



# PENNSYLVANIA

## 1. Plan Development

Pennsylvania has published a viral hepatitis elimination plan that addresses HAV, HBV, and HCV. The plan outlines an intent to publishing progress reports for its plan on at least an annual basis, and people with lived/living experience were included in the development process of the hepatitis elimination plan.

## 2. Harm Reduction Laws

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

SSPs have not been legalized in Pennsylvania. However, approximately 20 operate throughout the state. In its Good Samaritan Law, the state should consider removing the contingencies that the freedom from prosecution of the person experiencing the overdose is dependent on several actions of the person who makes the call to assist another and if the caller remains immune themselves.

## 3. Budget Allocation

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

Viral hepatitis is mentioned in the FY22-23 budget and in Pennsylvania’s corrections budget, but there is no indication that any mention of viral hepatitis will be included in the next fiscal year’s budget (if the proposed budget becomes permanent without change). 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**

Pennsylvania is a Medicaid expansion state; the state distributes viral hepatitis educational information and materials and provides perinatal information / education for HBV and perinatal HCV (it provides this information in multiple languages as well). There is a stated goal to provide training to providers and in certain city’s health departments, establish partnerships (e.g., Allegheny County partnering with the MidAtlantic Public Health Training Center), but we are not aware of whether this training was developed, and if it was, if it is still ongoing. There are some references made to the Hepatitis C Online provider training though.

**Standard of Care for HCV in State Corrections**

The state's viral hepatitis elimination plan includes guidance pertaining to HCV treatment in correctional settings. However, the plan does not include information that indicates that the strategies included to offer DAA treatment for HCV to all persons with a confirmed HCV diagnosis held in state corrections are in accordance with the AASLD/IDSA treatment guidelines.

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

There are state-sponsored targeted interventions being offered to key populations, and this is reiterated in the elimination plan as well, especially for people who use injection drugs and those experiencing homelessness.

**Enduring Coalition / Task Force to Coordinate and Leverage Resources**

The state has multiple coalitions including Hepatitis Free PA, Hepatitis C Allies of Philadelphia, and Hepatitis C Free Allegheny.

**Hepatitis C: State of Medicaid Access Grade**

Pennsylvania's Hepatitis C: State of Medicaid Access grade has improved from an A to an A+ following the removal of prior authorization for preferred treatment regimens in July 2023.

## 5. Improving Viral Hepatitis Surveillance and Data Usage

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

Individual disease data for Pennsylvania is available through the Enterprise Data Dissemination Informatics Exchange (EDDIE) system on the state site. EDDIE requires setting several query requests before data is retrieved and could be challenging for some consumers to use. The data set only includes HAV and HBV, and the most recent year's data is 2021. The state should consider overhauling this platform into something more manageable by consumers and should publish digestible epidemiological reports that include data and more information for all forms of viral hepatitis.