



Effective Policy Strategies for HIV, Viral Hepatitis, STDs, and TB in the United States

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NCHHSTP supports states and territories in their work to save lives, save money, and make healthier communities for all.



**Division of HIV
Prevention**



**Division of
Viral Hepatitis**



**Division of STD
Prevention**



**Division of TB
Elimination**



**Division of
Adolescent &
School Health**

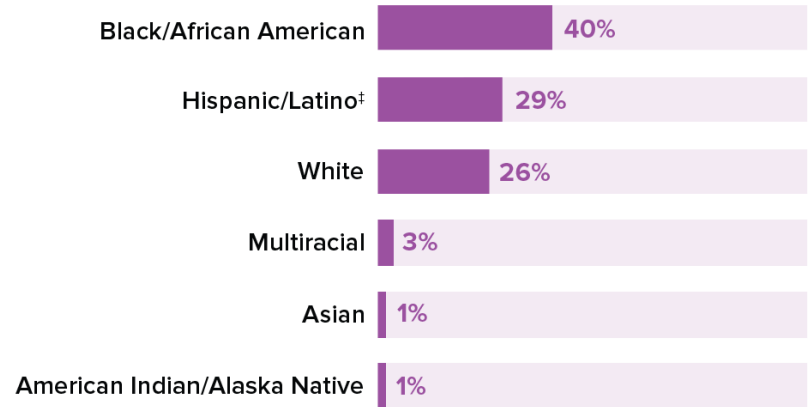
State of the epidemics

HIV

1.2 million people in the U.S. have HIV

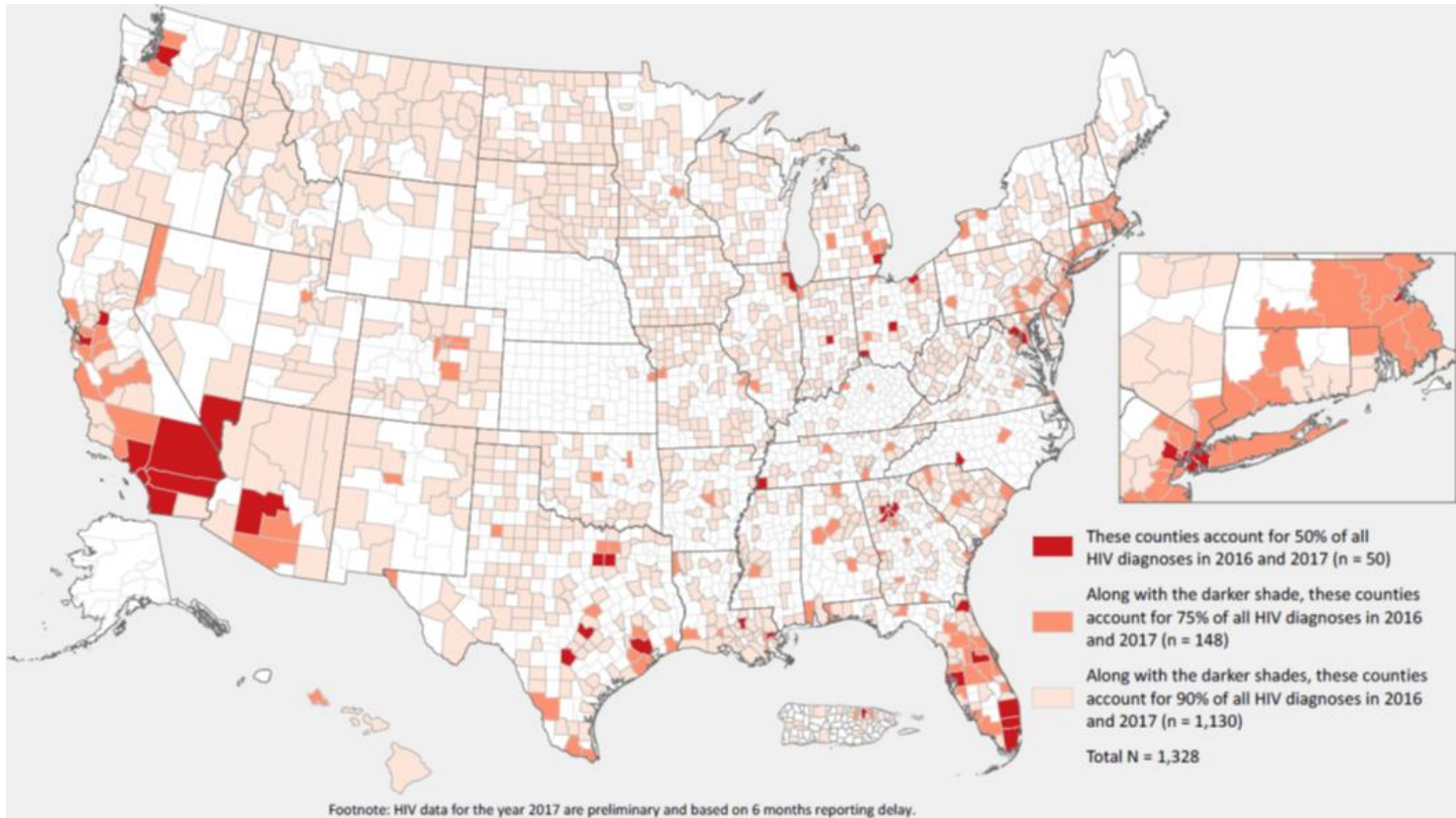
People with HIV who are virally suppressed through treatment do not sexually transmit HIV

