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NVHR Applauds the National Academies of Sciences, Engineering, and Medicine (NASEM) for Calling for an Integrated Response to Treat Opioid Use Disorder and Infectious Disease Epidemics

Addressing the infectious disease and opioid use disorder epidemics through an integrated approach is critical to eliminating viral hepatitis.

Washington, D.C. (January 23, 2020) – The National Viral Hepatitis Roundtable (NVHR), a national coalition working to eliminate viral hepatitis, today applauded the National Academies of Sciences, Engineering, and Medicine (NASEM), for its report analyzing the simultaneous opioid use disorder (OUD) and infectious disease epidemics in the U.S. and calling for a congressionally funded, integrated approach to addressing the epidemics.

"In order to effectively address the opioid crisis and its infectious disease consequences, including the rise in viral hepatitis, we must employ an integrated harm reduction approach that breaks down silos between public health programs, removes prior authorization barriers for clinicians, and combats stigma," said NVHR Director Lauren Canary. "Today's report from NASEM is an important step in informing public health efforts and calling on our congressional leaders to act now to support an integrated approach to these simultaneous epidemics."

Acute cases of hepatitis C, which is the deadliest infectious disease in the U.S. and kills 20,000 Americans annually, have more than tripled since 2010 in part due to the opioid epidemic. Discriminatory state treatment restrictions, including sobriety restrictions and restrictions on who can prescribe treatment, have also inhibited a successful response to the increase in hepatitis C cases. Similarly, NASEM identified prescriber restrictions and insurance prior authorization requirements as barriers to integrated services for OUD and infectious disease epidemics. While some states have started removing discriminatory restrictions on hepatitis C treatment, direct action by Congress would help ensure that the OUD and infectious disease epidemics are treated more comprehensively.

The NASEM report identified the following additional barriers to integrated care:

- Lack of Data Integration and Sharing
- Inadequate Workforce and Training
- Stigma Around Both OUD and Infectious Diseases
- Limitations on Syringe Service Programs
- Payment and Financing Limitations
- Same-Day Billing Restrictions
- Limits on Harm-Reduction Restrictions
- Disconnect Between Public Health and Criminal Justice Systems

"We know that providing unrestricted access to treatment for OUD, hepatitis C, and other infectious diseases will save patients' lives and reduce new infections. Integrating services to address both the

OUD and infectious disease epidemics is critical helping our patients and to our overall effort to eliminate hepatitis C," said Chief Medical Advisor to NVHR Dr. Stacey Trooskin.

The report, which was sponsored by the U.S. Department of Health and Human Services (HHS), Office of Infectious Disease and HIV/AIDS Policy, details several recommendations for action at the federal, state and local levels in order to achieve better integration. NVHR supports the integrated approach to managing the epidemics and urges Congress to appropriately fund the infectious disease consequences of the opioid crisis.

For more information and to read the NASEM report, please visit: www.nationalacademies.org

About the National Viral Hepatitis Roundtable (NVHR)

The National Viral Hepatitis Roundtable, a program of <u>HEP</u>, is a national coalition working together to eliminate hepatitis B and C in the United States. NVHR's vision is a healthier world without hepatitis B and C. NVHR's work is guided and informed by our beliefs and commitment to: Participation, Inclusiveness, Intersectionality, Health Equity, and Stigma Elimination. For more information, visit www.nvhr.org.

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