



HEALTH SERVICES AGENCY
ADMINISTRATION

COUNTY OF SANTA CRUZ 0349

HEALTH SERVICES AGENCY

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September 4, 2000

AGENDA: September 12, 2000

BOARD OF SUPERVISORS

Santa Cruz County
701 Ocean Street
Santa Cruz, CA 95060

RE: Report Back on Hepatitis C

Dear Board Members:

On May 2, 2000, the Health Services Agency submitted a report to your Board on Hepatitis C, a specific virus infection of the liver, which has emerged as a serious threat to public health. The County's response to Hepatitis C was discussed again at the Health Services Agency's Budget hearings, and your Board directed the Agency to report back in the fall on our progress in responding to this disease.

Background

As stated in our original report in May, Hepatitis C is a costly chronic disease that is estimated to affect 1.8 percent of the entire population of the United States. It may affect as many as 4,500 persons in Santa Cruz County, although we do not have good data on this. There is no vaccine for Hepatitis C and treatments are costly and not universally effective. Infections that are untreated or that do not respond to treatment may leave the infected person in a chronic state that carries a significant risk for cirrhosis and cancer of the liver. Liver damage due to chronic infection with Hepatitis C is now the leading cause of liver transplantation in the United States. Because symptoms do not usually begin until significant liver damage has occurred, many years after the initial infection, many persons do not know that they are infected and serve as an ongoing source of infection to others. Many individuals in the past contracted Hepatitis C through receiving infected blood products for other medical problems. This has changed with the advent of a definitive test for Hepatitis C and more specific screening of blood donors. Nonetheless, there is a significant group of infected persons who acquired the disease in this manner. Currently the most common source of infection is injection drug use, utilizing contaminated needles and syringes. Many of those infected through their injecting practices will

continue to pose a risk to others if they do not know their Hepatitis C status and continue to share injecting equipment.

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Liver complications can create life-threatening problems for infected persons. A report issued by the American Liver Foundation states that the State of California will waste nearly a billion dollars if it does not act to start dealing with Californians already infected with Hepatitis C. Our Agency has been working with others in the community to address the many challenges of the Hepatitis C epidemic.

Since the report to your Board in May, the following activities have occurred:

Community Planning

Health Services Agency staff have continued to support community planning by providing staff support and leadership to the Santa Cruz County Hepatitis C Task Force. The purpose of the Task Force is summarized in the following mission statement:

MISSION STATEMENT DRAFT

The purpose of the Santa Cruz County Hepatitis C Task Force is to:

- . Understand the extent of the problem of Hepatitis C infection in Santa Cruz County through improved surveillance and target screening programs;
- Prevent new infections through education, counseling and support of harm reduction programs;
- . To limit progression and complications of HCV disease through promotion of healthy lifestyles, vaccination against Hepatitis A & B, and expanded access to alcohol/drug treatment;
- . To advocate for the needs of people infected with HCV through provider education, political activism and resource development.

Since the budget hearings in June, the Task Force has prioritized its list of activities and is in the process of developing a **workplan** for specific subcommittees. Interest remains high and the meetings continue to be well attended. The subcommittees include Outreach and Testing, Resource Development and Provider Education.

The Public Health Commission has been briefed about the Hepatitis C problem in the county and will continue to receive periodic updates about the status of the local response plan. A member of the Commission has reported that she is in contact with several of the local gastroenterologists, the specialty physicians who treat most of the patients with Hepatitis C, and they report their case load of Hepatitis C patients is growing rapidly.

The State has not developed specific programs or services for Hepatitis C testing or treatment to date. However, SB 1256 (Polanco) is actively working its way through the legislative process. The Polanco bill would require the Department of Corrections to develop a testing program for inmates, require an annual statistical report to be presented to the legislature, and require the State Health department to develop a public education and outreach program aimed at high risk groups. In July, a group of individuals from the local Task Force made a visit to Assemblyman Fred Keeley to provide information about the Hepatitis C problem and to recommend that the State develop resources to help the local response efforts. Assemblyman Keely was interested and supportive of efforts to respond to this public health problem. Similar visits are planned with other legislators.

