

HEALTH AND HUMAN SERVICES

Resolution HHS-16-28

PROMOTING POLICIES TO DECREASE THE DISPROPORTIONATE NUMBER OF AFRICAN AMERICANS LIVING WITH HEPATITIS C THROUGH INCREASED ACCESS TO INNOVATIVE TREATMENTS

WHEREAS, Hepatitis C currently infects as many as 3.2 million Americans, and kills more than 15,000 Americans annually;

WHEREAS, Hepatitis C is a contagious liver disease resulting from infection with the Hepatitis C virus (HCV);

WHEREAS, Hepatitis C can be asymptomatic and up to 75 percent of individuals with Hepatitis C are unaware that they are infected;

WHEREAS, HCV often remains undetected, causing potentially life-threatening liver damage, and causing individuals to unknowingly transmit the disease to others;

WHEREAS, Hepatitis C is the most prevalent blood borne disease in the United States;

WHEREAS, Hepatitis C disproportionately affects minority Americans and prevalence of the virus is 3 percent among African Americans and 2.6 percent among Latinos, compared to 1.5 percent of the general population;

WHEREAS, Data shows that the Hepatitis C mortality rate is nearly double for African Americans compared to Caucasians;

WHEREAS, chronic liver disease, which is often Hepatitis C-related, is a leading cause of death among African Americans between the ages of 45 and 64;

WHEREAS, Approximately 9.4 percent of African Americans in their 40s are, or have been, infected with chronic Hepatitis C compared to 3.8 percent of Caucasians;

WHEREAS, the number of Hepatitis C cases is projected to rise four-fold nationally between 2009-2029;

WHEREAS, when patients experience disease progression, rising treatment costs can be attributed to liver disease, cirrhosis, liver failure and liver cancer and societal costs may include employee productivity loss as a result of increased physician visits, hospital stays, sick days, decreased worker status, disability, and potentially death;

WHEREAS, Studies estimate that Hepatitis C-related hospitalizations increased 190 percent between 2005 and 2010 at a cost of \$3.5 billion;

WHEREAS, early detection of Hepatitis C infection promotes effective management and treatment

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of the infection, preventing disability, loss of productivity and income, and allowing people to live full, satisfying, and productive lives;

WHEREAS, New Hepatitis C therapies offer cure rates exceeding 95 percent and carry minimal side effects; and

WHEREAS, payers are restricting access to these medications, often forcing patients to meet a set of extensive, onerous criteria before receiving treatment.

THEREFORE BE IT RESOLVED, that the National Black Caucus of State Legislators (NBCSL) recognizes the importance of screening, early diagnosis and treatment of Hepatitis C in order to connect infected Americans with treatment and to prevent disease transmission;

BE IT FURTHER RESOLVED, that NBCSL urges federal, state and local policymakers to implement policies to decrease the disproportionate number of African-Americans suffering from chronic Hepatitis C by improving access to treatments, including innovative treatments;

BE IT FURTHER RESOLVED, that NBCSL supports the creation of policies in its members' districts and throughout the country that will decrease disparities in death rates from Hepatitis C-related diseases, especially chronic liver disease, between African-Americans and Caucasians;

BE IT FURTHER RESOLVED, that NBCSL supports open access to new and innovative Hepatitis C treatment for all patients living with the disease regardless of disease state; and

BE IT FINALLY RESOLVED, that a copy of this resolution be transmitted to the President of the United States, the Vice President of the United States, members of the United States House of Representatives and the United States Senate, and other federal and state government officials as appropriate.

SPONSORS: Senator Donne Trotter (IL) and Representative. Rita Mayfield (IL)

Committee of Jurisdiction: Health and Human Services Policy Committee

Certified by Committee Co-Chairs: Representative Mia Jones (FL) and Senator Shirley Nathan Pulliam (MD)

Ratified in Plenary Session: Ratification Date is December 4, 2015

Ratification is certified by: Senator Catherine Pugh (MD), President