

Increasing Viral Hepatitis Testing & Treatment Capacity; a look at Louisiana's Comprehensive Hepatitis C Virus Elimination Strategy

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Disclosure Statement

- ▶ Frederic McCall has no relevant conflicts or financial relationships to disclose

Learning Objectives

- ▶ By the end of this presentation attendees should be able to:
 - ▶ Recognize why HCV is a national public health concern
 - ▶ List the key steps to expanding care for HCV
 - ▶ Recognize the role of Academic Detailing in expanding provider capacity for treating diseases of public health concern.

WHY HCV? Why Now?

NEARLY **2.4 MILLION** AMERICANS
ARE LIVING WITH HEPATITIS C*

1/2 MAY NOT KNOW THEY'RE INFECTED†

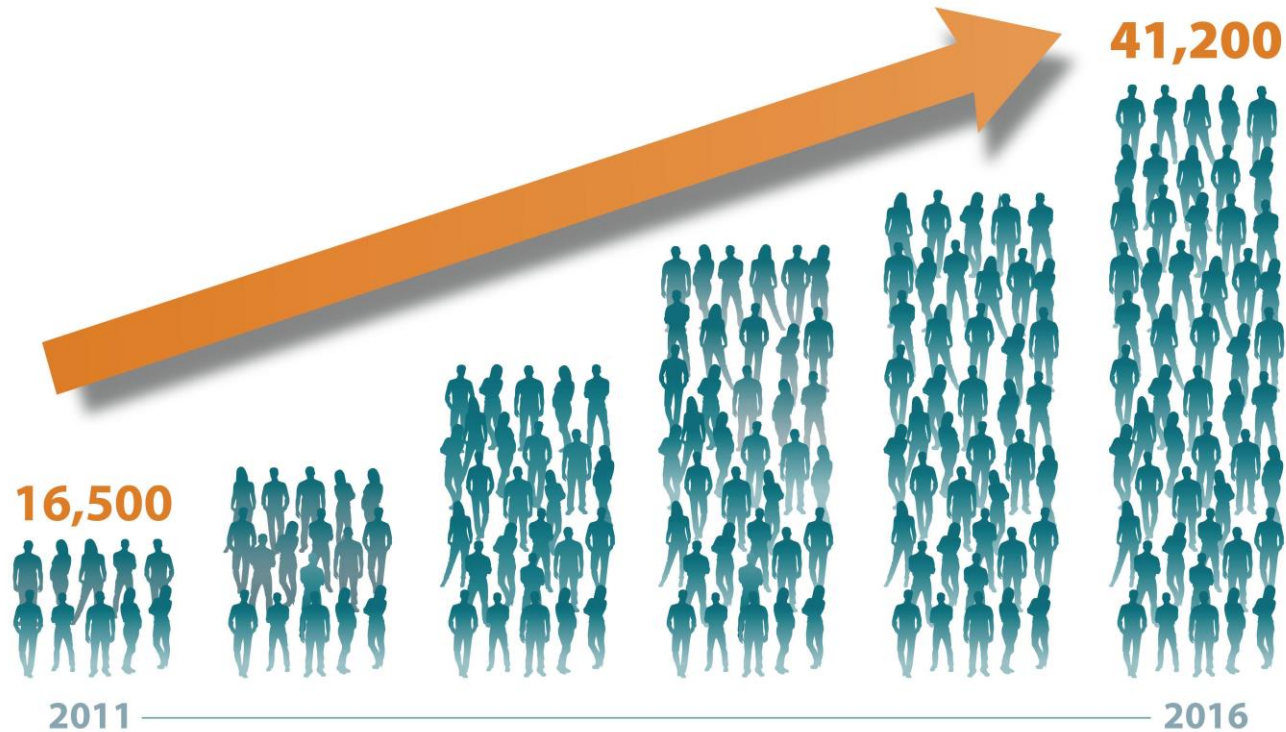
*Among adults aged ≥18 years
†According to 2014 study: *The Treatment Cascade for Chronic Hepatitis C Virus Infection in the United States: A Systematic Review and Meta-Analysis*