Local Services

During the June Budget hearings, your Board approved new funding to continue an outreach, education, testing and vaccination program for high-risk individuals. A contract was developed and signed with the HIV Prevention Project for Injection Drug Users (HIPPIDU), which is the corporate entity of the Needle Exchange program. The contract, approved by your Board on August 22, 2000, continues a program conducted by HIPPIDU that was previously funded by the University of California at San Francisco (UCSF). The activities of the program will be carried out in the Drop-in Centers, located in Santa Cruz and Watsonville. The center in the Santa Cruz area is well established and already carrying out the services. The new drop-in center in Watsonville is under renovation and is scheduled to open in October. County staff are eager to launch this program, which they believe will reach the population at the very greatest risk for Hepatitis C infection. Your Board was informed previously that the UCSF project with the Needle Exchange program had identified that over a third of the young people tested were positive for Hepatitis C. This is a very significant number and indicates that there is much work ahead to control this serious health problem.

Future Directions

The County will continue to work with statewide organizations and others in the community to address the challenges of responding to Hepatitis C infection. As there is no vaccine on the horizon, prevention through education is our best strategy. This situation requires that harm reduction through clean needles and syringe exchange programs continue and expand where necessary. Treatment still remains problematic and very costly, but there are encouraging signs that certain combinations of drugs may be more effective than single drug therapy. If indeed we have 4,500 infected people in Santa Cruz County, and if even 30% are candidates for medical treatment, the cost would be an estimated \$9,720,000 just for medication. All of these efforts require new financial resources. So far, the State has not been forthcoming with new initiatives. If the Polanco bill becomes law, this is a first step in that direction. However, the bill as amended contains only seven million in new dollars. This level of funding does not begin to address this very serious public health problem. The Agency will continue to advocate for adequate funding and State leadership.

It is therefore RECOMMENDED that your Board:

1. Accept and file this report.

2. Adopt the attached resolution supporting SB 1256 and direct the Board Chairperson to convey that support to local legislators via attached letters.

Sincerely,

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Rama Khalsa, Ph.D., HSA Administrator

RECOMMENDED: .



Susan A. Mauriello
County Administrative Officer

cc: County Administrative Office
Auditor-Controller
County Counsel
HSA Administration
Public Health Administration
Health Officer
Ira Schwartz, CD Manager

**BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA**

RESOLUTION NO. _____

On the motion of Supervisor
duly seconded by Supervisor
the following resolution is adopted.

RESOLUTION SUPPORTING SB 1256 (POLANCO) CONCERNING HEPATITIS C

WHEREAS, whereas Hepatitis C is a blood-borne viral infection of the liver affecting an estimated 1.8 percent of the population of the United States and as many as 500,000 Californians; and

WHEREAS, Hepatitis C infection can, lead to cirrhosis, chronic liver disease, liver cancer, and death; and

WHEREAS, there is currently no vaccine available to immunize against the **virus**, and prevention is the best strategy to respond to the growing public health threat posed by Hepatitis C; and

WHEREAS, SB 1256 (Polanco) would require specified State agencies to take steps related to prevention and treatment of Hepatitis C, including the implementation of a public education and outreach program to raise awareness of Hepatitis C among high-risk groups and health care providers.

NOW, THEREFORE, BE IT RESOLVED AND ORDERED, that the County Santa Cruz Board of Supervisors, hereby supports passage of SB 1256 and urges local Assembly Members and State Senators to support passage of this legislation.

PASSED AND ADOPTED, by the Board of Supervisors of the County of Santa Cruz, State of California, this September 19th, 2000 by the following vote:

| | |
|----------|-------------|
| AYES: | SUPERVISORS |
| NOES: | SUPERVISORS |
| ABSTAIN: | SUPERVISORS |

Chair of the Board

ATTEST:

CLERK OF THE BOARD

APPROVED AS TO FORM: 

Assistant County Counsel

Distribution:

County Administrative Officer
Auditor-Controller
County Counsel
Health Services Agency Administration

AMENDED IN ASSEMBLY AUGUST 7, 2000

AMENDED IN ASSEMBLY JUNE 21, 2000

AMENDED IN ASSEMBLY APRIL 24, 2000

SENATE BILL

No. 1256

Introduced by Senator Polanco

(Principal coauthor: Assembly Member Bock)

(Coauthor: Senator Ortiz)

(Coauthors: Assembly Members Cardenas, Firebaugh, and Steinberg)

February 26, 1999

An act to amend Sections 122405 and 122410 of, and to add Sections 122406, 122415, and 122420 to, the Health and Safety Code, relating to hepatitis, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 1256, as amended, Polanco. Hepatitis C.

