



## NVHR Position Statement – Hepatitis C Treatment Access

**The National Viral Hepatitis Roundtable (NVHR) supports the position that all people living with hepatitis C deserve lifesaving treatment**, and calls for immediate action for significantly expanded access to address the largest blood borne viral epidemic in the United States. Twenty-five years after the discovery of the hepatitis C virus, the tools are now available to eliminate a chronic, infectious, life-threatening disease that, according to data from the Centers for Disease Control and Prevention affects approximately 3.2 million individuals, and needlessly attributes to the death of 15,000 to as many as 50,000 Americans per year.

The FDA approval of highly promising hepatitis C treatments last year brought tremendous hope, as it marked the beginning of a new era in treating and curing the disease. With high cure rates, significantly reduced side effects compared to previous regimens, and shorter treatment durations compared to previous regimens, these new therapies, along with others in the pipeline, provide an opportunity to end needless suffering and death from extrahepatic conditions, end-stage liver disease, and liver cancer, while reducing and potentially eliminating new infections.

NVHR is alarmed by the escalating treatment access crisis, and recognizes its creation is due to the confluence of the following factors: 1) a large potential patient population, 2) the high cost of new therapies, 3) public and private payer restrictions, including those unsupported by clinical data.

Our government has implemented policies to encourage medical innovation, and these breakthrough therapies for hepatitis C are a result of such incentives. To encourage innovation, then become paralyzed in the face of financing upon delivery, is a betrayal of patient communities that have been waiting decades for wellness. NVHR recognizes the fear among stakeholders that this is a sign of unsustainable costs to come, however, it is imperative that shorter-term solutions are also developed and implemented now. Immediate action is necessary before the bulk of the hepatitis C patient population ages into Medicare just as the virus manifests most aggressively or dies from their hepatitis C and/or its complications.

While NVHR sympathizes with the grave concern over the impact of costs to healthcare systems, it is also critical to acknowledge the existing factors naturally limit this impact, including: 1) up to 75% of those living with hepatitis C do not know their status, 2) a dearth of resources to implement screening recommendations, 3) a significant shortage of providers able to treat hepatitis C, and 4) patients who are uninterested in treatment, are un- or underinsured, or are not currently engaged in care. The elimination of hepatitis C is within our reach, and we must not be apathetic as one of the greatest public health opportunities of this century passes us by.

To this end, NVHR continues to call for:

- Congress and the Obama Administration to develop immediate, creative solutions for financing, particularly those that benefit all public payers, and address access barriers while minimizing consumer cost-sharing obligations;
- Hepatitis C pharmaceutical companies to commit to affordable pricing, broad accessibility, and transparent, good-faith negotiations with payers;
- Payers to ensure that individuals who inject drugs, the group most at risk for new infections, are not systemically excluded from treatment; and



- Any utilization management or prior authorization requirements only be implemented when it can be demonstrated that such restrictions are developed through a transparent process that:
  - Is in accordance with clinical factors and not just cost-effectiveness;
  - Involves consultation with recognized hepatitis C medical experts;
  - Includes meaningful input from the hepatitis C patient and advocate community; and
  - Requires each payer to maintain an exceptions process for any individual to appeal a denial of access based on their specific individual circumstances.

The federal government, through its role in implementing the Affordable Care Act and ensuring access to affordable, quality care for all Americans has a responsibility to address this treatment access crisis quickly, transparently, and with meaningful input from leading hepatitis C medical experts, community leaders, and, most importantly, people with hepatitis C.