



# WISCONSIN

## 1. Plan Development

Wisconsin 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 Wisconsin 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 law in the state, and there are several in operation across the state. However, there is no state law expressly authorizing SSPs. The state should consider passing a law expressly authorizing the legality of syringe services programs, and specifically, ones that function on a needs-based policy. There are Good Samaritan protections in effect that provide limited immunity from criminal prosecution for anyone who calls 911 in response to someone else's overdose. There is no codification of limited immunity from criminal prosecution for the person who overdoses though.

## 3. Budget Allocation

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

Viral hepatitis is only mentioned in the FY21-23 budget for the state of Wisconsin, but there is no indication that it will remain in the upcoming fiscal year's budget, per proposed versions. Continuing to include a designated line item for hepatitis, both in the general budget and the corrections budget, 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

### **A. Educational and Perinatal Information for the Public, Provider Training, and Medicaid Expansion**

Wisconsin is not a Medicaid expansion state. The state does provide educational information to the public regarding viral hepatitis, as well as information pertaining to perinatal HBV. No information for perinatal HCV is offered though. Wisconsin provides HCV provider training through the Midwest AIDS Training + Education Center. The state should consider including Hepatitis B Online and Hepatitis C Online as additional provider resources.

**B. 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 Wisconsin. There also has been no litigation regarding this matter to direct proper guidance either. However, the Department of Corrections universally screens all people who are incarcerated and provides treatment to anyone who needs it.

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

There are state-sponsored targeted interventions being offered to key populations.

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

Viral hepatitis is included in the HIV Community Planning Group, a multi-agency group led by DPH.

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

Wisconsin has maintained its A+ 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**

Wisconsin has created and published the "Wisconsin Hepatitis C Virus Surveillance Annual Review, 2021," and it can be found via the state's website. The state should consider publishing a similar report that includes HAV and HBV data.