

Minutes
Florida Viral Hepatitis Council Meeting
May 25-26, 2005
Tampa Riverwalk Hotel
Tampa, Florida

May 25, 2005

Members attending:

Michael Gilbert (new member)
Lori Giese (new member)
Barbara Rush
Diane Rehtine
Andi Thomas
Martha DeCastro
Margaret Gale
Bill Wood
Gina Bispham
Charles Dennis
William Chen
Robert Griffin
David Nelson
Maria Eddy
Sandra Roush
Susanne Crowe

Visitors Present

Bob Schmiedt-Roche
Lynette Vaughn-Roche
Karen Skimming-Roche
Peggy St. Croix-Roche
Wendy Wilson-Roche
Jason Simdon-Roche
Sterling Whisenhunt-GlaxoSmithKline
David Sammons-GlaxoSmith Kline
Diana-Bristol-Meyers Squibb
David-Schering Plough
Jesse Fry-The AIDS Institute
Debbie Barnes-The Chance Center
Cindy Runyon- The Chance Center
Julie Vandermeer-Bay County Health Department
Roberta Hammond-Department of Health, Division of Environmental Health
Teri Ratcliff-Gilead
Caroline Raines-Alachua County Health Department
Mary Jean Linn- Alachua County Health Department
Diana King-Collier County Health Department
Connie Thacker-Okeechobee County Health Department

Dr. Rehtine nominated Dr. Johanson to fill her chair when she retires.

Maria Eddy is resigning from the American Liver Foundation (ALF) and the Florida Viral Hepatitis Council (FVHC). Sandra Roush stated that recommendations for the new co-chair should be for non-public health workers, since we already have several council members in public health. The co-chair must be an active member of the council.

Roush referred to the position paper in Section I. Dr. Nelson will write a cover letter to Department of Health (DOH) for it. Rush made a motion to accept the document as is. Gale seconded. Motion passed.

A motion was made to accept the agenda. Martha DeCastro requested to be taken off the agenda for tomorrow as she needs to leave by 2:00 pm today. She would like to follow the Bay County Health Department (CHD) presentation given today. Motion passed with this change.

Maria Eddy:

- ALF has been around nationwide for 28 years and for eight years in Florida.
- She then passed out envelopes (forms) for anyone interested in becoming a member of ALF.
- Andi Thomas asked about the new CEO in New York who replaced Alan Brownstein. It's Fred. Maria couldn't remember his last name.
- Maria then thanked ALF's sponsors and handed out plaques to Bob Schmiedt, Peggy St. Croix, and Teri Ratcliff.

Sandra Roush, Program Administrator, Florida Hepatitis Program:

- PowerPoint presentation is located in Section 8 of notebooks.
- \$2.1 million goes to CHD's
- Funded counties: Phase I – Original six counties: Pinellas, Lee, Collier, Monroe, Broward and Miami-Dade. Phase II – Seminole, Polk and Escambia. Phase III – Alachua, Bay, Okeechobee and Palm Beach.
- The Florida Hepatitis C Hotline contract is going out for bid on an Invitation to Negotiate (ITN). Just hotline, no test-kits. \$200,000.
- Headquarters staffing transition from contract with FSU to DOH. \$350,000. That figure may change.
- 67 CHD's with 92 different ways of doing things.
- We have exceeded standards for vaccine. \$54,600 per month is spent on vaccine. Gets carry-over funds from other programs. 900 doses of Hep A vax per month.
- HP 2010 supports adult vaccination programs
- Hepatitis B (HBV) vaccine given to high-risk groups like MSM, Hep C+, jails, etc.
- Map: Okeechobee vaccinates 75-100% for hepatitis A (HAV).
- Florida is the only state that vaccinates high-risk groups through a statewide program. Other states do it through STD clinics, etc.
- 2001-2005 stats: State lab panels do not include original six counties, which is a third of our state.
- The CDC-funded evaluation of the Hepatitis Program is on our website now.