PrEP is ~99% effective at preventing acquisition of HIV



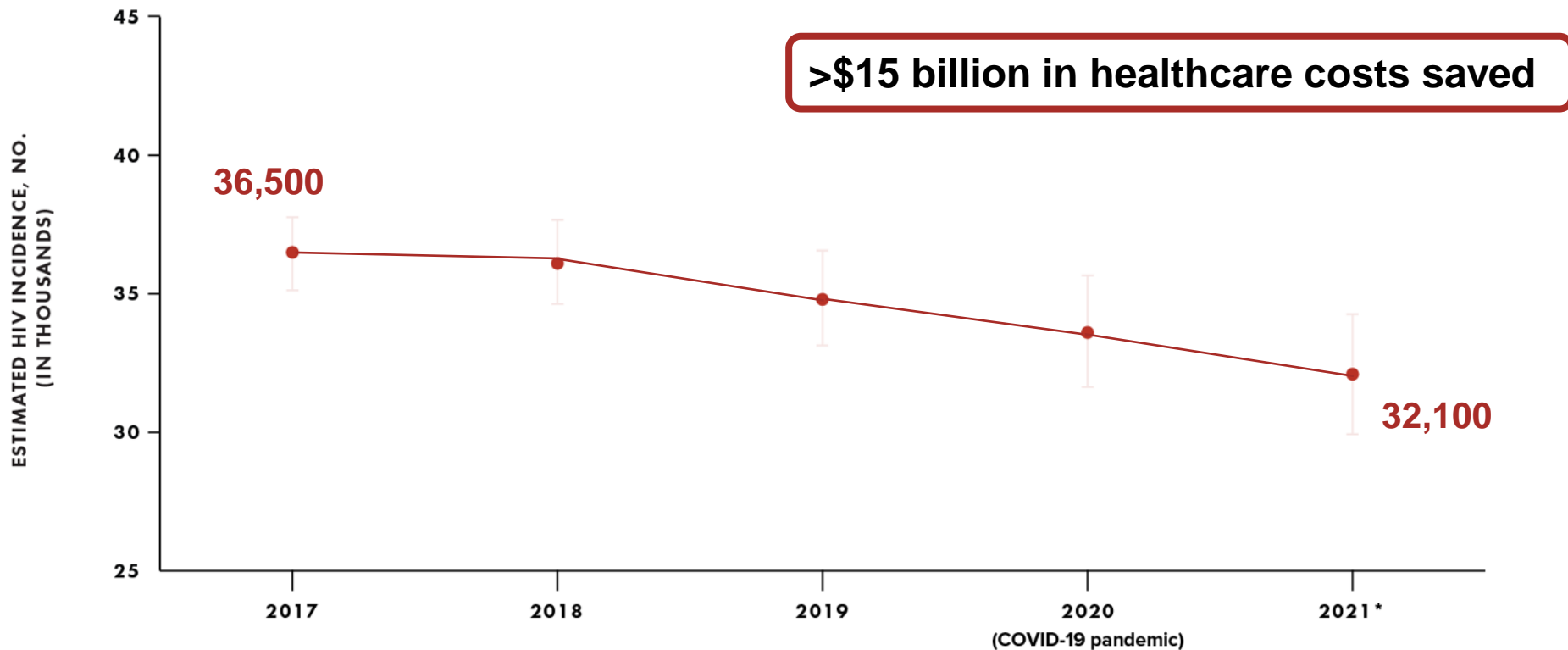
Gay, bisexual, and other men who have sex with men are >100 times more likely to have HIV

HIV is Not Equally Distributed



HIV prevention efforts are working

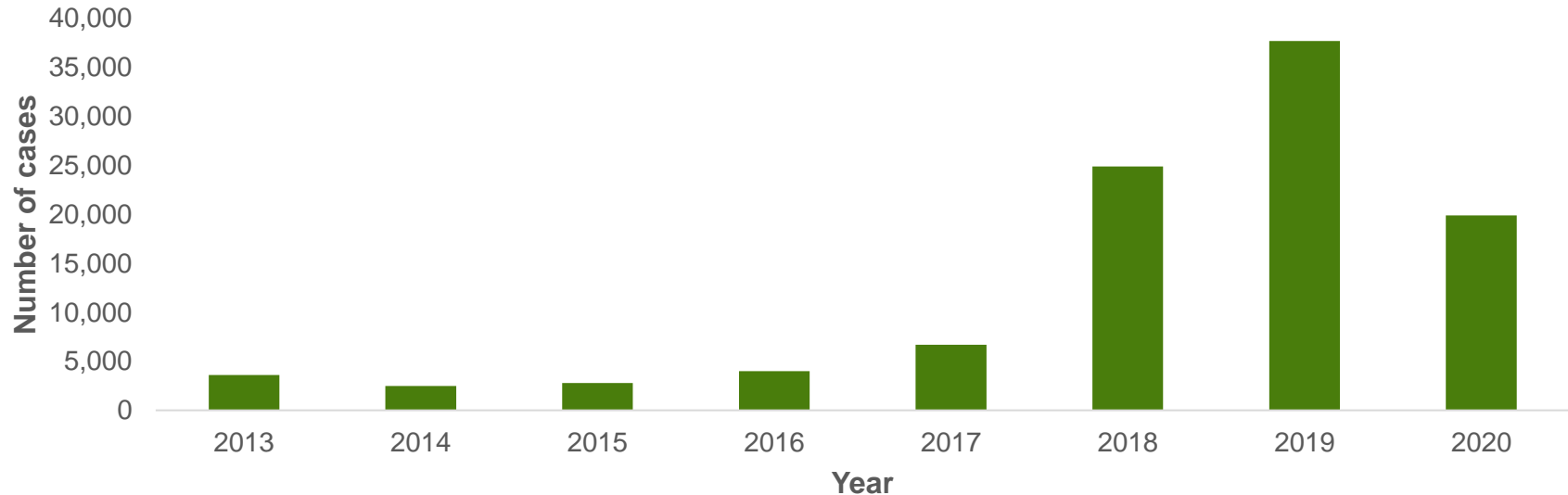
12% reduction in HIV infections in 2021 compared to 2017



