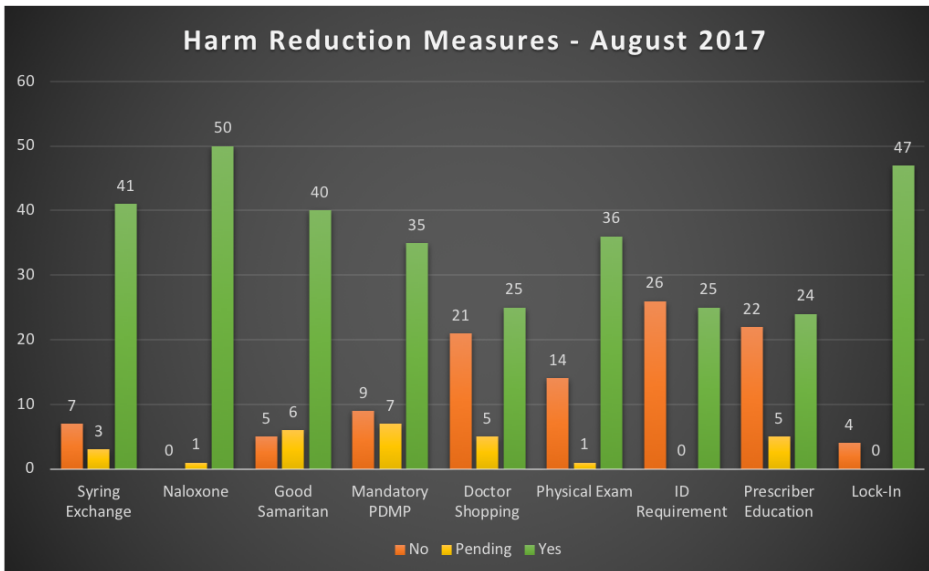
2018 Trends: Harm Reduction

- Syringe Services Programs (SSPs) being met with community/official backlash
 - Scapegoating
 - Anecdotal evidence held up as definitive proof
 - Improper disposal/sharps waste concerns
 - Questioning delivery models and record keeping
 - Expecting immediate results

2018 Trends: Harm Reduction

- Primary barriers to Harm Reduction Measures:
 - Doctor Shopping:
 - Federal blanket statute
 - Reporting/Checking hassle
 - Physical Exam Requirement:
 - Physician/Pain Advocate opposition
 - “Too time consuming”
 - “Too onerous”
 - Patient mobility/barriers to accessing care/treatment
 - ID Requirement for Purchase of Prescription Opioid Drugs:
 - Pain Advocate opposition
 - “Burden on poor/minority patients”
 - Hardware update costs for scanning
 - “Government tracking”
 - Prescriber Education:
 - Physician opposition
 - “Time consuming”
 - Pharmacy Lock-In Programs:
 - Outdated/User unfriendly software/interface
 - Paid Advocate opposition – “Barrier to accessing care/treatment”

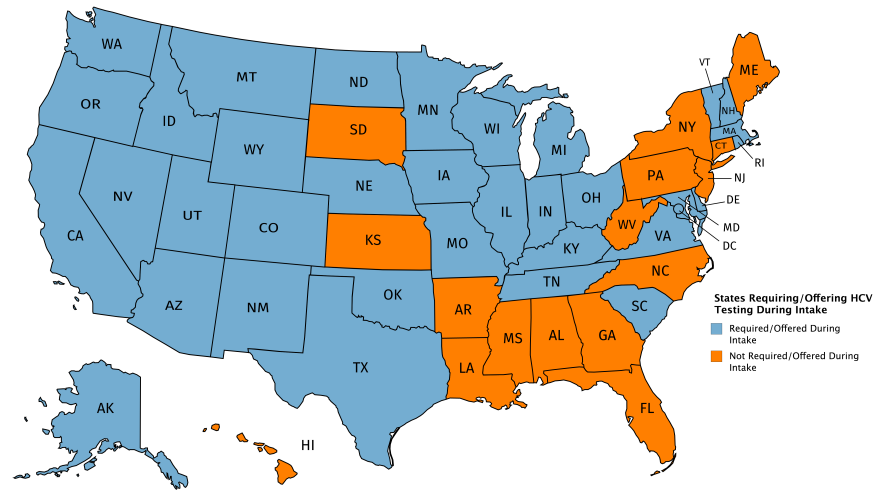
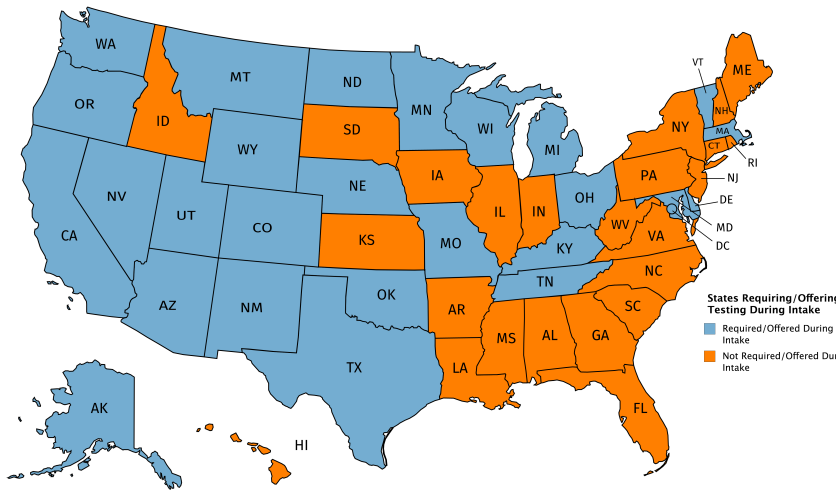
Harm Reduction Measures: August 2016 vs. 2017