Existing law, the Hepatitis C Education, Screening, and Treatment Act, requires the State Department of Health Services to make available protocols and guidelines developed by the National Institutes of Health and California legislative advisory committees on hepatitis C for educating physicians and health professionals and training community service providers. Existing law further provides that these guidelines may include education programs for specified high-risk individuals.

This bill would provide that these guidelines may also include outreach programs and would expand the categories of high-risk individuals for which these programs are targeted.

This bill would require the Secretary of Veterans Affairs to report to the Legislature on or before March 1, 2001, regarding the use of funds earmarked by the federal Veteran's Administration to regional offices in California to educate, screen, and treat veterans with the hepatitis C virus. It would also require the Director of Corrections and Director of Health Services to perform various functions and duties with respect to providing outreach to, and testing of, certain targeted groups and would appropriate ~~an unspecified amount~~ **\$7,000,000** from the General Fund to the ~~Department of Corrections and the~~ **Department of Health Services** for these purposes.

The bill would require the Director of Health Services to *include hepatitis C counseling, education, and testing, as appropriate, into local state-funded programs, and urge local public health officials to make hepatitis C virus screening available for uninsured individuals upon request.*

Vote: ²/₃. Appropriation: yes. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 122405 of the Health and Safety
- 2 Code is amended to read:
- 3 122405. The Legislature hereby finds and declares all
- 4 of the following:
- 5 (a) Hepatitis C is classified as a silent killer, where no
- 6 recognizable signs or symptoms occur until severe liver
- 7 damage has occurred.
- 8 (b) Hepatitis C has been characterized by the World
- 9 Health Organization as a disease of primary concern to
- 10 humanity.
- 11 (c) Studies indicate that 1.8 percent of the population,
- 12 nearly 4 million Americans, carry the virus HCV that
- 13 causes hepatitis C. In California, as many as 500,000
- 14 individuals may be carriers and could develop the
- 15 debilitating and potentially deadly liver disease

1 associated with hepatitis C in their lifetime. An expert
2 panel, convened in March by the National Institutes of
3 Health (NIH), estimated that 30,000 acute new infections
4 occur each year in the United States, and only 25 to 30
5 percent of those are diagnosed. Current data sources
6 indicate that 8,000 to 10,000 Americans die from hepatitis
7 C each year.

8 (d) Studies also indicate that 39.4 percent of 'male
9 inmates and 54.5 percent of female inmates in California
10 correctional facilities have hepatitis C, 26 times higher
11 than the general population. Upon their release from
12 prison, these inmates present a significant health risk to
13 the general population of California.

14 (e) It is the intent of the Legislature to study the
15 adequacy of the health care delivery system as it pertains
16 to hepatitis C.

17 (f) It is the intent of the Legislature to urge the
18 department to make funds available to community-based
19 nonprofit organizations for education and outreach with
20 respect to the hepatitis C virus.

21 SEC. 2. Section 122406 is added to the Health and
22 Safety Code, to read:

23 122406. The Secretary of Veterans Affairs shall report
24 to the Legislature on or before March 1, 2001, regarding
25 the use of funds earmarked by the federal Veteran's
26 Administration to regional offices in California to
27 educate, screen, and treat veterans with the hepatitis C
28 virus.

29 SEC. 3. Section 122410 of the Health and Safety Code
30 is amended to read:

31 122410. (a) The State Department of Health Services
32 shall make available protocols and guidelines developed
33 by the National Institutes of Health, *the University of*
34 *California at San Francisco*, and California legislative
35 advisory committees on hepatitis C for educating
36 physicians and health professionals and training
37 community service providers on the most recent
38 scientific and medical information on hepatitis C
39 detection, *transmission*, diagnosis, treatment, and
40 therapeutic decisionmaking.