Julie VanderMeer, Bay CHD

- Area 2A HIV/AIDS Program Coordinator (HAPC)
- Bay County 871 square miles, population 148,000. Known as "Redneck Riviera"

- It all began with the Hepatitis 09 Program. Identified and overcame barriers to integrating hepatitis into other programs—telling hepatitis patients they are positive and doing risk assessment (RA) forms.
- Key to success—Education (vaccination).
- Risk assessment done in STD clinics, outreach setting, etc.
- Hepatitis C-Positive Patient Referrals:
 1. Medicaid: About half were eligible
 2. Veterans Administration (VA): Most vets don't know they're vets. If you were on active duty for at least 180 days, you're a vet.
 3. Bay Medical Center: Case by case basis. Bay Cares (Volunteer Healthcare Provider Program) doesn't like doing liver biopsies
 4. Support Groups
 5. It's more about people than money.
 6. Message: Be kind to your liver. It's hard to get people to stop drinking.
 7. Mental Burden: They need someone to talk to. Most hepatitis C-positive clients don't want to talk about it with anyone, especially family.
 8. Mental Health: If on treatment, get on antidepressants.
 9. Phase III: Paying for case management, liver biopsies, and labs.
- Maria Eddy: Support groups talk a lot about treatment. Unfortunately, most say treatment is not working. Trying to get more people to attend who have had success with treatment.
- Sandra Roush: Emphasized Bay CHD has good referral system. That's why we asked Julie to come today. They are **not** a funded county, but look what they've done!

Martha DeCastro, Florida Hospital Association

- Hospitals have to have an ICP (Infections Control Program).
- Concern for healthcare workers: Hospitals concerned about hepatitis A, HIV, employees with needle-stick exposures. HBV is a primary concern.
- “Viral Hepatitis: Occupational Implications”
- Prevention is major focus of ICP in hospitals.
- Utilize standard precautions
- Sharp Safety
- OSHA jumped on blood-borne pathogens several years ago.
- Lots of liabilities with HCV-positive employees. Hospitals support them and get them on treatment.
- HAV vaccine is offered to employees in the childcare center at Tallahassee Memorial Hospital.
- Andi Thomas: OSHA is not just for government agencies, also serves the private industry sector.
- Lori Giese: Exposure to blood—employee has to report it ASAP—that is not always realistic especially if they're taking care of a patient, putting out a fire, performing surgery, etc.
- Sandra Roush: Section III, Implementation Steps, pertains to this.

Sandra Roush, Veterans

- Referred to Section 4. VA, as an organization, has done a lot in the treatment arena.

- Julie VanderMeer: They also do a lot of research. Vietnam vets have a higher rate of HCV. Did the Immune Globulin (IG) shots they received cause the HCV? Dr. Nelson said no---it's related to injection drug use (IDU).
- Andi Thomas: Not all Vietnam vets go to the VA. Many have private insurance and prefer to go to their own doctor.
- Charles Dennis: The problem (HCV, etc) has to be identified PRIOR to being released from active duty if it's service connected.
- Julie VanderMeer: If not identified prior to release, then vets are seen on a "space available" basis.
- Sandra Roush: There's data from the VA. Read up on VA in our handout and we'll discuss at another meeting.
- Andi Thomas will send Sandra Roush an email on the VA.

Sandra Roush, Council Business

- Strategic Plan has been approved by DOH Secretary Dr. Agwunobi, Legislative Affairs, etc. It's in the DOH Graphics Department. Hope to have the document by October.
- Talked about nomination forms
- Andi Thomas is interested in who's submitting abstracts to the Centers for Disease Control (CDC) Viral Hepatitis Meeting in Washington, DC in December.
- Barbara Rush has submitted one on integrating into substance abuse.
- Margaret Gale, as a community member, doesn't always know about educational opportunities.
- Sandra Roush pointed out all the emails she sends to the Council in regard to this.
- Roche and Schering-Plough have educational CD Roms.
- Andi Thomas says Florida shines when compared to other states. She's encouraging everyone to submit abstracts on integration, etc.
- Sandra Roush: The Davis Productivity Award to the State Lab regarding use of signal to cutoff—we're presenting that as an abstract.
- Andi Thomas: Document from NVHR (National Viral Hepatitis Roundtable). Strategy to eliminate viral hepatitis. Draft a plan. Hepatitis vaccine is high on the charts.

Dr. Willaim Chen, University of Florida

- Hepatitis is a small portion of his job.
- Liver cancer and viral hepatitis among Asian Americas is still ahead of the rest of the country (US), especially with HBV. Big issue.
- "National Hepatitis B Awareness Week," May 9-16, was just passed by Congress.
- Asian Americans and Pacific Islanders account for more than 50% of hepatitis B cases.
- There's no genetic reason for this. It's immigration and exposure issues. Also, in the past in their culture, a mother would chew food & then put it in baby's mouth. Hepatitis B was transmitted that way frequently.
- Many are foreign-born and have limited English proficiency.
- A study in Alachua County showed: More than 90% of students in 7th, 8th, and 9th grades received all three hepatitis B shots as required by the State.

