



# COVID-19 IMPACT ON VIRAL HEPATITIS CARE

RESULTS OF A PUBLIC SURVEY

## CLINICAL PROVIDERS

### HEPATITIS VACCINATIONS AND TREATMENT

95% DECREASED TO 80%

### HIV TESTING

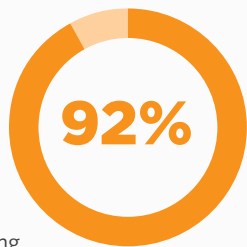
90% DECREASED TO 65%

### STD TESTING AND TREATMENT

95% DECREASED TO 75%

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

● Percentage of clinics offering service before COVID-19 ● Percent during the pandemic



### 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

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

## COMMUNITY-BASED ORGANIZATIONS

### Nearly 2/3 of Community-Based Organizations

providing viral hepatitis services have received inadequate or no funding to adapt services during COVID-19.

NO FUNDING

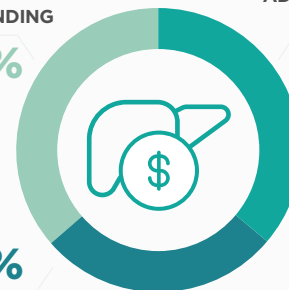
34%

ADDITIONAL FUNDING

34%

26%

ADDITIONAL FUNDING, BUT NOT ENOUGH



52%

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

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

- Best practices on strategies to implement viral hepatitis activities during and after the pandemic
- Funding to make up for lost revenue and/or to support staff capacity
- Guidance on implementing viral hepatitis screening during the pandemic

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

### HBV/HCV TESTING

100% DECREASED TO 42%

### HEPATITIS A/B VACCINES

100% DECREASED TO 58%

### COMMUNITY OUTREACH

95% DECREASED TO 50%

● Percentage of community-based organizations offering service before COVID-19 ● Percent during the pandemic

## HEALTH DEPARTMENTS

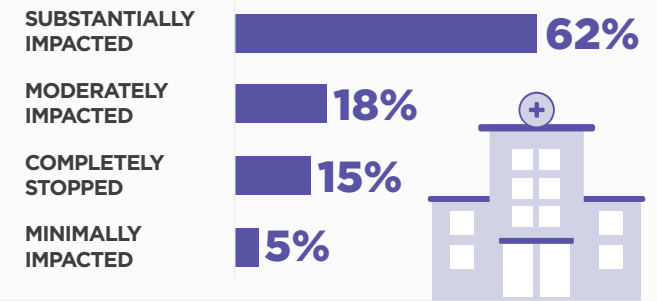
Top resources needed to support viral hepatitis programs during COVID-19:

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

The top 3 viral hepatitis services limited by COVID-19 from health departments are:

- Community outreach
- Testing
- Linkage to care

A majority of health departments report viral hepatitis activities were substantially impacted due to COVID-19.



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
- People who use drugs
- Incarcerated persons
- Houseless persons

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.