Visit www.cdc.gov/hepatitis for more information



Increasing Problem in the USA and Abroad

IN THE SHADOW OF THE OPIOID CRISIS, NEW HEPATITIS C INFECTIONS HAVE **INCREASED**



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CDC

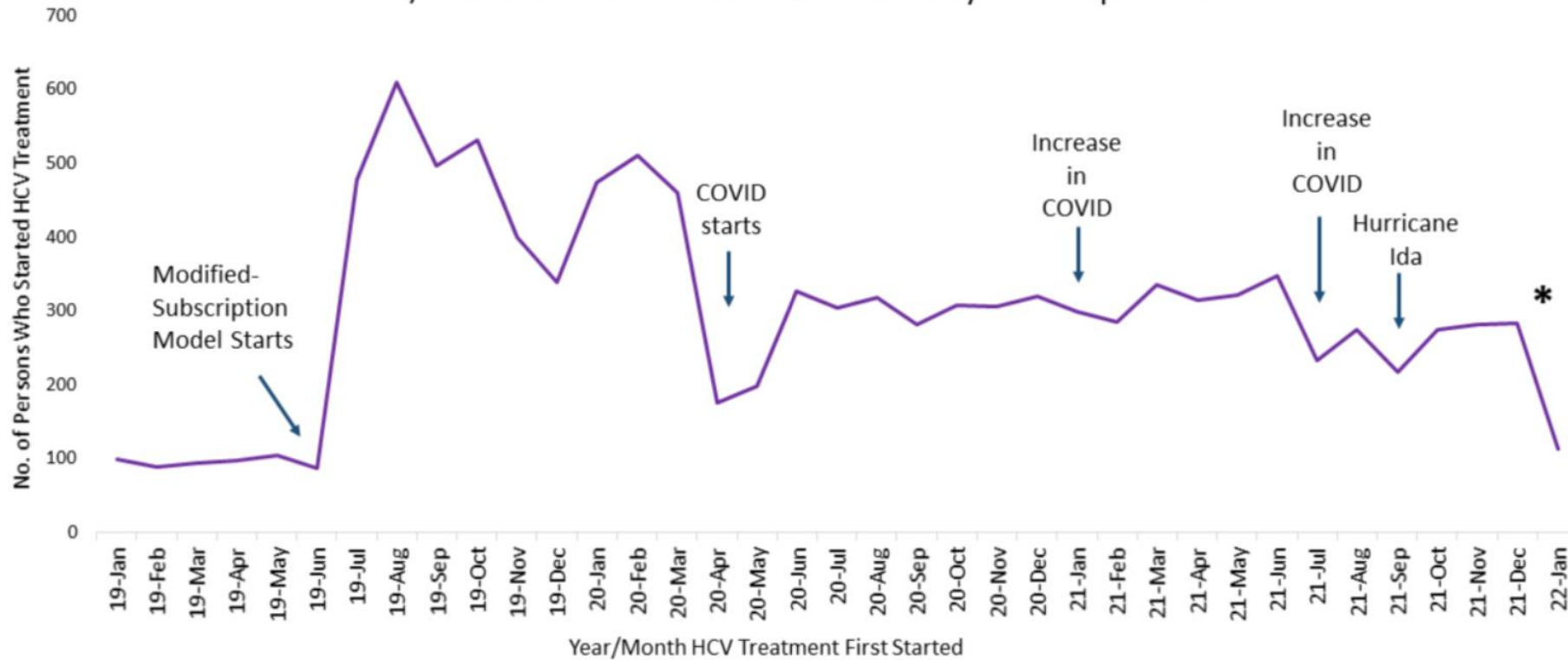
It is a top killer despite slow progression, screening, and treatment, and prevention.

- ▶ “HCV now kills more Americans than all other reportable infectious diseases combined, including HIV.” - Douglas K. Owens, chair of the U.S. Preventive Services Task Force and director of the Center for Health Policy and the Center for Primary Care and Outcomes Research. (Pre SARS-CoV-2)
- ▶ Under-diagnosis: the largest gap in the cascade of care
 - ▶ CDC and USPSTF now recommends universal screening for all adults!
- ▶ Under-treatment
 - ▶ Provider Restrictions
 - ▶ Liver staging restrictions
 - ▶ Sobriety restrictions
 - ▶ Access restrictions
 - ▶ Cost Restrictions

