

# Increase Funding for Viral Hepatitis

## What is Viral Hepatitis?

Hepatitis is an inflammation of the liver and is most often caused by a virus. In the US, the most common types of viral hepatitis are hepatitis B (HBV) and hepatitis C (HCV). The Centers for Disease Control and Prevention (CDC) estimates that as many as 5.3 million people nationwide are living with HBV and HCV and as many as 65 percent are not aware of their infection. Because viral hepatitis can be asymptomatic for years, many people are not tested until they begin to show signs of liver disease, cirrhosis, liver failure or liver cancer. According to the CDC, HCV-related deaths now surpass deaths from all other reported infectious diseases combined. Between 2010 and 2013, rates of acute hepatitis increased by 150%, driven largely by increases in opioid use nationwide.

### Help Combat the Silent Epidemic

#### CDC Division of Viral Hepatitis Funding

FY2015	FY2016	FY2017	FY2017	FY2017
Final:	Final:	Need	President's	Community
\$31.3	\$34	Estimate:	Budget:	Request:
million <sup>1</sup>	million <sup>1</sup>	\$170.3	\$39	\$62.8
		Million <sup>2</sup>	million <sup>1</sup>	million <sup>1</sup>

<sup>1</sup>Includes 10-12% for the Working Capital Fund

<sup>2</sup> According to the 2010 CDC DVH Professional Judgment Budget

The Hepatitis Appropriations Partnership (HAP) is a national coalition based in Washington, DC and includes community-based organizations, public health and provider associations, national hepatitis and HIV organizations, and diagnostic, pharmaceutical and biotechnology companies. HAP works with policy makers and public health officials to increase federal support for hepatitis prevention, testing, education, research and treatment.

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## Viral Hepatitis Funding Needs

At least \$62.8 million for CDC's Division of Viral Hepatitis to stop viral hepatitis transmission and prevent viral hepatitis-related illness and death. CDC will use the increase to:

- Expand adoption of CDC/United States Preventive Services Task Force (USPSTF) recommendations for HBV and HCV testing and linkage to care
- Develop monitoring systems and prevention strategies to stop the emerging hepatitis C epidemic among young people who inject drugs and others at risk
- Enhance vaccination-based strategies to eliminate mother-to-child transmission of hepatitis B
- Strengthen state and local capacity to detect new infections, coordinate prevention activities, provide feedback to providers for quality improvement, and track progress toward prevention goals
- Additional needs include funding for Ryan White-funded clinics, community health centers, and SAMHSA-funded programs to increase capacity and integrate comprehensive services into settings that serve high-risk populations, and steady and predictable growth for the budget of the National Institutes of Health to ensure success of the objectives outlined by the *Viral Hepatitis Action Plan*
- HAP also supports use of federal funds for syringe service programs

## The Costs of Inaction

- Annual HBV medical costs are as high as \$86,552 per individual
- Most people living with HCV will age into Medicare eligibility over the next 10 years and the costs to the Medicare program will increase five-fold
- Treating a person living with hepatitis before there is liver scarring saves more than \$187,000 per person per year

