



2018 Winter Convention Portland, Oregon

RESOLUTION #18 - 06

“REQUEST THAT STATE MEDICAID AGENCIES MAKE HEPATITIS C MEDICATIONS A CLINICAL PRIORITY”

PREAMBLE

We, the members of the Affiliated Tribes of Northwest Indians of the United States, invoking the divine blessing of the Creator upon our efforts and purposes, in order to preserve for ourselves and our descendants rights secured under Indian Treaties, Executive Orders, and benefits to which we are entitled under the laws and constitution of the United States and several states, to enlighten the public toward a better understanding of the Indian people, to preserve Indian cultural values, and otherwise to promote the welfare of the Indian people, do hereby establish and submit the following resolution:

WHEREAS, the Affiliated Tribes of Northwest Indians (ATNI) are representatives of and advocates for national, regional, and specific tribal concerns; and

WHEREAS, ATNI is a regional organization comprised of American Indians/Alaska Natives and tribes in the states of Washington, Idaho, Oregon, Montana, Nevada, Northern California, and Alaska; and

WHEREAS, the health, safety, welfare, education, economic and employment opportunity, and preservation of cultural and natural resources are primary goals and objectives of the ATNI; and

WHEREAS, American Indians and Alaska Natives (AI/ANs) are disproportionately affected by Hepatitis C virus and have both the highest rate of acute HCV (Hepatitis C) infection and the highest HCV-related mortality rate of any US racial/ethnic group; and

WHEREAS, the AI/AN HCV-related mortality rate in Idaho, Oregon and Washington is over three times that of non-Hispanic whites and this disparity has persisted over time, demonstrating the need for enhanced and expanded access to HCV curative therapies; and

WHEREAS, treatment of individual AI/ANs should be considered treatment for our tribal communities; and

WHEREAS, medical options for individuals with HCV have vastly improved and new medications have high rates of achieving sustained virologic response (SVR), which reduce liver-related deaths, prevalence of hepatocellular carcinoma and decompensated cirrhosis and liver transplants; and

WHEREAS, among persons with HCV-related cirrhosis, SVR can level the survival curve to that of the general population; and

WHEREAS, Portland Area tribes identified HCV Access to Treatment as a Hot Issue for FY 2019 and FY 2020, and identified liver disease as a priority for the FY 2020 in the annual Portland Area budget formulation process; and

WHEREAS, lack of drug access is the single most important barrier to a scale-up of HCV treatment and liver disease prevention; and

WHEREAS, despite lower negotiated prices with federal suppliers, cost is a formidable hurdle to treating large numbers of patients and many private insurance companies and state insurance programs have instituted measures that restrict access to treatment; and

WHEREAS, Idaho, Oregon, and other states require that a Medicaid-eligible individual with Hepatitis C be diagnosed with Advanced Liver Disease; and

WHEREAS, ATNI seeks to carry out the ATNI Resolution #17-56 to eliminate Hepatitis C among AI/AN people by “providing access to HCV treatment without restrictions;” and

WHEREAS, access to treatment for AI/AN people with Hepatitis C is a federal trust and treaty obligation which flows down to State Medicaid Agencies; and

WHEREAS, Center for Medicare and Medicaid Services issued a Medicaid Drug Rebate Program Notice for State Technical Contacts, Release No. 172, dated November 5, 2015, which states that “limitations should not result in the denial of access to effective, clinically appropriate, and medically necessary treatments using Direct-Acting Antivirals (DAA) drugs for beneficiaries with chronic HCV infections. States should, therefore, examine their drug benefits to ensure that limitations do not unreasonably restrict coverage of effective treatment using the new DAA HCV drugs;” and

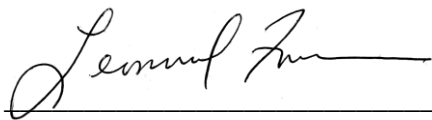
WHEREAS, ATNI notes the availability of guidelines for states to refer to regarding testing, managing, and treating HCV put forth by the American Association for the Study of Liver Diseases, the Infectious Diseases Society of America, and the International Antiviral Society-USA, which can be found at <http://www.hcvguidelines.org/full-report-view>; and

WHEREAS, AI/AN people with Hepatitis C must be given access to HCV drugs in accordance with clinical guidelines, and not subject to rationing of treatment based on non-medical grounds; now

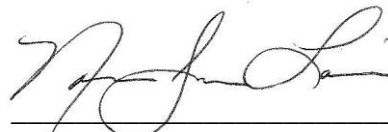
THEREFORE BE IT RESOLVED, that ATNI requests that State Medicaid Agencies make HCV treatment a clinical priority and ensure access to medications to all persons with medical need as determined per the American Association for the Study of Liver Diseases, the Infectious Diseases Society of America, and the International Antiviral Society-USA.

CERTIFICATION

The foregoing resolution was adopted at the 2018 Winter Convention of the Affiliated Tribes of Northwest Indians, held at the DoubleTree by Hilton - Portland, Oregon, on January 22-25, 2018, with a quorum present.



Leonard Forsman, President



Norma Jean Louie, Secretary