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Meeting Notes

Date: Tuesday, January 5, 2022 (every 1st Wednesday of the month)

Time: 3PM ET / 2PM CT / 1PM MT / 12PM PT / 10 AM Hawaii

Email: administrator@hepbtaskforce.org

Zoom Meeting registration link: https://us02web.zoom.us/meeting/register/tZwkcumtrTwqE9RKoJ1dyu9n7DUuTWD6mSvf

Attendance (at or after 3:05PM) are as follows:	
Executive Board Members (Officers):	
☑ Co-Chair: Carol Brosgart, MD (San Franscisco, CA)	
Co-Chair: Richard So, MPH, Executive Director, SF Hep B Free – Bay Area (San Francisco, CA)	
☐ Secretary: Catherine Freeland, MPH, Public Health Program Director, Hepatitis B Foundation (Doylestown, PA)	
Administrator (and notetaker): Amy Trang, PhD, MEd, Founder and CEO, Social Capital Solutions (Chantilly, VA)	
Regional Directors:	
🗆 Northeast Regional Director: Ruth Brogden, MPH, Grants Manager, Center for Asian Health at Saint Barnabas Medical Cen	ter
(Livingston, NJ)	
☐ Mid-Atlantic Regional Director: Kate Lu, MSW, LCSW-C, Clinic Director, CCACC-Pan Asian Volunteer Health Clinic (Gaithersb	urg, MD
Southeast Regional Director: Christina Meyers, MPH, ORISE Fellow, CDC Division of Overdose Prevention (Atlanta, GA)	
☐ Midwest Regional Director: Oyu Tumurtuya, PharmD, Founder & President, Mongolian Community Health Network (Chica	go, IL)
☐ South Midwest Regional Director: Stephen Fakoyejo, MD, MPH Medical Resident, HCA Houston Healthcare West (Housto	ո, TX)
☐ Western Regional Director: Thaddeus Pham, Viral Hepatitis Prevention Coordinator, Hawaii State Department of Health	
(Honolulu, HI)	
Student Representation	
☑ Sandra Kong, Stanford Team HBV (Stanford, California)	
Board Advisors:	
☑ Richard Andrews, MD, MPH, Board Advisor (Houston, TX)	
☐ Moon Chen, PHD, MPH, Board Advisor (UC Davis; Sacramento, CA)	
☐ Chari Cohen, DrPH, MPH, Board Advisor (Hep B Foundation; Doylestown, PA)	
☑ Charl Coller, Birth, Wirth, Board Advisor (Nep Brodindation, Boylestown, FA) ☑ Robert Gish, MD, Board Advisor (Robert G. Gish Consultants; San Diego, CA)	
 ☑ Lu-yu Hwang, MD, Board Advisory (Department of Epidemiology, University of Texas HSC; Houston, TX) 	
☑ Eu-yu Hwang, MD, Board Advisory (Department of Epidemiology, Offiversity of Texas H3C, Houston, TX) ☑ Karen Jiobu, Board Advisor (Asian American Community Services; Columbus, OH)	
Amy Tang, MD, Board Advisor (North East Medical Services; San Francisco, CA)	
General Members (open to all on listserv; please excuse any typos): Total Number of attendees: 17	
☑ Binh Tran, PharmD, APHF and Hep Free LA (Los Angeles, CA)	
☑ Jacki Chen, PhD (NJ)	
☑ Vivian Ching, CPACS (Atlanta, GA)	
☑ Jeff Loi, Hepatitis B Coordinator, Santa Clara County (San Francisco, CA)	
☑ Soo Yee, Korean American Outreach Group (DC metropolitan area)	
☑ Zinnia Dong, NEMS (San Francisco, CA)	
☑ Nancy Fenlon, CDC (Atlanta, GA)	
✓ Sourichanh Chanthyasack (CA)	

Note: There may be some members missing from this list of attendees; please excuse any omission.

