Attachment 3

Goals/Objectives Table

Hepatitis Testing and Linkage to Care (HEPTLC): "Early Identification and Linkage to Care for Persons with Chronic HBC and HCV infections"

Category A: Testing and Referral of Persons who are Chronically Infected with HBV

Increase the proportion of

persons among highly affected

populations living with chronic

• Within

approx

funding

their of their infection:

 Persons born in countries with intermediate or high rate of HBV infection

HBV infection who are aware of

Goals

Increase the proportion of persons who tested positive for hepatitis B receive prevention counseling and are linked to care treatment and prevention services

Objectives

- Within the project year, conduct approximately 1,000- 4,000 (depending on funding Tier) HBV tests per awardee, to identify chronic HBV-infected persons (Hepatitis B surface antigen and Hepatitis core antibody) who were previously not aware of their infection
- A minimum of 85% of persons who test positive for hepatitis B receive their test results
- At least 85% of persons tested for hepatitis
 B have their risk factors documented
 including country of birth
- At least 85% of cases identified during the project period are reported to surveillance within 6 months of diagnosis date
- A minimum of 75% of persons who test positive for hepatitis B receive post-test counseling
- A minimum of 75% of persons who test positive for hepatitis B are linked to care, treatment, and preventive services

Category B: Testing for HCV Infection and Enhancing Linkage to Care for Persons HCV

Goals Objectives

Increase the proportion of persons among highly-affected populations living with chronic HCV infection who are aware of their of their infection:

- Persons Who Inject
 Drugs (PWIDs) and
 persons who use non injection opiates
- Persons born from 1945 through 1965

Increase the proportion of persons who test RNA positive for hepatitis C who receive prevention counseling and are linked to care treatment and prevention services

Increase the proportion of newly diagnosed persons who receive antiviral therapy within CHC ECHO settings

- Within the project year, conduct 1,000 to 4,000 HCV tests per awardee (depending on funding Tier) to identify HCV-infected persons (Hepatitis C antibody and Hepatitis RNA) who were previously not aware of their infection
- A minimum of 85% of persons who are found to be HCV antibody positive are tested for HCV RNA
- A minimum of 85% of persons who test positive for HCV RNA receive their test results
- Obtain risk factor data for at least of 85% of persons tested for hepatitis C antibody
- At least 85% of cases identified during the project period are reported to surveillance within 6 months of diagnosis date
- A minimum of 75% of persons who test positive for HCV RNA receive post-test counseling
- A minimum of 75% of persons who test positive for hepatitis C RNA are linked to care, treatment, and preventive services
- A minimum of 15% of persons who test positive for HCV RNA begin antiviral therapy (All CHC settings)
- A minimum of 50% of physicians and other clinical staff providing care for persons with HCV will participate in training sessions and case presentations
- At least 100 cases of HCV will be presented in training sessions over the project year
- Based on the presentation and consultation, at least 75% of persons presented for case conference will have their care management

- updated including a decision to begin or defer HCV therapy
- A minimum of 20% of persons presented for case conference will begin antiviral therapy