A National Strategy for the Elimination of Hepatitis B and C
An overview of the two phases for development of the full Institute of Medicine (IOM) report

Overview
In the face of recent developments in hepatitis C virus (HCV) therapeutics, enhanced global solidarity for hepatitis B virus (HBV) and HCV elimination goals (see below), and the release of the nation’s first comprehensive action plan to strengthen the nation’s response to viral hepatitis—*Combating the Silent Epidemic of Viral Hepatitis: Action Plan for the Prevention, Care, & Treatment of Viral Hepatitis*, an ambitious public health plan is needed to assess and identify feasible elimination goal(s) for the United States to reach by 2030 for HCV incidence, HCV mortality, HBV incidence, and HBV mortality, and specify a plan of action to achieve the goals.

Global Call to Action
In May 2014, the 67th World Health Assembly (WHA) endorsed a landmark resolution (WHA67.6) recommending that Member States and WHO’s Director-General take action to strengthen surveillance, prevention, access to treatment, and control of viral hepatitis in all countries. In the resolution, the WHO Director-General was asked to examine the feasibility of—and strategies needed for—the elimination of HBV and HCV with a view to potentially setting global targets. In response, WHO is drafting its first-ever global health sector strategy for addressing the viral hepatitis pandemic (2016-2021). The draft strategy puts forward targets and presents estimates for the cost of achieving the targets. The strategy is expected to be finalized at the 2016 WHA.

Call to Action in the United States – Proposed IOM Report
Phase I: In partnership with the Office of Minority Health in the Office of the Secretary of the U.S. Department of Health and Human Services, the Division of Viral Hepatitis within the U.S. Centers for Disease Control and Prevention has commissioned the Institute of Medicine (IOM) to convene an expert committee to examine scientific and policy issues related to the prevention, detection, control, and management of HBV and HCV to determine whether elimination goals for hepatitis B and hepatitis C in the United States are feasible and to identify possible critical success factors. Findings of this initial phase of work are expected to be released to the public in the first half of 2016.

Phase II: A second phase of work by the IOM (if exercised, contingent on the outcomes of the first phase) will include the preparation of a consensus report that would propose feasible disease incidence and mortality elimination goal(s) to be reached by 2030, and specify a plan of action to achieve the goals. The committee’s consensus report ("A National Strategy for the Elimination of Hepatitis B and C") would specifically identify:

1) the appropriate hepatitis reduction or elimination goal(s) and specifying a plan of action to achieve the goal(s) including, but not necessarily limited to: medical and substance abuse services, community-based services, and correctional health services;

2) barriers to achieving the goal(s) such as access to treatment and related policy issues, public health infrastructure resources for screening, education and outreach, and surveillance;

3) potential solutions to the barriers identified; and

4) specific stakeholders and their responsibilities to achieve the goal.

IOM Period of Performance
Phase I: September 1, 2015 to April 1, 2016
Phase II: Ten months from second task order initiation - target start date is April 1, 2016