Agenda:

- 1) Welcome Task Force members (Dr. Carol Brosgart and Richard So)
- 2) Note any changes to previous meeting's notes
- 3) Setting the goals for 2022:
 - a. HBV universal vaccination guidance promotion among providers
 - b. HBV ECHO program expansion
 - c. HBV workforce development projects
 - d. HBV elimination plan best practices among state Viral Hepatitis Coordinators
 - e. HBV work group on updating screening guidance
- 4) Action Plan discussion: How are we going to do this?
- 5) Regional Updates (all Regional Directors)
- 6) Other items (all members)

Meeting format:

strategic discussions and resource sharing to assist members with their local work

Notes:

- 1) Welcome: Introduction / Roll Call of Officers and Regional Directors (Amy Trang)
 - a) Opening remarks made by Dr. Carol Brosgart and Richard So
 - b) Members were asked to introduce themselves in the chat box
 - c) Recognize any new members on the call: none
- 2) Note any changes to previous meeting's notes: none
- 3) Setting the goals for 2022
 - a) HBV universal vaccination guidance promotion among providers (Dr. Carol Brosgart)
 - i) Dr. Brosgart intends to reach out to Dr. Caroline Wester at CDC and Dr. Noelle Nelson (specializes in internal medicine / pediatrics) to further discuss the HBV universal vaccination recommendations for adults since the ACIP recommendation is only for ages 19 to 59.
 - ii) There is still a need to get those who are 60 years and older tested, especially those who are at high risk for whatever preconditioned health reasons or those living in an assisted living or nursing home sharing a room with other individuals and may be exposed to some sort of "sharp" whether its an actual needle or syringe.
 - iii) Note that just because ACIP has recommended HBV universal vaccination, it doesn't mean that physicians are automatically going to do it so it's our job at the Task Force to reach out to all the professionals, medial associations, nurses associations, and mid-level practitioner associations to let them know that this is now an ACIP recommendation.
 - iv) We also need to follow up with CDC to have the discussion about universal HBV screening guidelines for adults and getting medical societies to follow the recommendations.
 - b) HBV ECHO program expansion (Richard So)
 - i) It's exciting to see both the "West Coast" and "East Coast" HBV ECHO programs are going strong after a year of piloting the program.
 - ii) We also have the Texas ("Gulf Coast") HBV ECHO program that started a few months ago that's gaining interest.
 - iii) As mentioned during the last Task Force meeting, Hawaii also recently received some funding to start their HBV ECHO program and will be looking towards other hubs for resources and guidance.

- iv) While there is growing interest among providers to participate in the HBV ECHO programs, the challenge is that these sessions are in "live" time and cannot be recorded and reposted because of liability issues.
- v) The benefits of the HBV ECHO programs are getting updates from didactics and learning from each other's patient case studies as well as discussing unique cases for patients with multiple conditions.
- vi) The Task Force monthly meetings will continue to be a venue to share resources and best practices for managing the HBV ECHO programs in the different locations throughout the US. It will be where we continue to brainstorm on how to effectively invite more providers to participate in the HBV ECHO sessions.
- c) HBV workforce development projects (Sandra Kong)
 - i) APAMSA is in the middle of transitioning its leadership team so there's a hold up on effectively surveying the needs.
 - ii) We'll reach out to TeamHBV as well as to get their feedback.
 - iii) These two student networks are good for surveying interest and needs,
 - iv) Per the last Task Force meeting, we had discussed the opportunity to work with students who may be interested in advocacy work, data collection, and data analysis in addition to matching mentors for specific workforce development interest.
- d) HBV elimination plan best practices among state Viral Hepatitis Coordinators (Amy Trang and Jeff Loi)
 - i) New York and Hawaii both have published their viral hepatitis elimination plans/strategy, which are great models and should be a used a resource for other states. See links below:
 - (1) <u>Health Department and Community Partners Release Plan to Eliminate Viral Hepatitis in New York City by 2030 NYC Health</u>
 - (2) Harm Reduction Services Branch | Hepatitis Elimination Strategy (hawaii.gov)
 - ii) At the local county level, we should also consider assisting with their hepatitis B strategic plan. We can advocate at the local health department levels, especially in areas with high risk populations like Asian-born or African-born immigrants.
 - iii) Dr. Gish commented in the chat box that San Diego Liver Coalition has a lead position in the San Diego County viral hepatitis elimination plan; Scott Suckow could provide more details.
 - iv) Also, with the passing of AB 789 in California (<u>Bill Text AB-789 Health care services.</u>), there's an opportunity to make additional progress in California's viral hepatitis elimination strategies. Richard So will be providing updates for us on this.
- e) HBV work group on updating screening guidance (Dr. Richard Andrews)
 - i) Following some discussions outside of the Task Force, there's an interest in possibly resuming a work group to review and update the "simplified algorithm" for HBV Primary Care Guidance that was developed a few years ago with Dr. Amy Tang and Dr. Richard Andrews among others. It's currently housed with the University of Washington National Hepatitis Training Center Hepatitis B Online (uw.edu).
 - ii) The purpose of the work group is to review the existing guidelines with primary care people with a primary care focus and then seek input from specialists. The focus will be on the usability for primary care providers.
 - iii) Considerations have to also be made for treatment costs, Medicaid, etc.
 - iv) Dr. Andrews suggested looking at the National Clinician Consultation Center's Hep C program for ideas: https://nccc.ucsf.edu/clinician-consultation/hepatitis-c-management. He will also approach them to suggest that they put together additional resources for hepatitis B management.
 - v) Amy Trang is currently coordinating with Hepatitis B Foundation to organize a meeting to further discuss this
- 4) Action Plan discussion: How are we going to do this?
 - a) There's a common theme in the goals that we want to accomplish and that involves targeted outreach to providers in 2022.
 - b) Karen suggested contacting your local or state provider networks. In the past, she was successful in Ohio to share hepatitis B resources in the Internal Medicine newsletter through an internal medicine physician who helped share information about hepatitis B vaccination or immunization. They also did it through the Pediatric journal or newsletter. It would be best if someone from each state could take the lead to work with a physician who would be willing to contact their internal medicine or pediatric association to post hep B resources as well as programs and guidance that the Task Force is promoting.

