July 5, 2013

Corinna Dan, RN, MPH
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 443-H
Washington, DC 20201

Attention: 2014 Viral Hepatitis Action Plan

Dear Ms. Dan:

The National Association of County and City Health Officials (NACCHO) appreciates the opportunity to comment on the renewal of *Combating the Silent Epidemic of Viral Hepatitis, Action Plan for the Prevention, Care, and Treatment of Viral Hepatitis* (Action Plan). NACCHO represents the nation’s 2,800 local governmental health departments. These city, county, metropolitan, district, and tribal departments work every day to protect and promote health and well-being for all people in their communities.

NACCHO commends the Department of Health and Human Services (HHS) for renewing and extending the Action Plan for three additional years. The *Interagency Implementation Progress Report, Year 1* (Progress Report) clearly documents the increasing momentum of national viral hepatitis prevention, care, and treatment efforts and highlights the need to continue and expand efforts to achieve Action Plan goals. NACCHO’s comments will address questions 1a, 4, and 5 posed on June 5, 2013 in the Federal Register (78 FR 33843).

**Question 1a. Are there critical gaps in viral hepatitis activities which should be given a major focus in a renewed Action Plan?**

While the Action Plan describes strategies that HHS can take to engage other governmental agencies and nongovernmental organizations to improve the ways in which the nation addresses viral hepatitis, it could include additional sections that outline actions other stakeholders (e.g., health departments, community-based organizations, and healthcare providers) can take to complement those undertaken by federal agencies. Specifically, local health departments have current and potential roles in every aspect of viral hepatitis prevention, detection, care, treatment, and control. Better understanding the specific successes and challenges of local health departments in addressing viral hepatitis can help to identify additional actions and highlight opportunities for local health departments to support federal agencies in implementing the Action Plan.

**Question 4. How can government better engage with non-governmental stakeholders around the implementation of the National Viral Hepatitis Action Plan?**

Adding sections to the Action Plan that contain actions for local health departments and other stakeholders can help HHS facilitate existing and initiate new dialog with these groups to better determine how each entity is already implementing the Action Plan and how partners could advance strategies in a more coordinated and
comprehensive manner. NACCHO has worked with local health departments to: (1) convey specific challenges, needs, and gaps in local epidemiologic capacity and surveillance systems for viral hepatitis; (2) identify and create resources to improve hepatitis B vaccination of vulnerable adults; and (3) use local health department experiences investigating and responding to healthcare-associated hepatitis outbreaks in outpatient facilities to inform subsequent prevention and control efforts. Expanding the inventory of activities and resources outside of federal agencies can help HHS to better streamline efforts, coordinate activities, and gauge national progress toward combating viral hepatitis.

Question 5. What additional information not specifically addressed elsewhere in this request for information that would be important for the government to bear in mind in developing a renewed National Viral Hepatitis Action Plan?

While the Action Plan and Progress Report acknowledge limitations in implementing certain actions, due to lack of sufficient funding, it is critical that HHS agencies remain aware of specific ways in which budget cuts have impacted public health entities, particularly local health departments. A 2012 survey of local health department job losses and programs cuts revealed the following findings: ¹

- **Nineteen percent** of local health departments that had an immunization program in 2011 reduced or eliminated it that year.
- **Ten percent** of local health departments that had a communicable disease screening and/or treatment program in 2011 reduced or eliminated it that year.
- **Nine percent** of local health departments that had an epidemiology and surveillance program in 2011 reduced or eliminated it that year.
- Since 2008, 39,600 local health department jobs have been eliminated due to budget cuts.

These program and workforce losses severely diminish the opportunities HHS agencies have in leveraging local health department expertise, capacities, and community connections to improve viral hepatitis prevention, detection, care, treatment, and control. These losses are only compounded by the $160 million in cuts to state and local health departments in CDC funding alone in FY2013. It is critical for HHS to understand the impact of cuts and to sustain local health department capacity to address viral hepatitis.

NACCHO lauds the leadership at HHS in recognizing and addressing the challenge public health and other stakeholders face in preventing, providing care for, and treating viral hepatitis. NACCHO stands ready to work with HHS in implementing the Action Plan. Thank you for the opportunity to provide comments to the Action Plan and input on this important matter. To discuss these comments further, please contact Lilly Kan, Senior Analyst for Community Health at lkan@naccho.org or (202) 507-4238.

Sincerely,

Robert M. Pestronk, MPH
Executive Director

**References**