Viral hepatitis kills tens of thousands of Americans each year

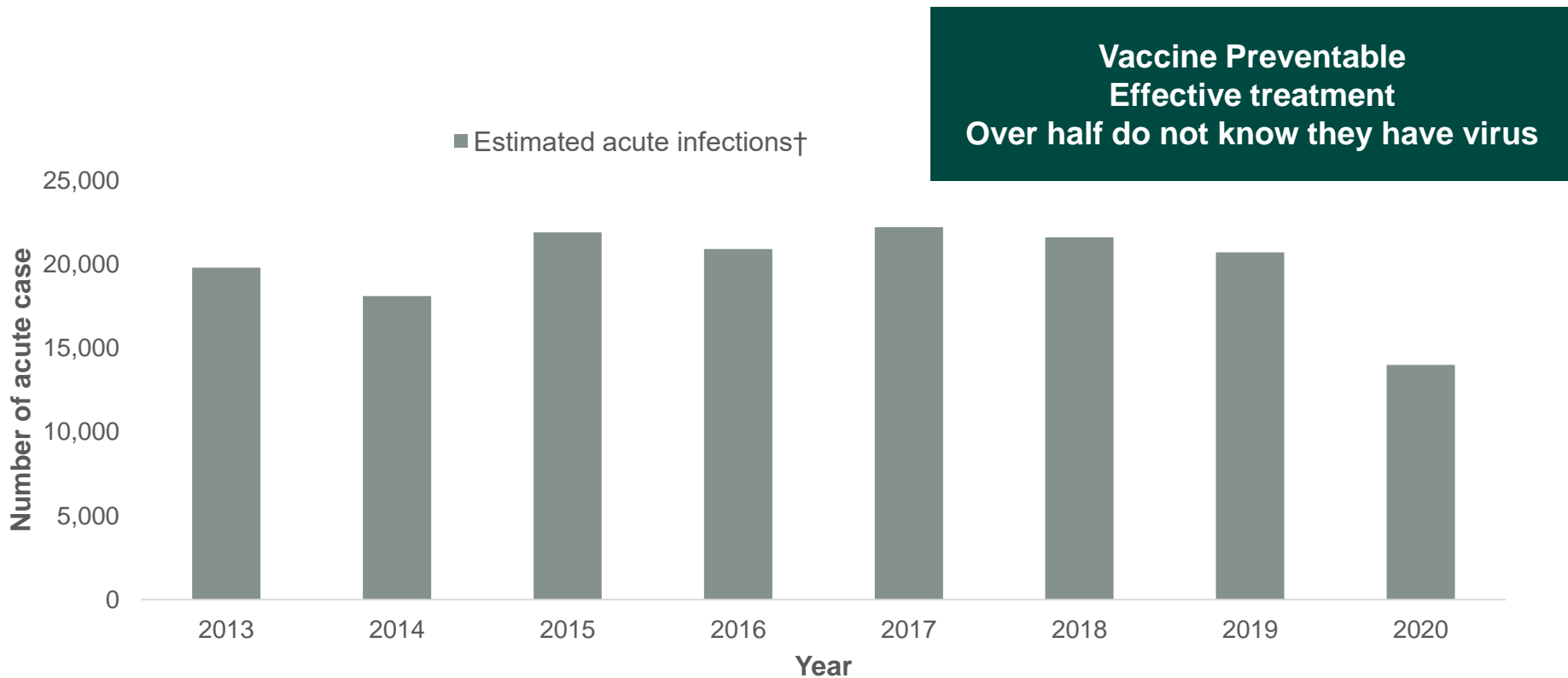
Estimated hepatitis A infections in the US, 2013–2020

