



MASSACHUSETTS

1. Plan Development – Possible Plan Development

Massachusetts has not yet published a viral hepatitis elimination plan, but the development of a plan is currently underway. The state is expected to publish a plan by 2025 in accordance with CDC PS21-2103. It is our understanding that the Massachusetts Department of Public Health is actively working on an elimination plan (including working with stakeholder groups and members of EndHepatitisCMA). If this plan is developed, it should be made public upon completion.

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 law, but the law is silent on whether they function on a needs-based policy or a 1-for-1 exchange policy. At least some local SSPs are functioning without a quantity component attached to their exchange process, but the state should still consider clarifying its syringe exchange laws so that SSPs explicitly function under the needs-based model. A needs-based SSP policy would broaden the efficacy of these programs to reduce transmission of hepatitis, HIV, and other diseases. Via litigation, there is an exemption in place for the possession of syringes acquired from SSPs. There are Good Samaritan protections in place for those seeking medical care or offering aid to others for a substance use-related health emergency.

3. Budget Allocation

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

Viral hepatitis is mentioned only in the state’s FY23 budget, nothing further though. A designated line item for hepatitis would signal a commitment to providing resources to support ongoing efforts to improve statewide viral hepatitis outcomes.

4. Improving Viral Hepatitis Prevention, Treatment, and Outcomes

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

Massachusetts is a Medicaid expansion state and does distribute viral hepatitis educational information and materials geared towards the public in a wide variety of languages. Since July 2022, Maine now also provides perinatal information / education for HBV, which is a welcome addition to the materials the state offers. The state also offers training to providers to help increase workforce capacity to treat more people with viral hepatitis.

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 that includes strategies to offer DAA treatment for HCV to all persons with a confirmed HCV diagnosis held in state corrections in accordance with the AASLD/IDSA treatment guidelines does not exist in Massachusetts. There has been litigation within the jurisdiction though that has prompted changes to be made regarding hepatitis screening and treatment within correctional facilities. The Massachusetts Department of Correction has reached a settlement with prisoners' rights groups over its medical treatment of prison inmates with hepatitis C. It requires prisoners with the most serious cases of hepatitis C to be treated within 12 months. Prisoners with less serious cases will have to be treated within 18 months. Every new prisoner will be tested for hepatitis C, and those who have the disease will be treated.

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

Massachusetts works with community health partners to operate integrated testing and linkage services to provide HIV, HCV and STD testing, PrEP services, and linkage to care throughout the state. The state also partners with community groups to support both mobile and standing syringe service programs statewide.

Enduring Coalition / Task Force to Coordinate and Leverage Resources

EndHepatitisCMA is a coalition of providers, consumers, and advocates working to achieve the elimination of hepatitis C in Massachusetts. This is not a state-led collaboration, and it is not apparent that people with lived experience are part of this task force.

Hepatitis C: State of Medicaid Access Grade

The Hepatitis C: State of Medicaid Access grade given to Massachusetts remains an A. It can further improve its grade if it takes steps to ensure parity across MassHealth ACOs and MCOs regarding HCV prior authorization requirements.

5. Improving Viral Hepatitis Surveillance and Data Usage

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

Massachusetts previously published epidemiological reports that included HAV, HBV, and HCV surveillance data and published this data on a public-facing website. However, it has not recently published (within the last two years) any viral hepatitis data.