# New York State Hepatitis C Coalition
# 2016 State Budget and Legislative Platform

***Over 200,000 New Yorkers are living with chronic hepatitis C (or HCV), and about 50% of those who are infected are unaware of their status. Although HCV is curable, it kills more people than HIV/AIDS in New York State.***

Consistently flat-funded at less than $2 million a year, we recommend an additional $6 million in new funding to fill service and surveillance gaps.

- **We Propose 5 KEY Additions: Increase funding for HCV programs in order to increase...**

### Statewide HCV Surveillance

- NYS currently lacks resources to monitor the HCV epidemic, investigate new outbreaks, and utilize epidemiological data to efficiently guide public health resources.

### Youth HCV Prevention

- The statewide increase in prescription opioid and heroin injecting, especially among young people, has put a new generation at risk of HCV infection.

### Linkage To Care & Patient Navigation Programs

- Peer HCV patient navigation services modeled on programs developed to combat the HIV epidemic have been vital to engaging and retaining people in care and treatment.

### Hepatitis C Public Awareness & Anti-Stigma Campaign

- An estimated 50% of New Yorkers living with chronic HCV are unaware of their status.

### Prevention & Screening for High Prevalence Populations

- New York HCV surveillance shows sharp increase in new HCV infections among MSM and transgender people over the past decade.

**PROPOSED SOLUTIONS**

- New York should bolster statewide HCV and hepatitis B surveillance.
- We need to fund and support youth-targeted HCV prevention programs.
- NYC's innovative patient navigation services should be replicated statewide.
- A public social messaging anti-stigma campaign to increase screening and awareness.
- Expanded prevention and screening services for populations with high incidence.

## We Endorse the HCV Items from Ending the Epidemic 2016-2017 Budget Proposals

- **Support for NYSDOH oversight of HIV/HCV testing and treatment in correctional or other institutions.**
  - ✓ Provide enhanced services for people within these facilities.

- ✓ Make specific programs available for formerly incarcerated people returning home.

- **Support for program development, outreach, linkage and retention in care for HIV and HCV co-infected persons.**
  - ✓ The reduction and treatment of both HCV&HIV.
  - ✓ Improving individual health outcomes and the overall quality of care.

- **Expand access to syringe exchange and other effective harm reduction programs statewide.**
  - ✓ Expand statewide access to clean syringes.
  - ✓ Increase access to drug treatment.

- **Establish a grant program to train pharmacists and relevant staff.**
  - ✓ Establish and fund a grant program to expand the number of eligible pharmacists.
  - ✓ Train pharmacists on drug treatment referral, HCV education, and nPEP & PrEP education.

- **Create a pilot program to develop Supervised Injection Facilities (SIFs).**

*Utilized in approximately 100 locations worldwide, numerous scientific studies have found that SIFs…*

- ✓ Reduce HIV & HCV transmission.
- ✓ Prevent fatal drug overdoses.
- ✓ Increase access to drug treatment and other healthcare.
- ✓ Reduce public disorder including improperly discarded syringes.

***ETE Total Proposed Budget: $11,000,000***

## LEGISLATIVE PROPOSALS

**A. Decriminalize syringe possession and reform the Expanded Syringe Access Program.**

*NYS Bills: (A.5471-Gottfried / S.4099-Rivera)*

- Repeal the criminal law on syringe possession.
- Remove the limit on the sale of syringes/needles per transaction (10 Syringes).
- Remove the ban on advertising, allowing pharmacies to display the availability of syringes to the public.
- Include authorization of a grant program (mentioned in the endorsed ETE proposal earlier).

**B. Authorize pharmacists to administer HCV rapid screening tests.**

- Include pharmacists in the definition of qualified individuals who can be laboratory directors.
- Add pharmacists to the list of practitioners who can administer CLIA-waived tests.
- Develop a program aimed at raising patients' awareness of this new avenue to access.

**C. Authorize the Department of Corrections and Community Supervision and DOH to establish HCV prevention programs in every state prison.**

*NYS Bills: (A.4256-Gottfried / S.1017-Montgomery)*

- Establish programs that include education, counseling, and other prevention efforts.
- Distribute condoms to prevent the spread of HCV, HIV, and other blood-borne and STIs.