



NORTH CAROLINA

1. Plan Development

In February 2022, North Carolina published a viral hepatitis elimination plan that contains strategies for HAV, HBV, and HCV. The plan also outlines a commitment to publishing progress reports for its plan on at least an annual basis. We are not aware as to whether the planning committee that developed the elimination plan included people with lived/living experience.

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 in North Carolina, they function on a needs-based policy, which is the preferred exchange policy, and there is an exemption in place for the possession of syringes acquired from SSPs. Additionally, there are Good Samaritan protections in place to protect those who call 911 to help others or themselves who need emergency medical assistance.

3. Budget Allocation

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

North Carolina’s FY21-23 budget mentions allocations for viral hepatitis, but it is not mentioned in the state corrections budget, and there is no mention of viral hepatitis in the state’s next proposed biennium budget. Continuing to designate a 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

North Carolina has adopted legislation for Medicaid expansion, but it has not been implemented yet. The state distributes viral hepatitis educational information and materials and provides perinatal information / education for HBV, but not information for perinatal HCV; this information is only available in English. North Carolina offers the Carolina Hepatitis C Academic Mentorship Program (CHAMP) to train primary care providers on HCV screening and treatment. It also offers Clinical Care Options Modules to provide online CME training on hepatitis care.

Standard of Care for HCV in State Corrections

A publicly available, state-drafted guidance for the standard of care for HCV in state corrections exists in North Carolina – that was not drafted after viral hepatitis treatment access litigation brought against the jurisdiction – that provides DAA treatment for all persons with a confirmed HCV diagnosis 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

North Carolina provides supports for targeted interventions for key populations across the state, including those experiencing homelessness, people who use injection drugs, and populations at higher risk for viral hepatitis.

Enduring Coalition / Task Force to Coordinate and Leverage Resources

The North Carolina Viral Hepatitis Task Force is a collection of individuals who represent key stakeholders in viral hepatitis in North Carolina. The continued engagement in this work, even during difficult and unprecedented times, highlights the dedication and care that this task force provides.

Hepatitis C: State of Medicaid Access Grade

North Carolina's Hepatitis C: State of Medicaid Access grade remains a B. The state should remove the prior authorization requirement in place and other requirements, like the submission of documentation of chronic HCV infection and "readiness for treatment" evaluations.

5. Improving Viral Hepatitis Surveillance and Data Usage

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

North Carolina did have a previously functioning and well-detailed data dashboard with hepatitis data included, but the dashboard is no longer functioning. A 2021 Hepatitis B and C epidemiological report has been published.