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1 (b) The guidelines referenced in subdivision (a) may
2 include, but not be limited to, all of the following:
3 (1) Tracking and reporting of both acute and chronic
4 cases of hepatitis C by public health officials.
5 (2) A cost-efficient plan to screen the prison
6 population and the medically indigent population in
7 California.
8 (3) Protocols within the Department of Corrections to
9 enable that department to provide appropriate
10 *prevention and* treatment to prisoners with hepatitis C.
11 (4) Protocols for the education of correctional peace
12 officers and other correctional workers who work with
13 prisoners with hepatitis C.
14 (5) Protocols for public safety and health care workers
15 who come in contact with hepatitis C patients.
16 (6) Surveillance programs to determine the
17 prevalence of hepatitis C in ethnic and other high-risk
18 populations.
19 (7) Education and outreach programs for high-risk
20 individuals, including, but not limited to, individuals who
21 received blood transfusions prior to 1992, hemophiliacs,
22 veterans, women who underwent a caesarian section or
23 premature delivery prior to 1990, persons who received
24 an organ transplant prior to 1990, persons who receive
25 invasive cosmetic procedures, including body piercing
26 and tattooing, students, minority communities, and any
27 other categories of persons at high risk for hepatitis C
28 infection as determined by the director. *Education and*
29 *outreach programs shall be targeted to high-risk*
30 *individuals as determined by the director.* Education
31 programs may provide information and referral on
32 hepatitis C including, but not limited to, education
33 materials developed by health-related companies,
34 community-based or national advocacy organizations,
35 counseling, patient support groups, and existing hotlines
36 for consumers.
37 (c) Nothing in this section shall be construed to
38 require the department to develop or produce any
39 protocol, guideline, or proposal.

1 SEC. 4. Section 122415 is added to the Health and
2 Safety Code, to read:

3 122415. (a) The Director of Corrections shall do all of
the following:

4 ~~(a)~~

6 (1) Provide the budget subcommittees of the
7 Legislature, on or before March 1, 2002, with an annual
8 statistical report on the prevalence of the hepatitis C virus
9 in correctional facilities and trends in the incidence and
10 prevalence of the hepatitis C virus in the correctional
11 system.

12 ~~(b)~~

13 (2) Establish and make available a voluntary program
14 to test inmates for the presence of the hepatitis C virus
15 upon incarceration and in conjunction with any routine
16 blood testing.

17 ~~(c)~~

18 (3) Update treatment protocols and regimens as new
19 therapies become available.

20 (b) *This section shall be implemented only to the*
21 *extent funds for this purpose have been appropriated in*
22 *the annual Budget Act.*

23 SEC. 5. Section 122420 is added to the Health and
24 Safety Code, to read:

25 122420. The Director of Health Services shall do all of
26 the following:

27 (a) Develop and implement a public education and
28 outreach program to raise awareness of the hepatitis C
29 **virus** aimed at high-risk groups, physician's offices, health
30 care workers, and health care facilities. The program shall
31 do all of the following:

32 (1) Attempt to coordinate with national public
33 education efforts related to the identification and
34 notification of recipients of blood from hepatitis C
35 virus-positive donors.

36 (2) Attempt to stimulate interest and coordinate with
37 community-based organizations to sponsor community
38 forums and undertake other appropriate community
39 outreach activities.

1 (3) Employ public communication strategies utilizing
2 a variety of ~~media including, but that may include, but is~~
3 not limited to, print, radio, television, and the Internet.

4 (b) Include information on co-infection of ~~acquired~~
5 ~~immune deficiency syndrome (AIDS)~~ *human*
6 *immunodeficiency virus (HIV)* or hemophilia with the
7 hepatitis C virus in the professional training *and all*
8 *appropriate care and treatment* programs under the
9 jurisdiction of the department.

10 (c) Develop a program to work with the Department
11 of Corrections to identify hepatitis C virus-positive
12 inmates likely to be released within two years and provide
13 counseling and treatment options to reduce the
14 community risk.

15 (d) Urge local public health officials to make hepatitis
16 C virus screening available for uninsured individuals
17 upon request.

18 ~~SEC. 6. The sum of _____ dollars~~
19 ~~(\$ _____) is hereby appropriated from the General~~
20 ~~Fund for allocation in accordance with the following~~
21 ~~schedule:~~

22 ~~(a) The sum of _____ dollars (\$ _____) to the~~
23 ~~Department of Corrections for purposes of~~
24 ~~implementing Section 122415 of the Health and Safety~~
25 ~~Code:~~

26 ~~(b) The sum of _____ dollars (\$ _____) to the~~

27 ~~(e) Include hepatitis C counseling, education, and~~
28 ~~testing, as appropriate, into local state-funded programs~~
29 ~~including those addressing HIV, tuberculosis, sexually~~
30 ~~transmitted disease, and all other appropriate programs~~
31 ~~approved by the director~~

32 ~~SEC. 6. The sum of seven million dollars (\$7,000,000)~~
33 ~~is hereby appropriated from the General Fund to the~~
34 ~~State Department of Health Services for purposes of~~
35 ~~implementing Section 122420 of the Health and Safety~~
36 ~~Code.~~