



ARIZONA

1. Plan Development

Since July 2022, Arizona has published an HCV elimination plan. People with lived / living experience (PWLE) were included in the plan's development process. There is a commitment to update plan details over time, and goals and objectives will be updated as improvements to the state's surveillance system are made. However, the state should further clarify how often progress reports pertaining to the plan will be published.

2. Harm Reduction Laws

Syringe Services Program Legality, Syringe Exchange Specifications, Medical Emergency Laws, and "Works" Possession Laws and Syringe Exemption

While SSPs have been legalized, a drawback to Arizona's SSP practices is that they can only operate on a 1-for-1 exchange. While state law allows a facility to collect as many syringes as it wants, the amount it distributes cannot exceed the number it collects. The state should consider amending 2021 Ariz. Legis. § 36-798.51(C) so that it is no longer a modified 1-for-1 syringe exchange but rather allows for needs-based exchange, especially because the same legislation also has a stated purpose of ensuring that hypodermic syringes and injection supplies are not shared or reused. This purpose implies a desire to function on a needs-based model, but other explicit language of the same statute overshadows the stated intent. A needs-based SSP policy would broaden the efficacy of these programs to reduce transmission of hepatitis, HIV, and other diseases. There are laws in place to protect Good Samaritans who attempt to assist others that are experiencing a substance use-related medical emergency, and there are protections in place for the person experiencing the emergency. Additionally, the possession of substance use/injection drug use equipment is illegal, but there is an exemption for the possession of syringes by SSP participants.

3. Budget Allocation

Specific Funds Allocated for Plan Implementation, State Budget, and State Corrections Budget

In Arizona's previous budget allocations, viral hepatitis was acknowledged. In the FY23 budget, that is no longer the case. Dedicated efforts should be made to once again allocate specific funding to viral hepatitis in future budget fiscal years, especially since the state has now created and published a viral hepatitis elimination plan.

4. Improving Viral Hepatitis Prevention, Treatment, and Outcomes

Educational and Perinatal Information for the Public, Provider Training, and Medicaid Expansion

The state does provide educational information to the public regarding viral hepatitis and specifically perinatal HBV, but it does not provide information pertaining to perinatal HCV. Arizona is a Medicaid expansion state and offers provider training to increase workforce capacity through Project Echo.

Standard of Care for HCV in State Corrections

Arizona's new hepatitis elimination plan includes strategies to offer DAA treatment for HCV to all persons with a confirmed HCV diagnosis (or in this case, also those who self-identify as requiring a test due to increased risk) held in state corrections in accordance with the AASLD/IDSA treatment guidelines.

Targeted Interventions for Key Populations and the Provision of Linguistically Diverse Informational Materials

There are non-governmental (state academic institutions) and community-based organizations throughout the state providing targeted interventions to expand access to viral hepatitis prevention, testing, and treatment services to key populations (e.g., people experiencing homelessness, people who use drugs) disproportionately affected by viral hepatitis.

Enduring Coalition / Task Force to Coordinate and Leverage Resources

Hepatitis Free AZ is an active, state-led Coalition that is cross-cutting amongst state agencies, community organizations, advocacy groups, and healthcare providers to plan and coordinate activities and leverage hepatitis elimination resources. People with lived/living experience are part of this collaboration. This coalition was integral to the development and publishing of the state's elimination plan.

Hepatitis C: State of Medicaid Access Grade

Arizona's Hepatitis C: State of Medicaid Access grade has improved from an F to a B as the state has recently removed prior authorization for initial treatment. It could further increase access though by removing retreatment restrictions and improving access for individuals in managed care.

5. Improving Viral Hepatitis Surveillance and Data Usage

Epidemiological Report / Profile, and Public-Facing Website with Viral Hepatitis Data

Arizona does have a public-facing website with regularly updated viral hepatitis epidemiological data included on it. The state has not recently published (within the last two years) a comprehensive viral hepatitis epidemiological report that includes and assesses HAV, HBV, and HCV data though.