Louisiana's Comprehensive HCV Elimination Strategy

- ▶ Establish a Modified Hepatitis C Medication **Subscription Model** for Medicaid and Corrections
- ▶ **Educate Public** on Availability of Cure and Mobilize Priority Populations for Screenings
- ▶ **Expand HCV Screening and Expedited Linkage to HCV Cure**
- ▶ **Strengthen HCV Surveillance to Link Persons Previously Diagnosed to Treatment**
- ▶ **Expand Provider Capacity to Treat Hepatitis C**
- ▶ **Implement Harm Reduction and Complementary Treatment Strategies**
- ▶ **Extend Elimination Efforts to All Populations Within the State**

Number of Persons Who Started Treatment for HCV Through Medicaid/Corrections by Year/Month Treatment First Started - January 2019 to present

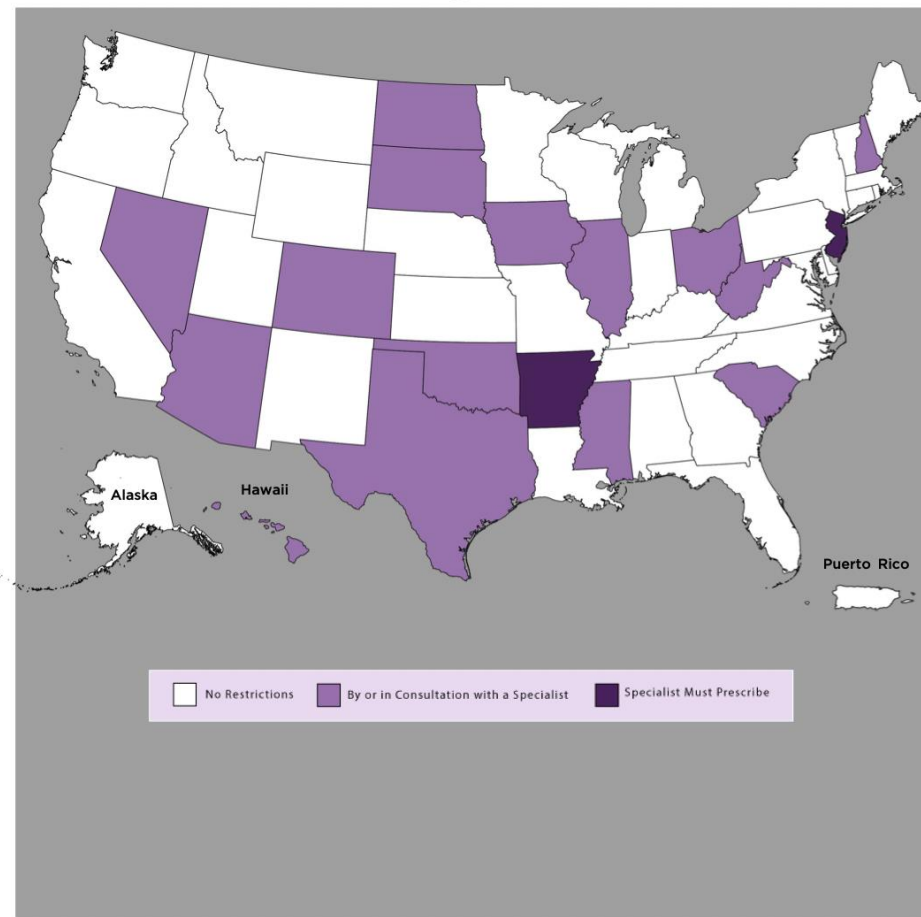
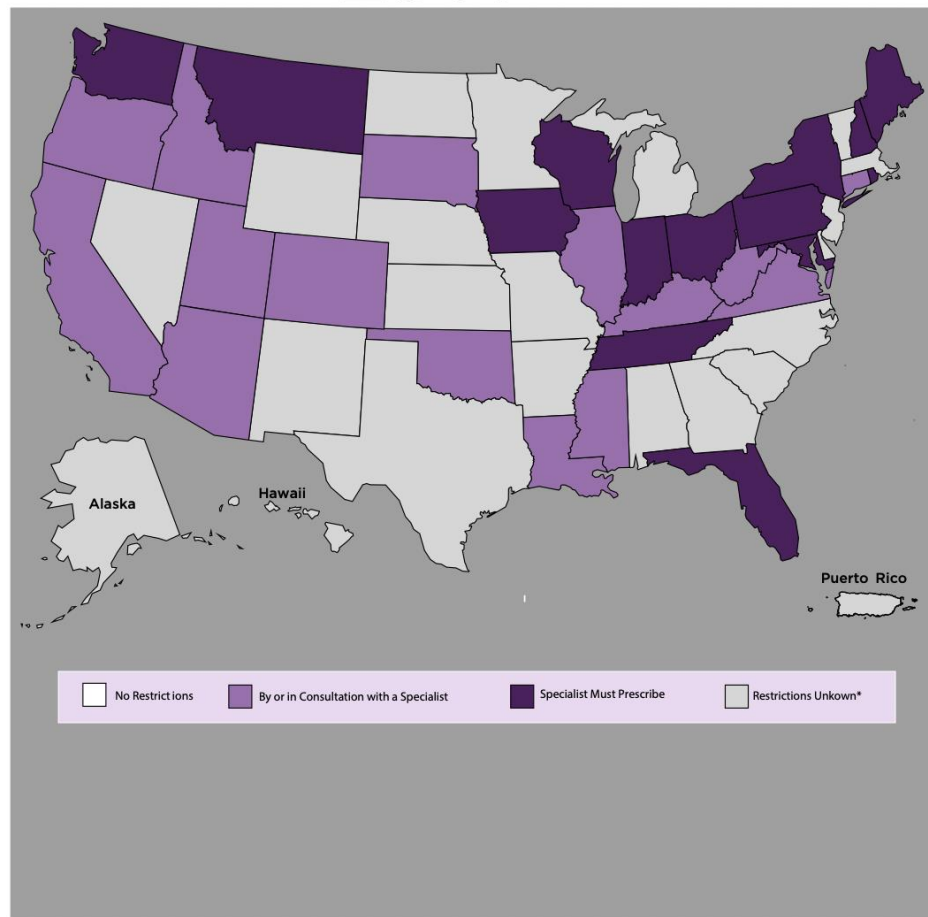