- New ACIP Proposal 2005: All first generation immigrants from Asia are screened for the hepatitis B surface antigen.
- There's a close linkage between HBV and liver cancer. All Asian Americans should be screened by age 45.

Dr. Roberta Hammond, Vibrio Vulnificus

- She and her colleagues are happy to present Vibrio Vulnificus talks to any associations.
- She works closely with the Florida Department of Agriculture .
- Vibrio Vulnificus is not a result of fecal pollution.
- 98% of it is caused by raw oyster consumption. The rest are wound infections. Oysters are filter-feeders.
- She only sees sporadic cases—never an outbreak.
- Healthy people are not susceptible. Alcoholics with liver damage are most susceptible to Vibrio Vulnificus. Also, folks with liver disease.
- Most at-risk: A middle age, white male, who drinks a lot. 85% of the cases are males.
- Irradiation: spices have been irradiated for years. Spices are a filthy food.
- It's ok to eat post-harvested oysters.
- Wound infections in oyster shuckers—high risk group
- You can order fact sheets and brochures from the ISSC (Interstate Shellfish Sanitation Conference.)
- Jesse Fry asked: “What makes a healthy person not susceptible?” Roberta will follow-up on that question and check with a colleague from the University of South Florida (USF).
- We should target and educate podiatrists and wound-care infections specialists.

Dr. David Nelson, Florida Hepatitis Collaboration, Assessment, Resources, and Education (Hep-CARE)

- Train the CHD on how to take care of HCV patients. Train 1-2 years.
- Caroline Raines (Alachua CHD): Dr. Nelson and Mitzi come over once a month. DOH provides some lab testing help. Test 130 patients per month, six were HCV- positive.
- Current cure rate for HCV is 45%, depending on genotype.
- The State needs to be convinced that they're sitting on a time bomb.
- Andi Thomas asked about doing this project outside of public health---like in the BPHC Centers (Bureau of Primary Health Care.)
- Dr. Nelson said this has been done in New Mexico on Native American clients.
- Sandra Roush: DOH did not provide pre-treatment evaluation for this project. There's talk of expansion of Florida Hep-CARE Project.
- Sandra Roush: There's a one-pager on the AIDS Drug Assistance Program (ADAP) Project in everyone's notebook. It provides treatment for up to 60 clients who are co-infected with HIV and HCV. Richard Clark, Bureau of HIV/AIDS in Tallahassee, has data and more information on the project.

Jason Simdon, Roche

- Update on Pegylsus. In February 2005, the FDA approved for co-infection.
- Just a week and a half ago, got FDA approval for hepatitis B treatment.

- Karen Skimming mentioned Patient Assistance Program, but said she could not go into detail. They have patient kits to practice with “pretend skin” and a pre-filled syringe.
- Their brochures are also available in Spanish.
- Patient starter kit has everything the patient needs to initiate treatment.

Discussion over Patient Assistance Programs

- Bob Schmiedt said they couldn’t talk about the Patient Assistance Program because of the competitors in the room.
- Barbara Rush: “We’re here to help. Why can’t we discuss this?”
- Bob Schmiedt: “It’s an anti-trust issue. We go to jail for collusion.”
- Sandra Roush: “April Crowley (health educator in the Hepatitis Program) gives out the toll-free numbers for Patient Assistance Programs and other information all the time.”
- Diana with Bristol-Meyers Squibb: In launch phase of oral treatment for hepatitis B. They have a Patient Assistance Program.
- David with Schering Plough. Kim Kitchen is the St. Pete rep. They have “Be In Charge” program for patient calls, 1-800 number. (See brochure) for clients starting treatment. They also have a hepatitis workbook—includes diary, therapy schedule.
- Commitment to Care program not just for indigents. Also helps with reimbursement.
- Andi Thomas: The Patient Assistance Programs should start with the diagnosis, NOT when told they need treatment.

