



Request for Information (RFI): To Inform the Development of the 2026 – 2030 National HIV/AIDS Strategy and the National Strategic Plans for Sexually Transmitted Infections, Vaccines, and Viral Hepatitis

December 2nd, 2024

The U.S. Department of Health and Human Services has released a request for information regarding the development of their 2026-2030 National HIV/AIDS Strategy and National Vaccine Strategic Plans, including Viral Hepatitis. This year, they will be collecting all of their responses via [an online form](#) with predetermined word limits.

In order to ensure that the community voice is heard, Hep B United will be using the upcoming coalition call on **Thursday, November 14th at 3pm ET** to review our draft comments and discuss feedback. [Please use this link to join the call!](#)

The final deadline to submit comments is Friday, December 6th at 5pm EST. [Please use this link to submit your own comments.](#)

Best,

Michaela Jackson

1. Viral Hepatitis Plan Priorities (1000 word limit)

Based on advances or changes in policy, program, science, or practice, what components of the Viral Hepatitis National Strategic Plan do you think should be maintained and highlighted?

What changes should be made to the Viral Hepatitis National Strategic Plan? This may include changes to the structure, goals, objectives, strategies, indicators, and/or priority populations. This may also include areas of the current Viral Hepatitis Plan that should be scaled back or areas of the current Plan that should be expanded or scaled up.

The Hep B United (HBU) commends HHS and their partner agencies for their efforts to achieve the goals, strategies, and objectives outlined in the 2021-2025 Viral Hepatitis Strategic Plan. Since its release, we have seen much needed progress that has moved the nation closer to ultimately eliminating viral hepatitis, such as quality measures for hepatitis B vaccination and proposed quality measures for hepatitis B testing, the reclassification of hepatitis B point-of-care tests, and new universal adult recommendations for hepatitis B screening and vaccination.

We thank HHS for the opportunity to provide comments on the next Viral Hepatitis Strategic Plan (2026-2030). Hep B United has shared the following comments for your consideration:

Goal 1: Prevent New Viral Hepatitis Infections

Objective 1.1

We strongly suggest scaling up efforts to increase awareness of viral hepatitis. With new universal adult hepatitis B screening and vaccine recommendations, and universal screening recommendations for hepatitis C, there is a unique opportunity to truly broaden messaging to reach new, larger audiences. Preliminary community-tested messaging has shown that communications making the connection between hepatitis B vaccination and testing as liver cancer prevention resonates well with non-at-risk groups.

Therefore, we strongly encourage HHS to create a new strategy under Objective 1.1 that focuses on strengthening the connection between viral hepatitis and liver cancer and conducting additional research to identify successful viral hepatitis prevention messaging for both at-risk and non-at-risk groups.

We also encourage HHS to expand goal 1 to include an objective solely focused on implementing the new universal hepatitis B screening recommendations. Currently, neither the United States Preventative Services Task Force (USPSTF)'s nor CMS' Notice of Coverage Determination (NCD) for adult hepatitis B screening align with the CDC's updated guidance. Several health systems across the United States have reported insurance coverage as a major barrier to implementing the new recommendation. There is substantial concern that USPSTF will decline to align with CDC upon their next review in 2025, which will further delay necessary insurance coverage for the recommendation and prevent individuals from being screened. Therefore, we encourage HHS to identify ways to help health systems and community-based organizations successfully implement CDC's universal adult hepatitis B screening recommendations and to prioritize updating their adult hepatitis B screening national coverage determination to align with CDC.

Goal 2: Improve Viral Hepatitis-Related Health Outcomes of People with Viral Hepatitis

Objective 2.1

We strongly support continuing to highlight Objectives 2.1 and 2.2, as increasing viral hepatitis testing and treatment is integral to elimination and improving the quality of life for those living with viral hepatitis.

In particular, we encourage HHS to maintain Strategy 2.2.7. While quality measures for hepatitis B testing have been proposed at the Medicaid level, hepatitis B treatment and linkage to care quality measures are equally critical. The World Health Organization (WHO) expanded and simplified their hepatitis B treatment guidelines in 2024, and AASLD is currently updating their guidelines.¹ These treatment guideline changes will increase the

¹ <https://www.who.int/publications/i/item/9789240090903>

number of people eligible to be treated for hepatitis B and expanded quality measures will help ensure those individuals are reached.

Goal 3: Reduce viral hepatitis-related disparities and health inequities

We strongly support goal 3 and encourage HHS to continue to highlight and maintain this goal. The 2022 Viral Hepatitis Surveillance Report shows that rates of Asian Americans, Pacific Islanders, and non-Hispanic Blacks continue to be disproportionately impacted by hepatitis B at significant rates.² It will be impossible to achieve elimination or be equitable without targeted strategies addressing barriers to awareness, prevention, testing, and care, as well as data and surveillance, among these priority populations.

Goal 4: Improve Viral Hepatitis Surveillance and Data Usage

Disaggregated data to help us better understand how diverse communities are impacted by viral hepatitis continues to lag. For hepatitis B, the availability of data on African, Asian, and Pacific Islander ethnicities and/or country of birth for people with chronic hepatitis B infection would be particularly helpful, given the high risk and prevalence among these communities. We strongly recommend HHS develop an objective and/or strategy centered upon disaggregating data on viral hepatitis.

2. Viral Hepatitis Strategies and Objectives (200 words limit)

Recognizing limited resources and the need to direct resources to settings and populations disproportionately impacted, which objectives and strategies of the Viral Hepatitis National Strategic Plan should be prioritized over those that may be less effective?

We strongly support prioritizing objectives that focus on reducing disparities, and promote vaccination, testing, and linkage to care. Specifically, we recommend prioritizing the proposed objectives/strategies on implementing universal adult hepatitis B vaccination and screening as a method to preventing new infections.

To address the needs of disproportionately impacted populations, Objectives 2.4, 3.2, and Objective 3.3 are essential. More specifically strategies 3.2.1, 3.2.2, and 3.3.3 should be prioritized.

3. Acute Hepatitis C and Hepatitis B-Related Deaths (200 word limit)

Regarding the Viral Hepatitis National Strategic Plan, which objectives and strategies should be prioritized to reduce acute hepatitis C infections and reduce hepatitis B-related deaths?

To reduce hepatitis B-related deaths, we must focus on increasing access to treatment, improving care for priority populations, and increasing research to identify a cure for hepatitis B. Furthermore, better surveillance and data is crucial to helping communities

request the resources they need the most. Therefore, we strongly encourage HHS to prioritize the following objectives and strategies:

- Objective 2.1 and Strategies 2.1.2, 2.1.3, 2.1.4, and 2.1.7 are core to increasing testing and awareness of a person's viral hepatitis status. Within Objective 2.2, we recommend prioritizing Strategies 2.2.2, 2.2.3, 2.2.7, and 2.2.8. We also recommend prioritizing strategies 2.4.4, 2.4.6, and 2.4.7 within Objective 2.4.
- Objectives 4.2 and 4.3 should also be prioritized, alongside Strategies 4.2.1, 4.2.2, and 4.2.5, 4.3.2, and 4.3.4.

4. **Additional Comments (Viral Hepatitis) (200 word limit)**

Respondents are also invited to share comments not addressed by the questions listed above. (200 word limit)

These comments are supported by Hep B United, a national coalition in 42 cities and 26 states plus Washington DC, dedicated to reducing the health disparities associated with hepatitis B by increasing awareness, screening, vaccination, and linkage to care for high-risk communities across the United States. The Hep B United coalition has 62 members and reaches over 6 million people across the United States.