* For persons on Medicaid, treatment is calculated using DAA claims data. Due to delays in reporting of claims data, numbers from recent months, are preliminary and are an undercount.

Provider Restrictions in the USA

2014

2021

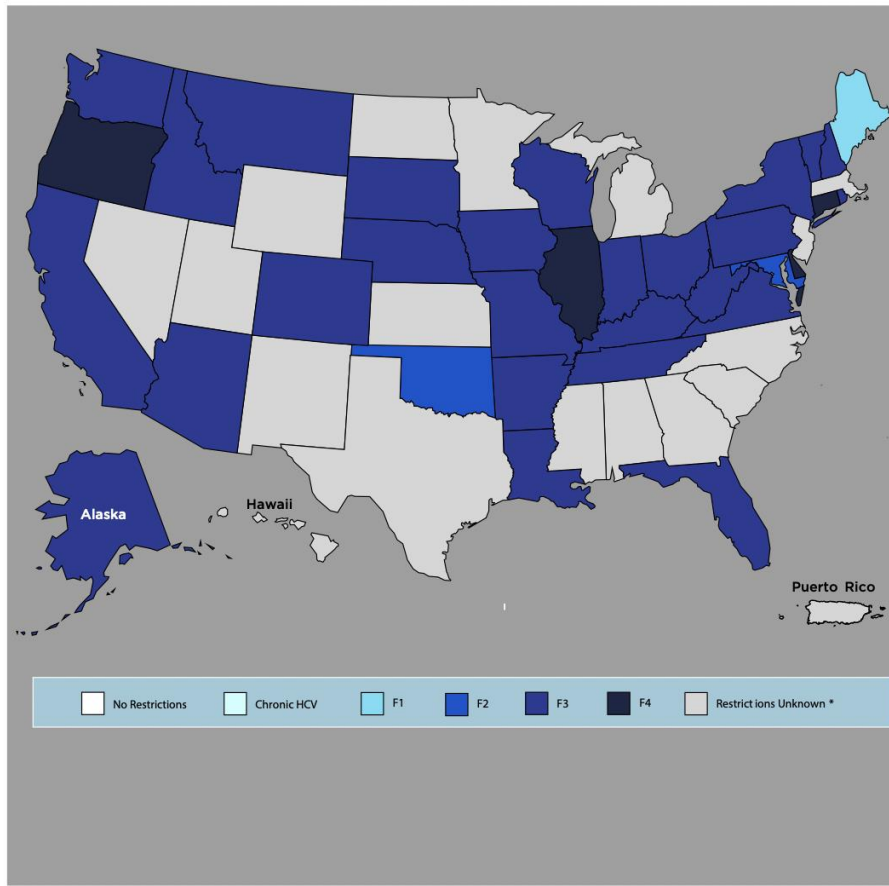


Remove Provider Restrictions

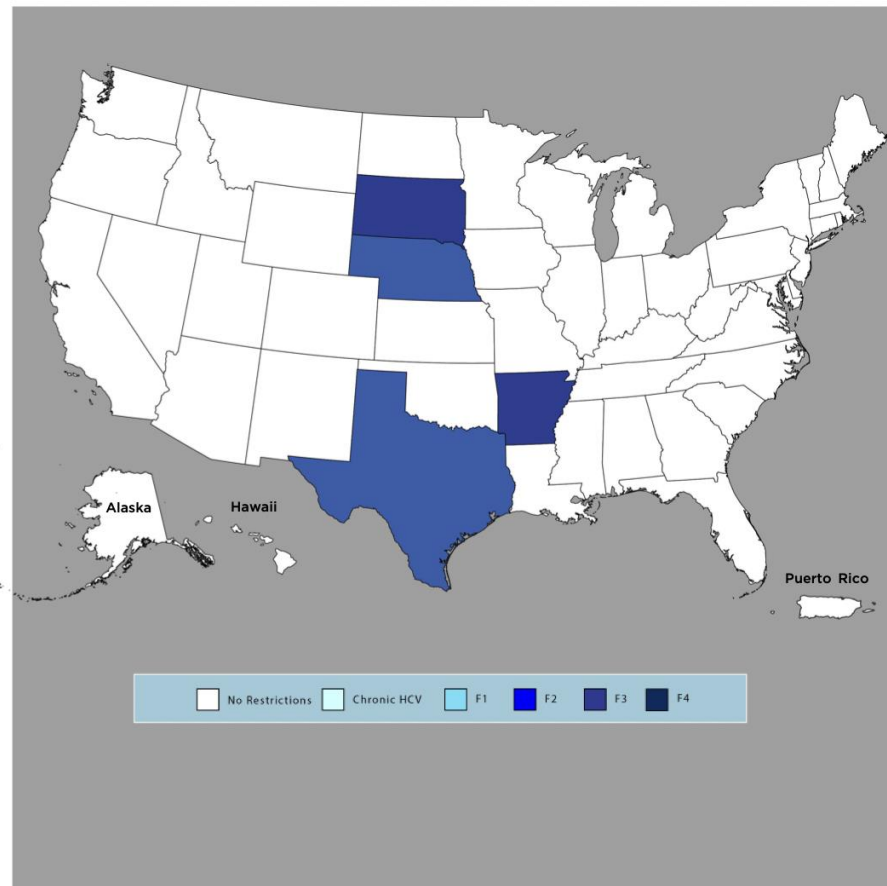
- ▶ Before June 15th, 2019 only board-certified GI/ID doctors were eligible to prescribe Direct Acting Antivirals (DAAs)
 - ▶ Less than 200 TOTAL of these doctors in the state of Louisiana that accept Medicaid
 - ▶ 39.8% of Louisiana's population is a Medicaid recipient (1.8 million persons)
- ▶ As of June 15th, 2019 no restrictions on who can prescribe based on specialty or prescriber type
 - ▶ Need to train hundreds and hundreds of new doctors to screen and treat HCV, many of whom haven't ever studied HCV since school.
 - ▶ HCV Treatment algorithm and in person detailing
 - ▶ 600 new HCV prescribers have been added in the Louisiana Medicaid system