- c) Dr. Brosgart suggested trying to get CDC to make recommendations and post it in the MMWR, which will ultimately roll out to become standard of care and will be picked up through the electronic medical records system as a flag or reminder that it's something that has to be done, i.e., screening and vaccination of HBV.
- d) She also suggested getting the American Academy of Pediatrics, for example, to be engaged in sharing the recommendations since most pediatricians follow their medical society's recommendation. Also look into American Academy of Family Physicians (AAFP) and having them officially engaged.
- e) Also, look into 3rd party payers, such as insurance companies, engaged. Kaiser, for example, has a network that serves our targeted population. We should try to work with them first, perhaps at the national level. Discuss HBV screening and vaccination recommendations.
 - i) Sourichanh commented in the chat box (for consideration) that chronic liver disease in the U.S. is real difficult as mentioned with the various medical health insurance option of HMO, PPO; affects one's career where the medical coverage becomes the deal breaker for job opportunities if they have quality Hepatologist in the employer's medical insurance network and co-pay max procedure or annual coverage and prescription to cover Viread, etc. It's frustrating from a patient's perspective. Here in San Francisco, California where the social services & support programs are readily available but the "benefit cliff" decision if one takes on a new or higher pay job or not.
- f) Dr. Jacki Chen suggested engaging his HBV patient network group who have direct access to their providers and could share and/or push the HBV guidance and recommendations. There are also about 50 physicians in that group. Amy Trang commented that patient groups are great advocates and source of information sharing.
- g) Soo suggested looking into the Korean American Medical Association. They have a national network as well as local state chapters. She'll explore what the best approach is, local or national. Of note, though, at the national level, their leadership is often changing because the terms are short so it's sometimes hard to get long term commitments. Amy commented that we should look into other similar medical associations among providers that treat multilingual communities.
- h) Vivian shared that CPACS has limited resources for hepatitis B programs currently, but would take notes on what the Task Force intends to do. Amy commented that federal qualified health centers (FQHC) like CPACS are great places to also recruit primary care providers and get them more engaged in screening / testing and treating HBV.
- i) Sourichanh shared, as a patient and community advocate, he's happy to see that the Task Force is still very active and going strong. He used to do some education in the Lao and Southeast Asian community on heath and had participated in the last two World Hepatitis Alliance meetings in Scotland and Brazil. He's interested in resources on the impact of COVID-19 on HBV patients.
 - i) This is a good perspective to consider for more provider engagement. Amy will follow up on how we could use COVID-19 to leverage resources and engagement.
 - ii) Karen commented in the chat box that it might be helpful with universal vaccination to learn from the COVID vaccination initiative as well as use the computer to screen for Hep B as well as those not having vaccinations for Hep B.
 - iii) Articles relating to HBV and COVID-19:
 - (1) What to Know About Liver Disease and COVID-19 | CDC
 - (2) COVID-19 and hepatitis B infection PubMed (nih.gov)
 - (3) Interaction between hepatitis B virus and SARS-CoV-2 infections (nih.gov)
 - (4) COVID-19 Update » Hepatitis B Foundation (hepb.org)
 - (5) <u>2000501-factsheet-hep-B-covid-19.pdf</u> (Australian publication)
- j) Nancy suggested engaging perinatal coordinators. Before the COVID pandemic, the perinatal coordinators participated in the HBV ECHO calls hosted by the University of New Mexico; we could reengage them.