■ Estimated infections†



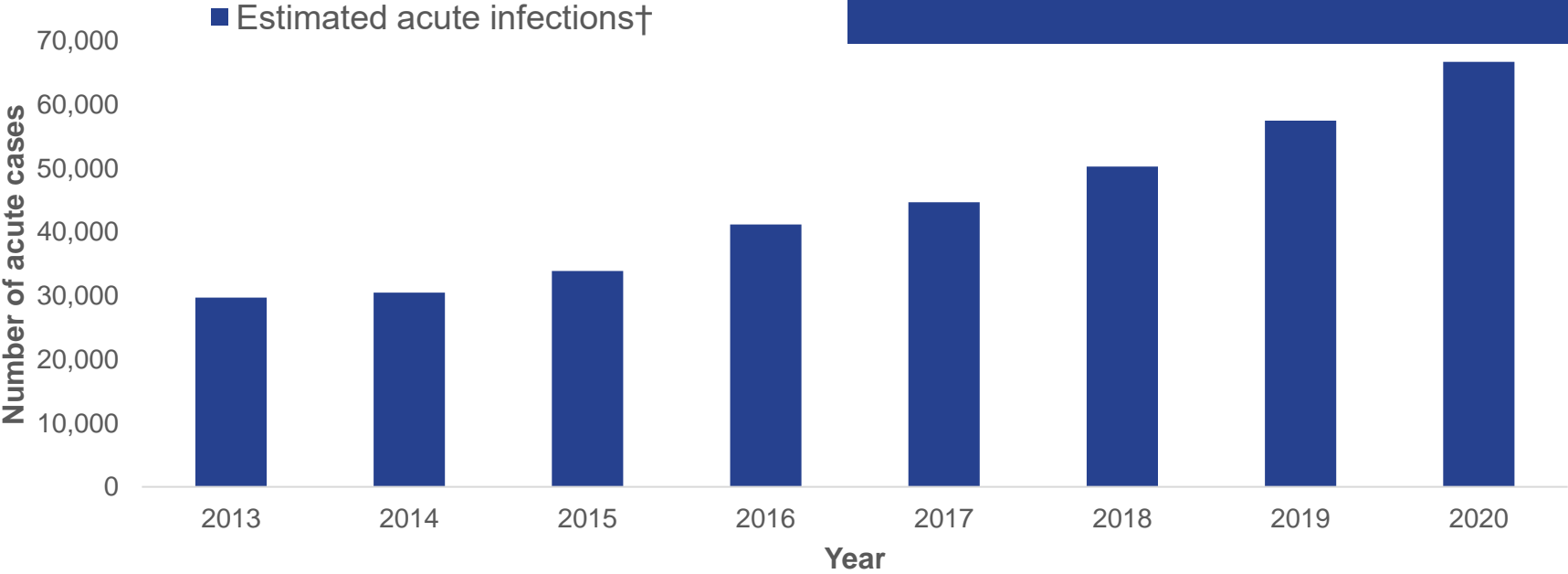
>\$200 million in healthcare costs
Fecal-oral transmission and drug use
Vaccine Preventable

Estimated hepatitis B infections in the US, 2013–2020



Estimated hepatitis C virus infections in the US, 2013–2020

Leading cause of liver cancer
Billions each year in healthcare costs
Most infections through unsterile injections
Curable-No vaccine



To eliminate hepatitis C, over 2 million people should be cured but, only 1 in 3 people with insurance get timely treatment

Timely Hepatitis C Treatment* by Insurance Type

Medicaid

23%

77% not treated

Medicare

28%

72% not treated

Private

35%

65% not treated

0% 50% 100%

*Hepatitis C treatment started within 12 months of diagnosis during January 30, 2019 to October 31, 2020

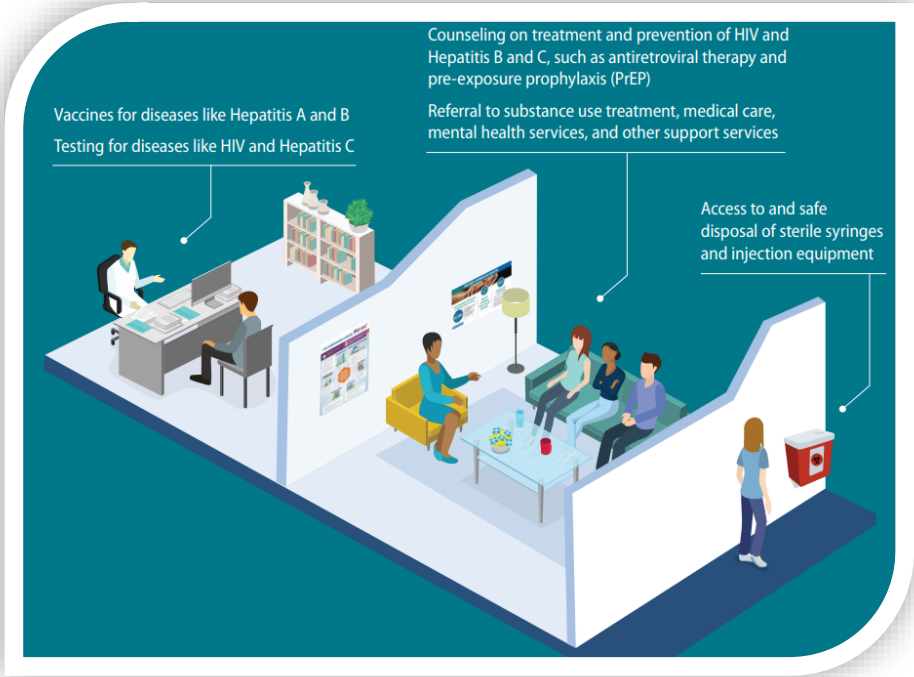
Treating people with HCV would save billions of dollars and tens of thousands of lives, but...