Fibrosis Restrictions in the USA

2014



2021

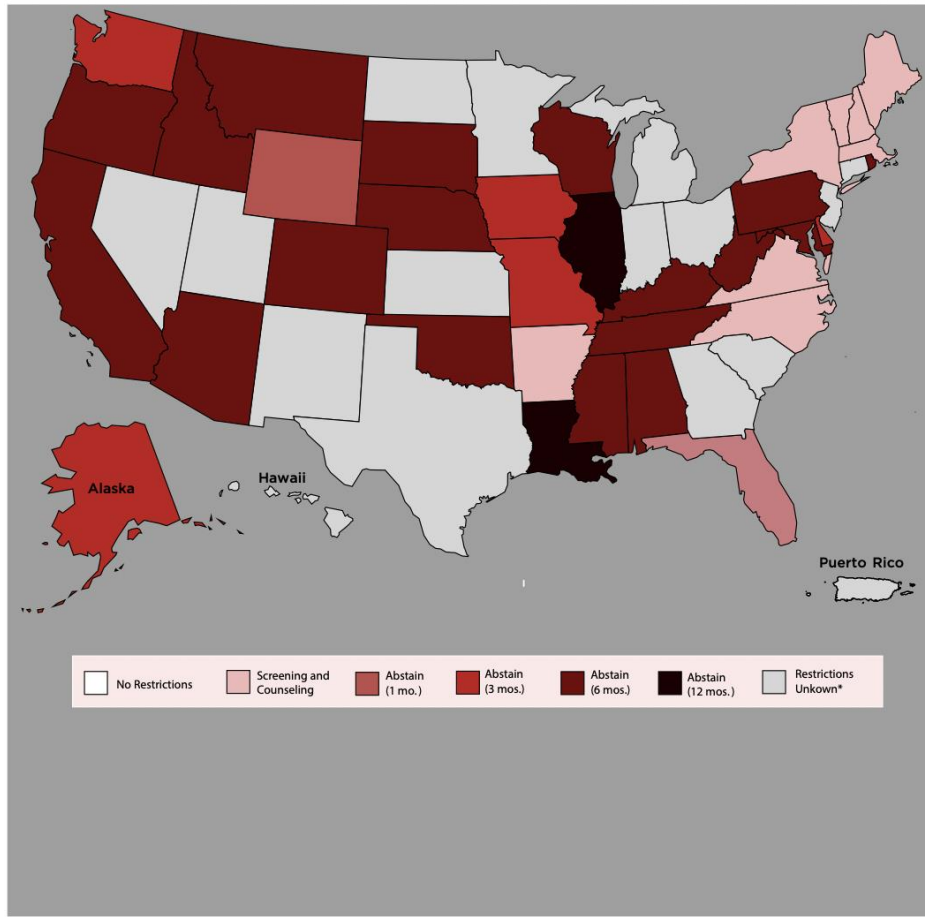


Remove Liver Staging Restrictions

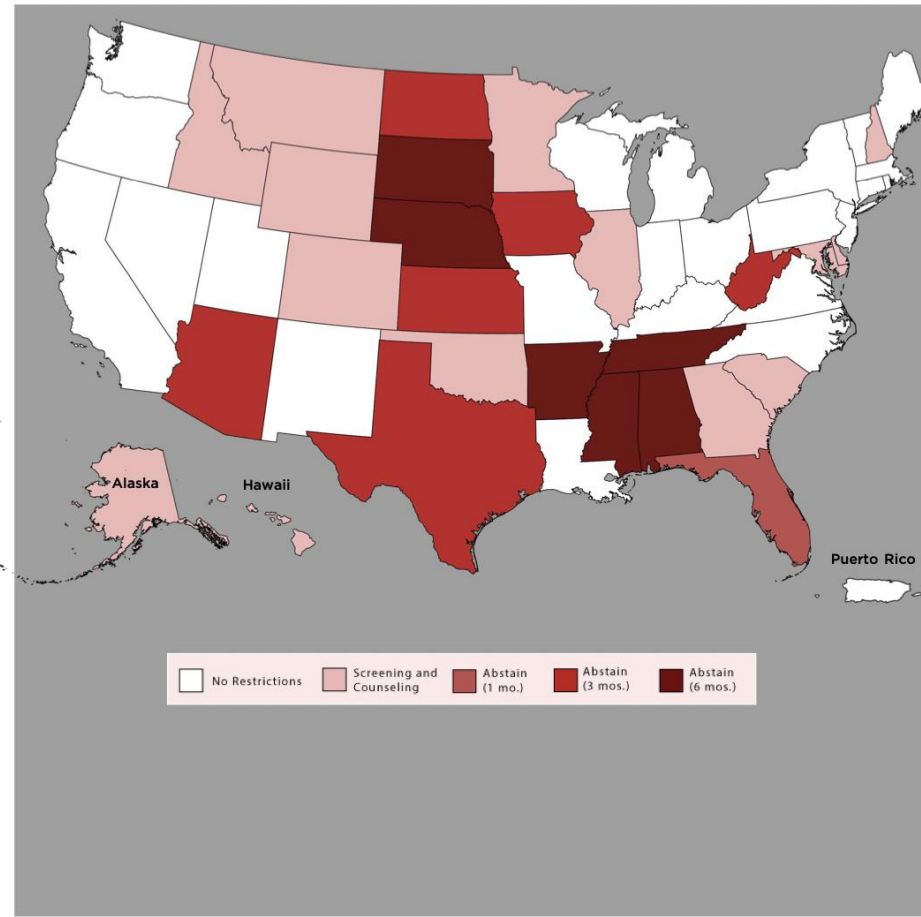
- ▶ Before June 15th, 2019 DAA's were restricted to those with advanced fibrosis and/or comorbidities
- ▶ As of June 15th, 2019 no restricted to prescribe for patients based on fibrosis scoring or comorbidities.
 - ▶ Patients with low fibrosis scoring (F0-f3) are now eligible for treatment as soon as HCV has been confirmed by HCV RNA testing.