- i) Nancy will also try to put Amy on the agenda for the April 13th quarterly meeting so she could directly talk to them
- ii) In the meantime, Amy will also share Empire Liver Foundation's upcoming HBV training resources, which is very appropriate for orientation for new perinatal coordinators.

Link: <u>Hepatitis Provider Training - Empire Liver Foundation</u> (Registration is required)

5) Regional Updates

- a) Student Representative (Sandra Kong): provided above
- b) Western Region (Thaddeus Pham): provided above
- c) Midwest Region (Oyu Tumurtuya): no updates
- d) South Midwest Region (Stephen Fakoyejo): no updates
- e) Northeast Region (Ruth Brogden): via email
 - i) The new meeting day/time conflicts with the Liver Center.
 - ii) NJ Viral Hepatitis Elimination Committee is reconvening their meetings to finalize the draft plan, but the new wave of COVID may pose some delays.
 - iii) The new name of the Saint Barnabas Medical Center is Cooperman Barnabas Medical Center; they added another hospital Emergency Department (Somerset Medical Center) to their automated screening program that includes HBV.
- f) Mid-Atlantic Region (Kate Lu): no updates
- g) Southeast Region (Christina Meyers): no updates

6) Other items:

a) Amy Trang shared that The National Task Force on Hepatitis B has not secured any funding or support for 2022 activities; all initiatives are currently on a voluntary basis by all members.

Meeting adjourned at 4:00PM Eastern Time.

- Next Hep B Task Force Zoom meeting date: Wednesday, February 2, 2021 at 3PM Eastern Time / 2PM Central / 1PM Mountain / 12PM Pacific / 10 AM Hawaii (1st Wednesday of each month).
 - o Other dates in 2022: Mar 2, Apr 6, May 4, Jun 1, (no regular meetings in Jul and Aug), Sep 7, Oct 5, Nov 2, Dec 7
- Note: Lunar New Year is Tuesday, February 1, 2022. Happy Year of the Tiger!
- Suggestions for the next agenda:
 - i) Follow-up on Action Plan discussed and progress of provider outreach efforts.

Upcoming HBV ECHO sessions: Free CME

West Coast (SF Hep B Free Bay Area): <u>Hepatitis B ECHO Program (sfhepbfree.org)</u>

- Every 3rd Tuesday of the month
 - o 2022: Jan 18, Feb 15, Mar 15, Apr 19, May 17, Jun 21, Jul 19, Aug 16, Sep 20, Oct 18, Nov 15
- 12:30PM 1:30PM PDT / 3:30PM 4:30PM EDT / 9:30AM 10:30AM HST
- To register, email: ECHO@sfhepbfree-bayarea.org

Gulf Coast (Texas Heart Institute with Baylor St. Luke Medical Center): Project ECHO Interest Form (bcm.edu)

- 3rd Wednesday of the month
 - o 2022: Jan 19, Feb 16, Mar 16, Apr 20, May 18, Jun 22, Jul 20, Aug 17, Sep 21, Oct 19, Nov 16
- 12:00PM to 1:00PM Central Time
- To register: Project ECHO Interest Form (bcm.edu)

East Coast (Hep B United Philadelphia): Hepatitis B ECHO Meeting Registration - Zoom

- Every 4th Thursday of the month
 - o 2022: Jan 27 Feb 24, Mar 24, Apr 28, May 26, Jun 23, Jul 28, Aug 25, Sep 22, Oct 27
- 12:00PM 1:00PM Eastern Time
- To register: Meeting Registration Zoom

Items shared via email:

- Suggestion to send a calendar invite to all Task Force members to mark the new meeting dates / times.
- Click here to register: <u>Hepatitis Provider Training Empire Liver Foundation</u>
 - January 13, 2022: Hepatitis B Epidemiology, Screening, and Prevention Dr. Paul Galio, MD
 - o January 20, 2022: Hepatitis B Pre-Treatment Evaluation and Treatment Initiation Dr. Lisa Ganjhu, DO
 - o January 27, 2022: Management of Hepatitis B and Treatment Monitoring Dr. Harmit Kalia, DO
- Become a Hep B Advocate! Sign-up below to receive the latest news and updates about hep B policy issues, learn about upcoming advocacy events, and be notified of opportunities to take action and show your support for our policy initiatives. We'll provide resources, information, and tools to help you:
 - Communicate effectively with your elected officials
 - o Educate and engage your community on hep B policy issues
 - Recruit and organize other hep B advocates and champions in your community
 - o Promote and participate in ongoing national, state, and local advocacy efforts

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