Current Barriers to Treatment

- Insurance restrictions
- Insurance preauthorization requirements
- Requirements for liver damage, sobriety and GI specialists

Comprehensive syringe services programs (SSPs) are safe, effective, cost-saving, and do not increase drug use or crime

SSPs are associated with >50% reduction in HIV and HCV incidence



STDs have been increasing since 2014

Chlamydia



Gonorrhea



Syphilis



\$16 billion per year of healthcare costs
Increase infertility and HIV infections

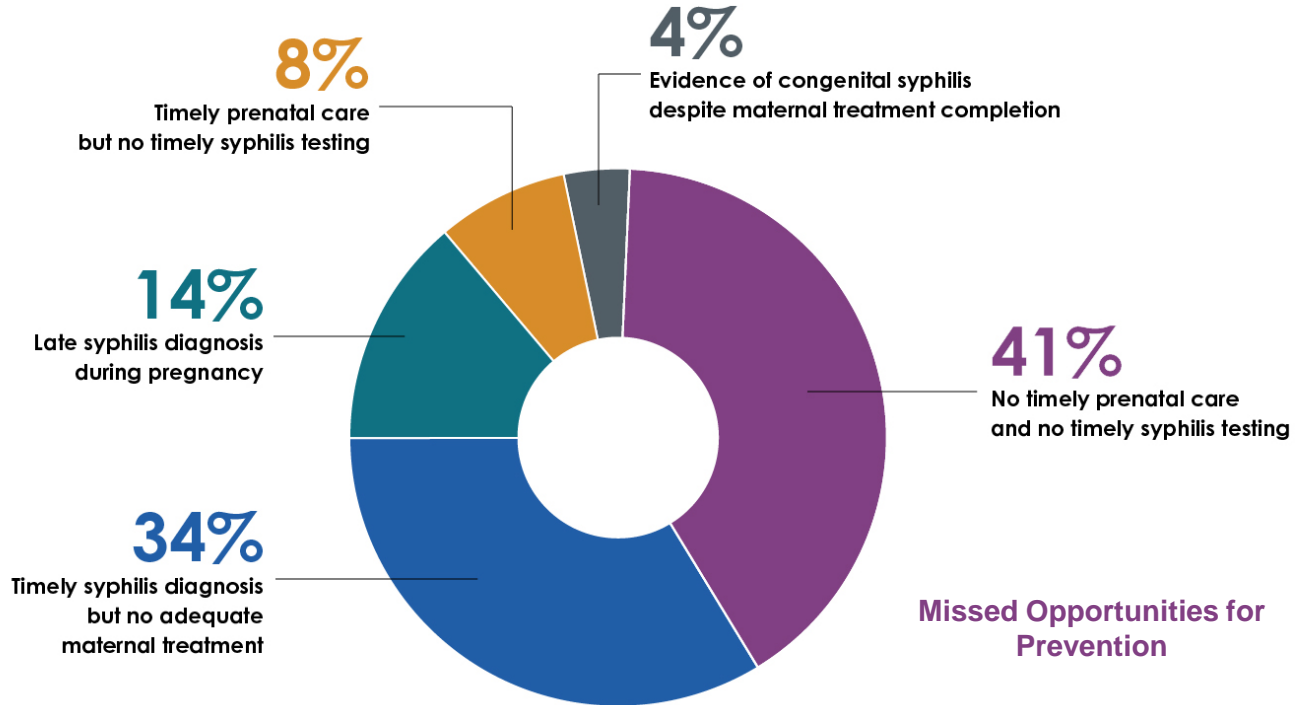


Syphilis Among Newborns

Congenital syphilis surged to more than 27-year high, with 3,000 babies born with syphilis in 2021

Congenital Syphilis

- Stillbirth
- Lifelong cognitive and physical disability



Tuberculosis hides
in plain sight

>8,000 cases of TB
disease each year

About 13 million
Americans live with
latent TB infection

New effective
treatments for LTBI

Shorter treatment for
TB disease

Tuberculosis (TB) Disease: Only the Tip of the Iceberg

There are two types of TB conditions:
TB disease and latent TB infection.

People with **TB disease** are sick
from active TB germs. They
usually have symptoms and may
spread TB germs to others.

People with **latent TB infection** do not
feel sick, do not have symptoms, and
cannot spread TB germs to others.

But, if their TB germs become active,
they can develop **TB disease**.

Millions of people in the U.S. have
latent TB infection. Without treatment, they are at
risk for developing **TB disease**.