Viral Hepatitis in Correction Settings

- Most state Departments of Corrections require or offer testing during intake
 - 27 for HBV
 - 35 for HCV (Figure 3.)
- Most states fail to follow recommendations set for Federal Prisons
 - Only 8 states use Opt-Out for HBV (MO, OH, OK, PA, TN, WA, WI, DC)
 - Only 17 states use Opt-Out for HCV (CA, IL, IA, MA, MO, NH, OH, OK, PA, RI, SC, TN, VT, VA, WA, WI, DC)
- Several states require inmates to be tested with no refusal possible
 - 3 states for HBV (CO, MO, & NE)
 - 6 states for HCV (CO, ID, IN, MO, NE, & OH)
- Many test only on inmate request or based on Clinical Criteria
 - 25 for HBV (AK, AZ, CA, DE, GA, HI, ID, IL, IA, KY, MD, MA, MI, MN, MT, NM, ND, OH, OK, RI, TN, TX, UT, VA, WY, DC)
 - 20 for HCV (AK, AZ, DE, GA, HI, KY, MD, MA, MN, MT, NH, NM, ND, OK, TN, TX, UT, VA, WY, DC)
- States Facing HCV-Related Lawsuits:

States Requiring/Offering HBV/HCV Testing During Intake



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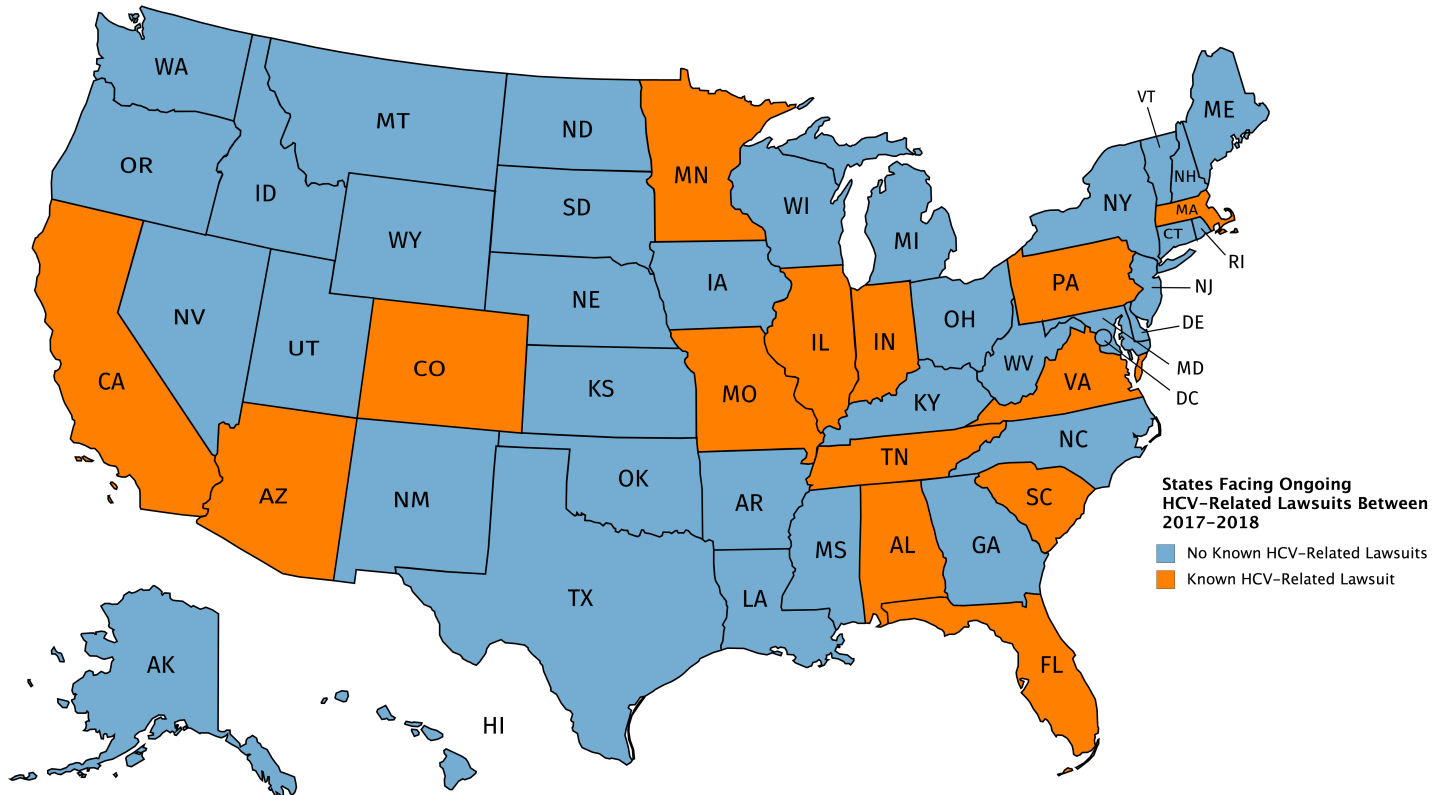
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States with Ongoing HCV-Related Litigation (2017-2018)

State	Year of Filing	Case Name	Type	Status
Alabama - AL	07/25/14	Braggs v. Dunn, et al.	Class-Action	In Trial
Arizona - AZ	03/22/12	Parsons v. Ryan	Class-Action	Ongoing
California - CA	02/12/18	Bayse, et al. v. California Department of Corrections and Rehabilitation	Class-Action	Ongoing; Policy Change
Colorado - CO	07/19/17	Aragon, et al. v. Raemisch, et al.	Class-Action	Settled
