



COLORADO

1. Plan Development

Colorado has not yet published a viral hepatitis elimination plan. The state is expected to publish a plan by 2025 in accordance with CDC PS21-2103. If Colorado has not already done so, the state should convene a group of multi-disciplinary stakeholders to guide these efforts, which will ultimately improve its viral hepatitis strategies and outcomes.

2. Harm Reduction Laws

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

SSPs are authorized by statute in Colorado; the exchange of syringes can operate on a needs-based approach; and the possession of substance use/injection drug use equipment is decriminalized, whereupon conviction of possession of drug paraphernalia, a person shall only be punished by a monetary fine. 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.

3. Budget Allocation

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

Both the general state budget and Colorado’s correctional budgets allocate funds for viral hepatitis, and there was an increase in allocations between FY21-22 and FY22-23 in the state’s general budget. Allocations for treatment in the correctional budget decreased across those timeframes though. The goal for FY23-24 (and beyond) should be to maintain overall increases in both the state budget and the correctional budget allocations for viral hepatitis services, especially treatment in corrections.

4. Improving Viral Hepatitis Prevention, Treatment, and Outcomes

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

Colorado provides educational information to the public regarding viral hepatitis and specifically perinatal HBV, but it no longer has active links on its Department of Health website pertaining to perinatal HCV information. The state does not direct health professionals to training resources to improve awareness and capacity to screen for and treat viral hepatitis. At a minimum, the state should consider including training programs such as Hepatitis B Online and Hepatitis C Online.

Standard of Care for HCV in State Corrections

A publicly available, separate, state-drafted guidance for the standard of care for HCV in state corrections does not exist in Colorado. There has been litigation within the jurisdiction though that has prompted changes to be made regarding hepatitis screening and treatment within Colorado's correctional facilities. Pursuant to a 2018 settlement agreement, the Colorado Department of Corrections agreed to spend \$41 million over two years to provide DAA treatment to more than 2,000 people with HCV in its custody—up from 20-25 people treated per year previously—and removed pre-treatment requirements, such as completion of drug and alcohol classes and deterioration of the liver.

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

There are non-governmental programs (academic institutions) and community-based organizations throughout the state providing targeted interventions for key populations, such as persons who use drugs and those experiencing homelessness.

Enduring Coalition / Task Force to Coordinate and Leverage Resources

We are not aware of an enduring Coalition or task force in existence that includes state agencies, community organizations, and advocacy groups to coordinate activities and leverage resources. If it has not already begun to do so, Colorado should pool multi-disciplinary stakeholders to form a Coalition that can help build partnership, identify needs, leverage available resources, and further implement targeted interventions.

Hepatitis C: State of Medicaid Access Grade

Colorado made massive improvements in improving access to treatment for its Medicaid enrollees since July 2022. They no longer require prior authorization, there are no prescriber, substance use, or fibrosis restrictions, and there are no undue retreatment restrictions. These changes have earned Colorado an A+ in their Hepatitis C: State of Medicaid Access grade.

5. Improving Viral Hepatitis Surveillance and Data Usage

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

The state has continued to maintain a public-facing website that houses regularly updated viral hepatitis epidemiological data and an up-to-date hepatitis epidemiological report.