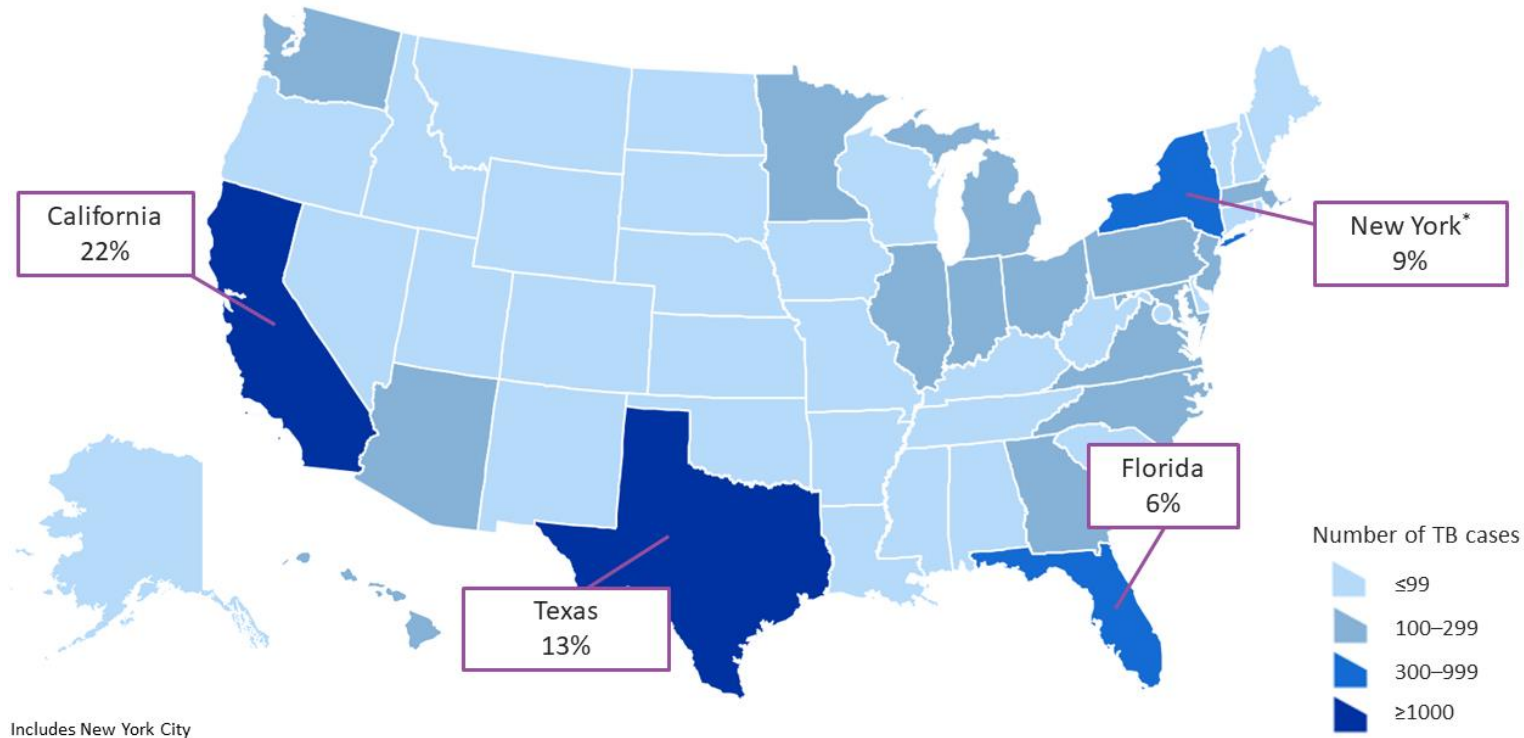


U.S. Department of
Health and Human Services
Center for Disease
Control and Prevention



To learn more about TB, visit
www.cdc.gov/tb

The number of U.S. tuberculosis cases increased 5% in 2022



**Saving lives and saving money through
policy**

Prevention saves lives and money

Federal funding for HIV over time associated with decreased HIV mortality and disparities in death rates

\$10 per student reduces sexual risk, substance use, and mental health issues among adolescents

State funding for STIs associated with reduced incidence of gonorrhea

TB work over past 2 decades prevented >300,000 TB cases and saved \$14.5 billion in societal costs

Diagnosing and curing people with HCV saves states money and prevents illness and death

For every \$1 invested in HIV testing, \$2 is saved

Syndemic Approach is Effective, Equitable, and Cost-Saving Policy

Syndemics occur when diseases or health conditions **interact with each other** and, by that interaction, **increase their adverse effects** on the health of communities



HIV, Viral Hepatitis, STDs, and TB interact and overlap in populations



Societal factors, e.g., limited housing, poverty, discrimination, stigma, and the opioid crisis, increase and perpetuate harmful effects