Position Statement Discussion

- Andi Thomas: “The Position Statement is not a good policy for government affairs.”
- Bob Schmiedt: “The message is that less than 10% receive treatment. The legislature will think, ‘why should we do this?’”
- Dr. Nelson: “This is the reality. We have a system that is broken. We’re not going to sugarcoat it. Eventually we’ll need \$30-40 million dollars.”
- Bob Schmiedt: “If you leave it in, you better have an answer to back it up.”
- Sandra Roush: “The Medicaid data from the Agency for Healthcare Administration (AHCA) is a public document. Sensitivity to the State Program is not being effective.”
- Dr. Nelson: “Improving patient care in Florida should be the goal of the Council.”
- Sandra Roush: “Finished third year legislative. Florida Hepatitis Program provides technical assistance to science of hepatitis, not science of Medicaid.” Sandy will ask Medicaid to come to the next meeting for a discussion as opposed to a presentation.
- Dr. Nelson: Need data to show what hepatitis is costing Florida in morbidity and mortality.
- Dr. Woods: USF might have some research data.
- Jesse Frye encourages each council member to educate the representative from his or her area on hepatitis.

Connie Thacker, Okeechobee CHD

- The hepatitis A incidence in Okeechobee was up there with California. The CDC did an epi investigation.
- Faith Farm – Drug Rehab residential facility
 1. For men, 18+, already clean, not detoxing. They have to work, cook, etc. IG to 82 persons – one had HAV from Polk County.
 2. Got request for HIV testing in the facility. Connie heard about the Hepatitis Program, so they tested 58 men: 23 were positive; 18 for HBV; 12 for HCV; and 7 co-infected with hepatitis B and hepatitis C.
 3. Decided to go once a month to vaccinate and test new guys. Some are repeaters. Offered pre-test counseling and risk assessment. If positive, gave them referral & copy of bloodwork to give to their doctor when they get out in nine months.
 4. They vaccinate all positives. Not one of them was positive for HIV. Hepatitis is the issue with this group. They know nothing about this disease. CHD does a lot of education—keep healthy, prevention, etc. Offers no treatment.
 5. Ten new students a month. CHD goes to facility for two hours at night once a month.
- CHD now has an MD! Would like to offer services to local women's shelter (deals with domestic violence). Also working with their jail. CHD will supply vaccine and testing. The jail has a nurse.

Sandra Roush: Reminder recall for vaccine series completion.

Barbara Rush, Center for Drug Free Living, Brevard County

- Started testing for hepatitis with Home Access.
- Collaborated with Brevard CHD for testing. Orange CHD wanted to come on board too.
- Now offering vaccine at facility.
- Also doing hepatitis education.

Roush: Need nomination for co-chair to replace Maria Eddy. Also need nomination for community chair because Ralph Morris is moving to North Carolina.

End of day one.

May 26, 2005 Minutes

Sandra Roush

- Wants to take more nominations for a new co-chair and vote by email
- Have community forum

Diana King, Collier CHD

- Total population is 258,000 in Immokolee
- 71% are Hispanic in Immokolee
- 78% Caucasian in Naples

- The average migrant worker makes \$7,000 per year. Crowded housing—share personal items. No time for doctor's appointments. They get meds (like antibiotics) shipped in from their country. They share IV (not illegal drugs)
- Big language barrier. Many different dialects of Spanish. Collier CHD has a translation service.
- Big need for primary care. Collier CHD not licensed for primary care.
- Cultural differences—for example, baby won't stop crying. Put liquor in the milk bottle. Are 50-75 years behind us in terms of "old wives tales."
- Building trust and a rapport helps.

Gina Bispham, Miami-Dade CHD, TB & Refugee Health

- Test for TB, HIV, STD, and hepatitis.
- Children get physicals before starting school
- Barrier—no primary care at CHD
- Getting jobs is a priority for refugees, not healthcare
- Cuban, Haitian populations very transient
- Illegal maritime arrivals: Have CHD staff on call 24/7.
- Barrier: Identify need, for example, make a dental appointment—refugee doesn't show up.
- Staff speaks English, Spanish, and Creole. Also have translation services for Chinese, African, etc.
- Barrier: Don't understand hepatitis B vaccine series of three shots. "Why do I have to come back?"
- 16,000 new clients per year. One percent have hepatitis B. They share needles (not for drugs, but for vitamins). Whole families have HBV.
- Goal is to educate them. Frustration with follow-up treatment.
- Incentive to get them back: McDonalds & Wendy's coupons. (Gets \$300 from the Bureau of TB & Refugee Health for this.)
- 63% come back for the 2nd hepatitis B shot; Out of that 63, 75% come back for the 3rd hepatitis B shot.
- A lot of her staff are physicians in their own native countries, but are not licensed here in the U.S.
- See 80-100 clients per day
- Definition of "refugee:" Apply for asylum before they come here. Come in to U.S. and can't go back to their country. Have been persecuted in their country and are seeking refuge.

