COVID-19 impact on viral hepatitis care
Results of a public survey

**Clinical Providers**

COVID-19 has forced clinics to limit HIV and STD testing, hepatitis vaccinations, and hepatitis treatment, jeopardizing access to care.

Half of clinical providers reported challenges with providing telehealth services for Hepatitis B and C care. Challenges include:

- Patient access to internet
- Workflow adaptation
- Patient hesitancy
- Incorrect contact information
- Fewer billable claims

Nearly all participating clinicians report that they expect telehealth services for viral hepatitis to continue post-pandemic.

The top 3 barriers to providing Hepatitis B and C care during COVID-19 are:

- Interruptions to bloodwork
- Limited access to telehealth technology
- Staffing shortages

Top resources needed to support viral hepatitis programs during COVID-19:

1. Additional funding to support viral hepatitis team staff capacity
2. Best practices and/or guidance for implementing viral hepatitis services in the setting of COVID-19
3. Technical assistance for adapting education and outreach to an online or remote setting

Health departments reported the top 5 populations disparately impacted by COVID-19 are:

- Racial and/or ethnic minorities
- Persons without access to routine medical care
- Incarcerated persons
- Houseless persons

Percentage of community-based organizations offering service before COVID-19

- HBV/HCV TESTING: 100% (Decreased to 42%)
- HEPATITIS A/B VACCINES: 100% (Decreased to 58%)
- COMMUNITY OUTREACH: 95% (Decreased to 50%)

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COVID-19 has severely reduced viral hepatitis testing, vaccination, and outreach by community-based organizations.

More than half of Community-Based Organizations had to furlough or lay off staff or reduce operations due to COVID-19.

Sources: Responses sourced from the National Viral Hepatitis Roundtable (NVHR) online survey launched in partnership with the Hepatitis Education Project, NASTAD, Hep B United, and HepVu on the impact of the COVID-19 pandemic on hepatitis prevention and care. The survey was open for public response from Jun. 22 to Sept. 10, 2020, and gathered 161 responses overall.