People Matter

Differential incidence, morbidity, and mortality are frequent and frustrating

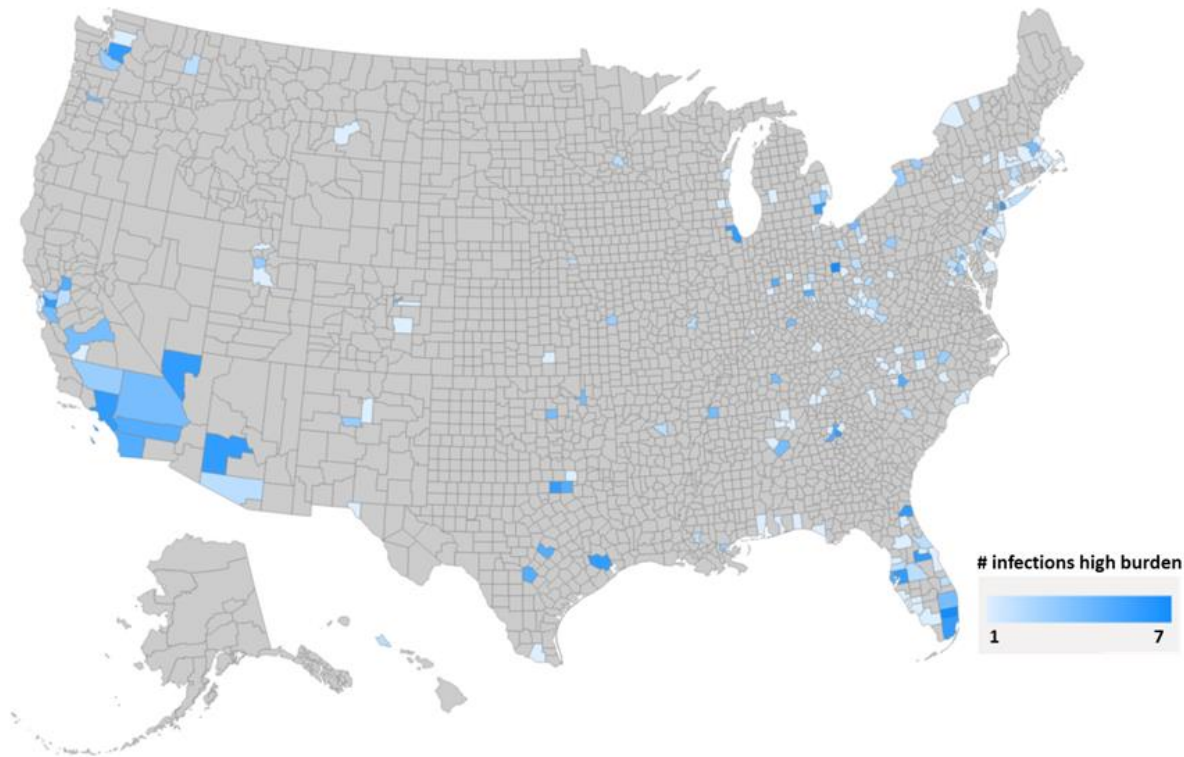
Inequities are not inevitable

Communities benefit from comprehensive approaches

Strong partnerships improve outcomes



Counties with highest burden* for HIV, chlamydia, gonorrhea, acute HBV, acute HCV, syphilis, and/or TB



* Highest burden defined as counties with the highest number of diagnoses accounting for 50% of diagnoses for each infection



Place Matters

Disparities in geographic distribution and resources

Social and economic determinants lead to most disparities

Align resources to disease burden

Co-locate services to provide holistic care



Science Matters

Multi-pathogen testing

Multi-pathogen vaccines

PrEP guidelines decrease STI and HIV incidence

SSPs prevent HIV, HCV, and overdose deaths



Policy Matters

Policy can maximize reach and effectiveness

Good policy can be cost-saving

Policy can act upstream and improve health equity

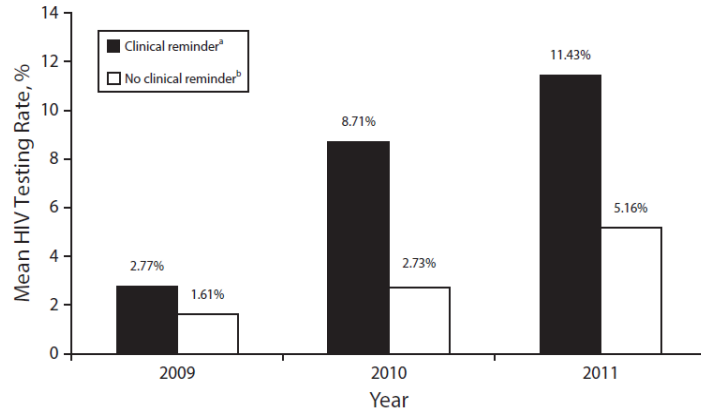
Policy and law provide long-term solutions

Policy interventions that work

Testing and screening policies

Veterans Administration HIV screening program **doubled testing**

FIGURE 1—Mean annual HIV testing rates at Veterans Affairs facilities with and without a routine HIV testing electronic clinical reminder: United States, 2009–2011.

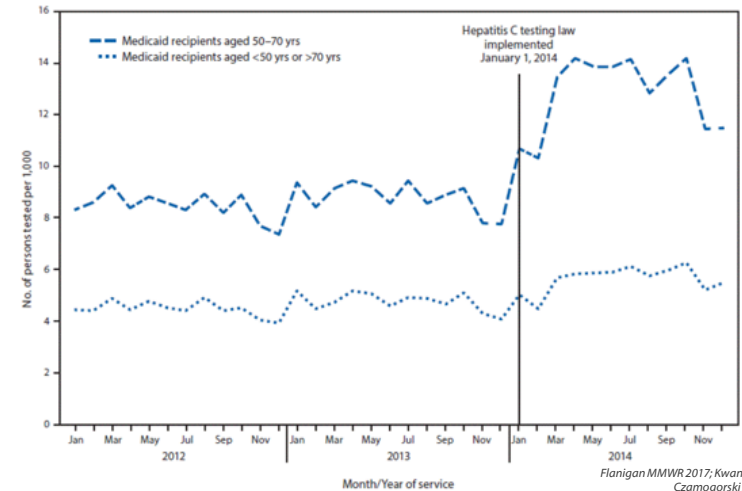


^a47 VA facilities used an electronic reminder for at least 1 quarter.

^b56 VA facilities did not use any electronic reminder.

New York HCV testing law associated with **52% increase** baby boomer testing

FIGURE 2. Rate of hepatitis C virus testing* per 1,000 Medicaid recipients, by age cohort — New York, 2012–2014



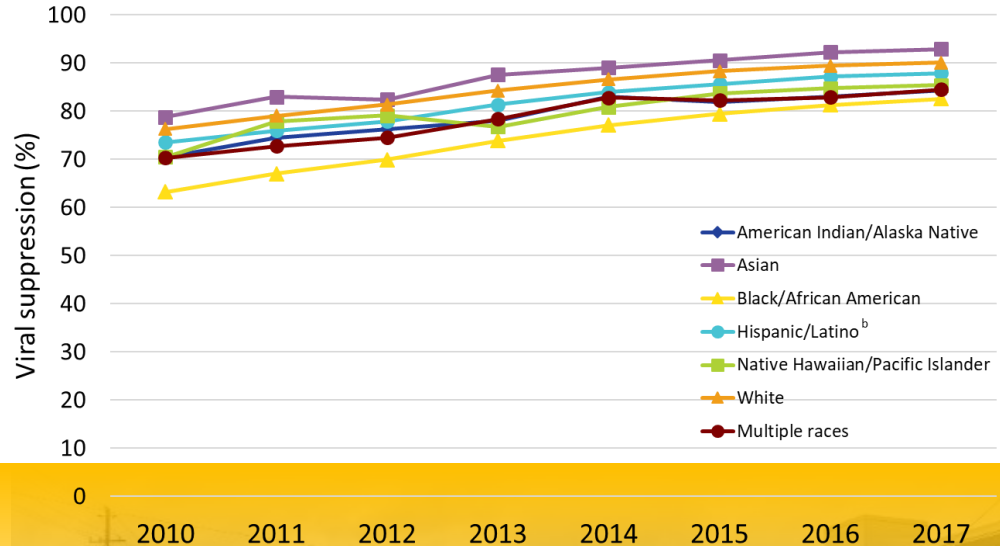
Flanigan MMWR 2017; Kwan PPHR 2016; Czamogorski AJPH 2013