Bob Schmeidt, Roche

- The Viral Hepatitis Council in Florida is ahead of other states
- Statewide Plan: Many states have a plan. In most states, the plan comes first, then a council.
- Mentioned Bruce McCall with Medicaid. Sandra Roush said she's met with Mr. McCall.

Debbie Barnes, community member

- The Chance Center opened up in March in Gulfport and serves five counties: Pasco, Pinellas, Manatee, Sarasota, and Hillsborough. (Although they will see clients from any county in Florida if they're willing to drive to Gulfport.)

- They help with treatment, people going through liver transplants, and other services.
- They ask clients to either make a monthly payment or volunteer their time.

Jesse Frye, The AIDS Institute

- Gave the web address for the Partnership for Prescription Assistance:
www.pparxfl.org

Keith Cromley, Bayer Diagnostics

- As far as blood-borne pathogens, hepatitis is one of their biggest challenges.
- The Florida Legislature wants to see Florida statistics.

David Sammons, GlaxoSmithKline

- Approached Jerry Wells to get hepatitis A & B vaccine added to the Medicaid CTP codes.
- Only five states don't have A & B vaccine on Medicaid: Florida, Mississippi, Louisiana, Tennessee, and Alaska.

Diana King, Collier CHD

- "How do you promote condoms to prevent STD's to people like Catholics who don't believe in birth control?"
- Sandy Roush: "Hard issue. It's a prevention choice. People have the right to refuse."
- Barbara Rush: "It's a common problem."

Bob Griffin, Broward CHD

- "Incarcerated in Jails" PowerPoint
- No hepatitis A outbreaks in jails, although they have risk for it.
- Hepatitis B is a bigger problem in long-term residents.
- If I go to jail, I lose all healthcare access like Medicaid, etc.
- Jail = less than one year. Prison = more than one year.
- Opportunities: prevention education, vaccine, and release planning.
- Good jail linkage program in Broward.

Charles Dennis, Pinellas CHD

- HIV testing—Jail Linkage Project
- Pilot project—Pinellas & Pasco Sheriff's Office
- Collaboration/Communication
- Pinellas Jail:
- Design cap: 2454
- Bed capacity: 3110
- Average daily population: 2,900+
- 136 booked daily
- Average length of stay: 22 days
- Pasco Jail:
- Bed: 889
- Pop: 1000+
- 57 booked daily
- 29 average stay

- Provide screening, testing, immunization, counsel HIV, Hep, syphilis, TB infection in inmates.
- RA, screening, immunization, counseling & education
- Community partners: 13
- Referring persons into CHAMPS Program
- Referral into social services
- DOH/Other
- Uses unique RA (green sheet). TB, Hep, HIV, and STD all in one. Plus inmate consent form.
- Key Components
- RA form
- TB screening form
- Inmate request form
- Release of info form
- Daily reporting log
- April 1 – Doing rapid testing
- All voluntary except court-ordered
- Does not use State Lab
- RA form – see it on 14th day in facility. Select out very high risk & test first. Form is in Spanish
- If you treat prisoner like a number, you get nowhere. Treat like an individual – make progress.
- Medical screening within 14 days
- Aug 2002-Dec 2004: 1752 HBV tests, 212 were positive
- Aug 2002-Dec 2004: 1,817 HCV tests, 403 were positive
- Tomorrow's outlook – Reduce future infection rates and future healthcare costs

Dianne Rehtine, Department of Corrections

1. Jail: Direct from street, intoxicated, or on drugs
2. Prison: Transferred from jail, sober, no STD's
3. Inmate population has been growing rapidly since the 70's
4. "Soon to be Released Inmates:" A report to Congress in 2002
5. Nationwide: 36,000 inmates in 1997 with HBV, 155,000 released in 1996 with HBV. Remember, this is old data-almost 10 years old. 303,00-332,00 with HCV.
6. California, Maryland, Massachusetts, and Texas: Entering prisons—women outnumber men with HCV infections.
7. Florida Dept of Corrections has 26,000 employees, 229,000 offenders, and 60 major prisons.
8. Know co-infection rates – do hepatitis testing if client is HIV+

Council Business

- Next meeting will be either Oct 19-20 or Oct 26-27.
- Next steps: One position paper on HBV disparities in Asian-Americans---Dr. Chen will take the lead on this.
- Charles Dennis will do a position paper on corrections
- Sandy will get info from ALF & find out about the Florida Chapter.

ADJOURNED AT 12:32pm