Florida - FL	05/11/17	Hoffer v. Jones, et al.	Class-Action Granted	Judge
Illinois - IL	09/29/08	Orr, et al. v. Elyea, et al.	Class-Action	Potential Settlement
Indiana - IN	01/27/17	Stafford, et al. v. Indiana Department of Corrections, et al.	Class-Action Granted	Finding in Inmates' Favor
Massachusetts - MA	06/10/15	Paszko, et al. v. O'Brien	Class-Action	Ongoing - Settlement Agreement Reached - Pending Approval
Minnesota - MN	06/03/15	Lignons, et al. v. Minnesota Department of Corrections	Class-Action Sought	Ongoing
Missouri - MO	12/15/16	Postawko, et al. v. Missouri Department of Corrections	Class-Action	Ongoing
Pennsylvania - PA				
	08/24/15	Abu-Jamal, et al. v. Kerestes, et al.	Class-Action	Ongoing
	01/03/17	Abu-Jamal v. Wetzel	Civil Rights Action	Ongoing
South Carolina - SC	08/10/18	Geissler, et al. v. Stirling, et al.	Class-Action - Jury Trial Demanded	Ongoing
Tennessee - TN	07/25/16	Graham aka Stevenson & Davis v. Parker, et al.	Class-Action Granted	Ongoing
Virginia - VA				
	11/21/16	Reid v. Clarke, et al.	Civil Rights Action	Settled
	06/26/17	Riggleman v. Clarke & Amonette	Civil Action - Jury Trial Demanded	Ongoing

State/Federal HCV-Related Lawsuits (2017-2018)

At least **16** Class-Action and Civil Rights Action lawsuits were ongoing in **14** states between 2017-2018. (This graphic may not represent every suit filed at all levels)



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Contact Information

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