Care coverage, housing, and HIV outcomes

Experiencing homelessness associated with **2.5 higher odds** of detectable viral load

For uninsured patients, Ryan White services associated with viral suppression (**77% vs 39%**)

Patients in Ryan White were **5% more likely** to be virally suppressed than those with private insurance

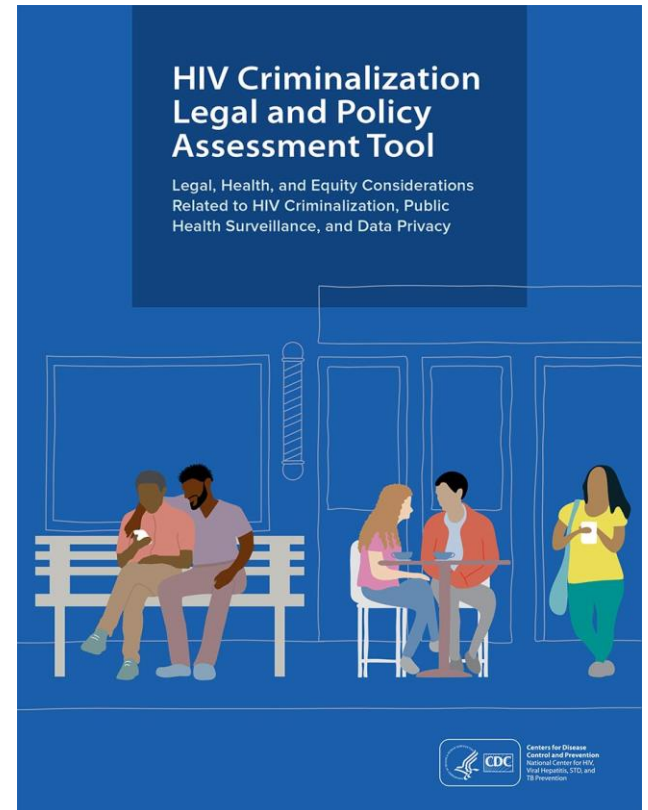


HIV criminalization laws and public health

HIV criminalization laws not associated with decreased HIV incidence, but are associated with social harm

HIV Criminalization Legal and Policy Tool can assist state policymakers by providing current scientific and medical evidence

<https://www.cdc.gov/hiv/policies/law/hiv-criminalization-legal-and-policy-assessment-tool.html>



Other policies that have data to show they work

- **Expedited partner therapy for STIs**
- **Medicaid expansion and HIV testing and viral suppression**
- **Syringe services laws**
- **Public and private insurance coverage of HCV treatment**
- **Naloxone distribution**
- **Latent TB Infection screening and treatment**
- **LGBTQ supportive school policies and multiple health outcomes among students**
- **Anti-LGBTQ discrimination laws and HIV-associated mortality**

How CDC Can Support State Policy Work

1. Collect and analyze data related to laws and policies
2. Identify and assess policy options in relation to health impact, feasibility, and economic and budgetary impacts
3. Provide science and evidence to inform policy development
4. Monitor policy enactment and assess the legal landscape
5. Build capacity of states, territories, tribes, and communities to implement and evaluate policies



NCHHSTP's Policy as a Public Health Intervention Initiative

- Invests \$7.5 million over 5 years to conduct law and policy analyses and support a law and policy TA center
- Strengthens the ability of state policy makers to identify, evaluate, develop, and implement evidence-based policies

**COMING
SOON**

**Law and Policy Technical Assistance
Center for Policymakers**




**Law and Policy Data and
Resource Clearinghouse**

Other CDC Tools for Policymakers

Need Data?

Explore CDC's

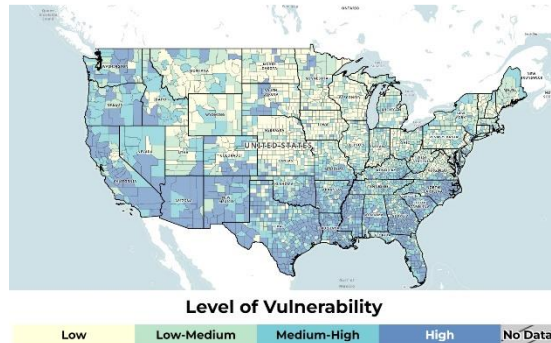


Atlas Plus

HIV • Hepatitis • STD • TB
• Social Determinants of Health Data

Where to Target Resources?

CDC's Social Vulnerability Index



Programmatic Help?



Key Policy Actions to Address Syndemics



**Put People
First**



**Focus On
Equity**



**Put Money
Where The
Epidemic Is**



**Leverage
Policy As A
Public
Health Tool**



**Support
Workforce &
Partnerships**