SENATE RESOLUTION

WHEREAS, Hepatitis B is a liver infection caused by the hepatitis B virus, and current evidence indicates that approximately 1.8 million Americans are infected with the hepatitis B virus; it spreads from person to person via contact with infected blood and/or body fluids, and hepatitis B infections can range from an acute, mild, short-term illness to a chronic, serious, long-term infection that can lead to cirrhosis and liver cancer; infants exposed to hepatitis B have a 90% risk of developing chronic hepatitis B compared to adults at 5%, increasing their risk of developing liver cancer or cirrhosis in their lifetimes; and

WHEREAS, A reported 85% of infants and 50% of older children and adults with hepatitis B are asymptomatic, and approximately 1 in 2 people who have hepatitis B are unaware of their infection status and the need to safeguard infant health; in 1991, the Advisory Committee on Immunization Practices (ACIP) issued its first universal hepatitis B birth dose recommendation, which led to the implementation of the universal hepatitis B vaccination program in 1992 in the United States; and

WHEREAS, Treatment reduces the risk of serious conditions such as liver cancer or cirrhosis, but an estimate of up to 75%

of people who have hepatitis B in the U.S. and are eligible for treatment are not prescribed treatment, including 40% of those with advanced liver disease; and

WHEREAS, A contemporary analysis of evidence on the hepatitis B birth dose, conducted 35 years after the implementation of the universal hepatitis B birth dose recommendation, further affirms the well-established safety and efficacy of the hepatitis B vaccine and the profound impact it has on protecting public health, and before the universal hepatitis B birth dose recommendation, approximately 18,000 children in the United States were infected each year by hepatitis B virus before their tenth birthdays; and

WHEREAS, From 1990 to 2019, the universal hepatitis B birth dose recommendation led to a 99% decline in reported cases of acute hepatitis B in children and young adults and averted an estimated 90,100 deaths in the United States, however, despite this immense progress, hepatitis B birth dose coverage has steadily declined in recent years, from 83.5% in 2023 to 73.2% as of August 2025, well below the Healthy People 2030 target of 90%; hepatitis B vaccination at birth is critical, and vaccination in adults remains essential to safeguarding public health and decreasing hepatitis B cases; and

WHEREAS, Vaccination coverage remains low among US adults at 32.5%, with data showing that less than half, 43.1%, of adults ages 32-59 believed they were eligible for hepatitis B vaccination and 30% reported ever receiving a provider recommendation; and

WHEREAS, Racial and ethnic minorities experience higher rates of hepatitis B infection and face disparities in vaccine awareness, access, and uptake; in 2023, the rate of acute hepatitis B infections was 1.9 times higher in Black populations than White populations, and the incidence of chronic hepatitis B was 56% higher than the national average; these disparities underscore the importance of timely vaccination as one of the most effective ways to prevent hepatitis B infection and reduce the risk of severe health complications in pediatric and adult populations; and

WHEREAS, Given existing shortfalls in annual hepatitis B screening practices, despite a universal hepatitis B screening recommendation for pregnant women, vaccination remains the safest and most effective way to proactively safeguard public health and prevent the devastating effects of hepatitis B infection, and given existing gaps related to linkage to care for people who have hepatitis B, greater awareness of and access to hepatitis B screening and treatment options are needed to safeguard public health; therefore, be it

RESOLVED, BY THE SENATE OF THE ONE HUNDRED FOURTH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that we encourage healthcare providers, hospitals, community health centers, pharmacies, and the Illinois Department of Public Health to promote the hepatitis B vaccination as a highly effective and safe public health measure and help increase public awareness about the importance of receiving a hepatitis B vaccination and expand access and awareness of hepatitis testing and treatment options; and be it further

RESOLVED, That we encourage the Illinois Department of Public Health, healthcare providers, and patients/community representatives to develop or amend an effective and actionable state hepatitis B strategic plan, focused on areas such as immunization, screening, and linkage to care, which will align stakeholders on shared objectives and efforts to facilitate broad screening, vaccine, and treatment availability and access with comparable initiatives in other states (i.e., New York Viral Hepatitis Strategic Plan) used as guiding models for plan development; and be it further

RESOLVED, That we encourage the Illinois Department of Health to establish a hepatitis B working group to develop measurable goals on which to center the hepatitis B strategic plan with goals that may include but are not limited to

strengthening immunization infrastructure, improving coverage policies, assessing vaccine administration fees, increasing community demand, improving vaccine confidence, and promoting health equity initiatives to improve vaccine, screening and treatment uptake; the hepatitis B working group should provide timely updates on its activities, progress toward established goals, and any recommendations.