Sobriety Restrictions in the USA

2014



2021



Removing Sobriety Restrictions

- ▶ Louisiana is now one of only 24 states (including DC and Puerto Rico) that offers HCV care regardless of drug and alcohol use status of the patient.
- ▶ In 2014 Louisiana had some of the most restrictive sobriety requirements in the USA
 - ▶ Only about a dozen states allowed HCV treatment without sobriety.
- ▶ Treating those who use drugs is vital to reduce new HCV cases
 - ▶ Primary transmission of HCV in the USA is injection drug use

Keys to expanding Provider Capacity in Louisiana

- ▶ Dedicated Physician Led Academic Detailing team
- ▶ Physician Warm Line offering support to new providers
- ▶ CME offerings- Project ECHO, Champion Training, Online Video
- ▶ Piggyback on professional group communication
 - ▶ Nurse practitioner's of Louisiana, Primary Care Association, etc.

Academic Detailing

- ▶ university or non-commercial-based educational outreach
- ▶ face-to-face education of prescribers by trained health care professionals, typically pharmacists, physicians, or nurses.
 - ▶ Best received from Physicians (MD, DO) or Pharmacists
- ▶ improve prescribing of targeted drugs to be consistent with medical evidence from randomized controlled trials
- ▶ improves patient care
- ▶ reduce health care costs
- ▶ Increases Capacity

Brief History of LDH's Academic Detailing program

- ▶ Founded in 2016 - focusing on HIV in New Orleans
- ▶ Since 2018 program has expanded in both scope, and subjects now running provider education on PrEP/PEP. Syphilis/Congenital Syphilis, and HCV
- ▶ 2 full time MD, one MD specialist consultant
- ▶ 2019-2024 Louisiana Hepatitis C Elimination Project

HEPATITIS C

**IT'S TIME
FOR
CHANGE.**

It's Time to Eliminate Hep C.



During Academic Detailing Sessions

- ▶ Update providers on latest best practice guidelines and clinical trials related to HCV Care
- ▶ Stress importance of updated USPSTF and CDC Testing guidelines
- ▶ American association for the Study of Liver Diseases (AASLD) & Infectious Disease Society of America (IDSA) recommendations for treatment of persons at all stages of liver disease and regardless of drug or alcohol abstinence
 - ▶ SIMPLIFY study
- ▶ Medication interactions
- ▶ HBV & HIV co infection
- ▶ HARM Reduction and Complimentary strategies
- ▶ Prescriber Support Services

Follow-up is key

- ▶ Keep providers engaged
 - ▶ Provider network
- ▶ Leave behind materials
 - ▶ Pocket Sized Streamlined Test and Treat Algorithm
 - ▶ HCV Provider Packet
 - ▶ Contact information and HCV Warm Line numbers / email addresses

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Questions:

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