

# DISCLOSURES

**This activity is jointly provided by  
Northwest Portland Area Indian Health  
Board and Cardea**



# DISCLOSURES

## **COMPLETING THIS ACTIVITY**

Successful completion of this continuing education activity includes the following:

- Attending the entire CE activity;
- Completing the online evaluation;
- Submitting an online CE request.

Your certificate will be sent via email

If you have any questions about this CE activity, contact Michelle Daugherty at [mdaugherty@cardeaservices.org](mailto:mdaugherty@cardeaservices.org) or (206) 447-9538



# DISCLOSURES

Faculty: Jonathan Owen, PharmD & Neelam Gazarian, PharmD

CME Committee: David Couch; Kathleen Clanon, MD; Johanna Rosenthal, MPH; Pat Blackburn, MPH; Richard Fischer, MD; Sharon Adler, MD

CNE Committee: David Stephens, BSN, RN; Erin Edelbrock MPA; Ginny Cassidy-Brinn MSN, ARNP; Carolyn Crisp, MPH



# CONFLICT OF INTEREST

Richard Fischer, MD is a member of an Organon speaker's bureau.

Dr. Fischer does not participate in planning in which he has a conflict of interest, and he ensures that any content or speakers he suggests will be free of commercial bias.

None of the other planners or presenters of this CE activity have disclosed any conflict of interest including no relevant financial relationships with any commercial companies pertaining to this CE activity.



# Acknowledgement

This presentation is funded in part by:

The Indian Health Service HIV/AIDS & Hep C Program  
and  
The Secretary's Minority AIDS Initiative Fund

There is no commercial support for this presentation



# Outcomes and Objectives:

**Conference Objective:** At the completion of this activity, the learner will be able to explain the steps that would be necessary to begin to screen for and treat patients with the Hepatitis C Virus (HCV) at their practice sites.

**By the end of this learning event participants will be able to:**

- Describe tools for management of the care of HCV patients and how to implement them

# Starting a HCV Treatment Program-Belcourt

Authored and Presented by: LCDR Jonathan Owen, PharmD

LT Neelam Gazarian, MS, PharmD

Quentin N. Burdick Memorial Health Care Facility

Indian Health Service

Belcourt, ND

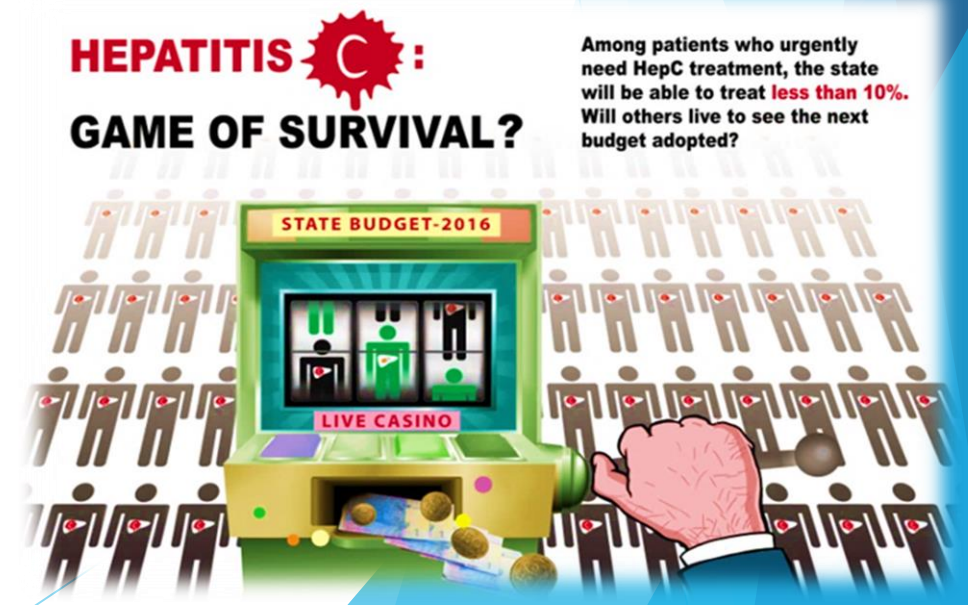
12/14/2017

# Agenda

- ▶ Describe use of tools to manage complex care of hepatitis C patients, discuss workload capabilities.
- ▶ Share resources of NICE Project with participants to help manage hepatitis C clinic.

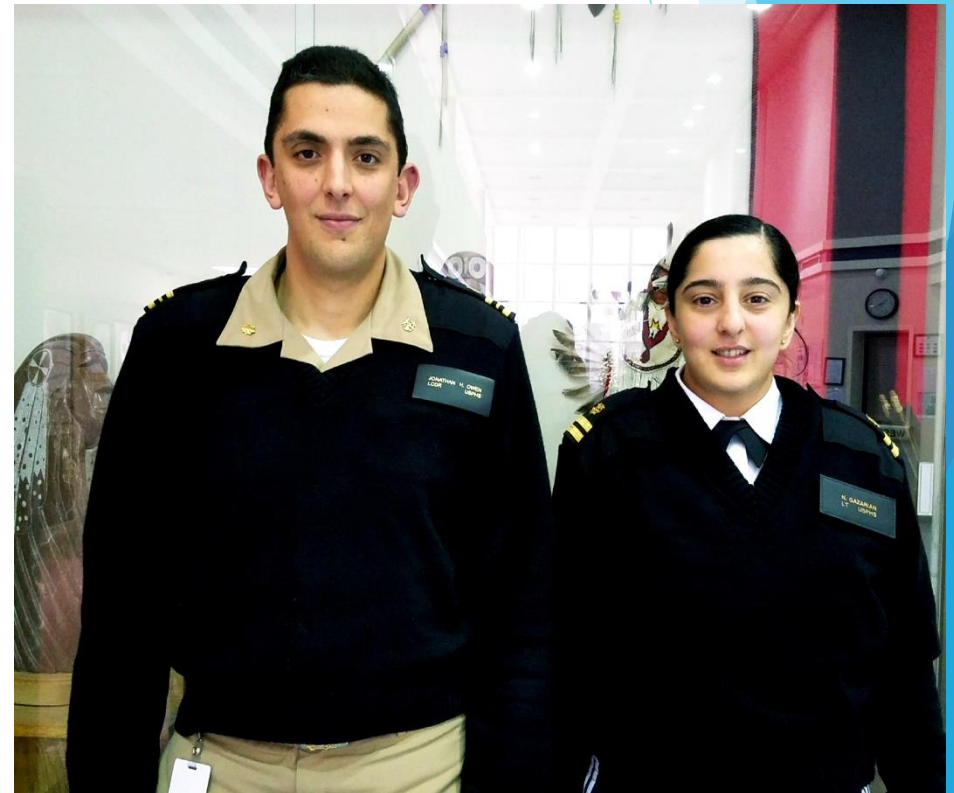


<http://www.hepatitiscentral.com/wp-content/uploads/2015/04/expensive-hepatitis-c-medication.jpg>  
<http://aph.org.ua/wp-content/uploads/2016/08/Bez-nazvaniya-4.png>





# Who are we?



# Prior to HCV Clinic

With Insurance  
(Pvt./Federal)



Referred to Medical  
Specialists



\$10,000-\$15000/referral



Distance  
Lost to follow-up

Without Insurance



Very Few Options

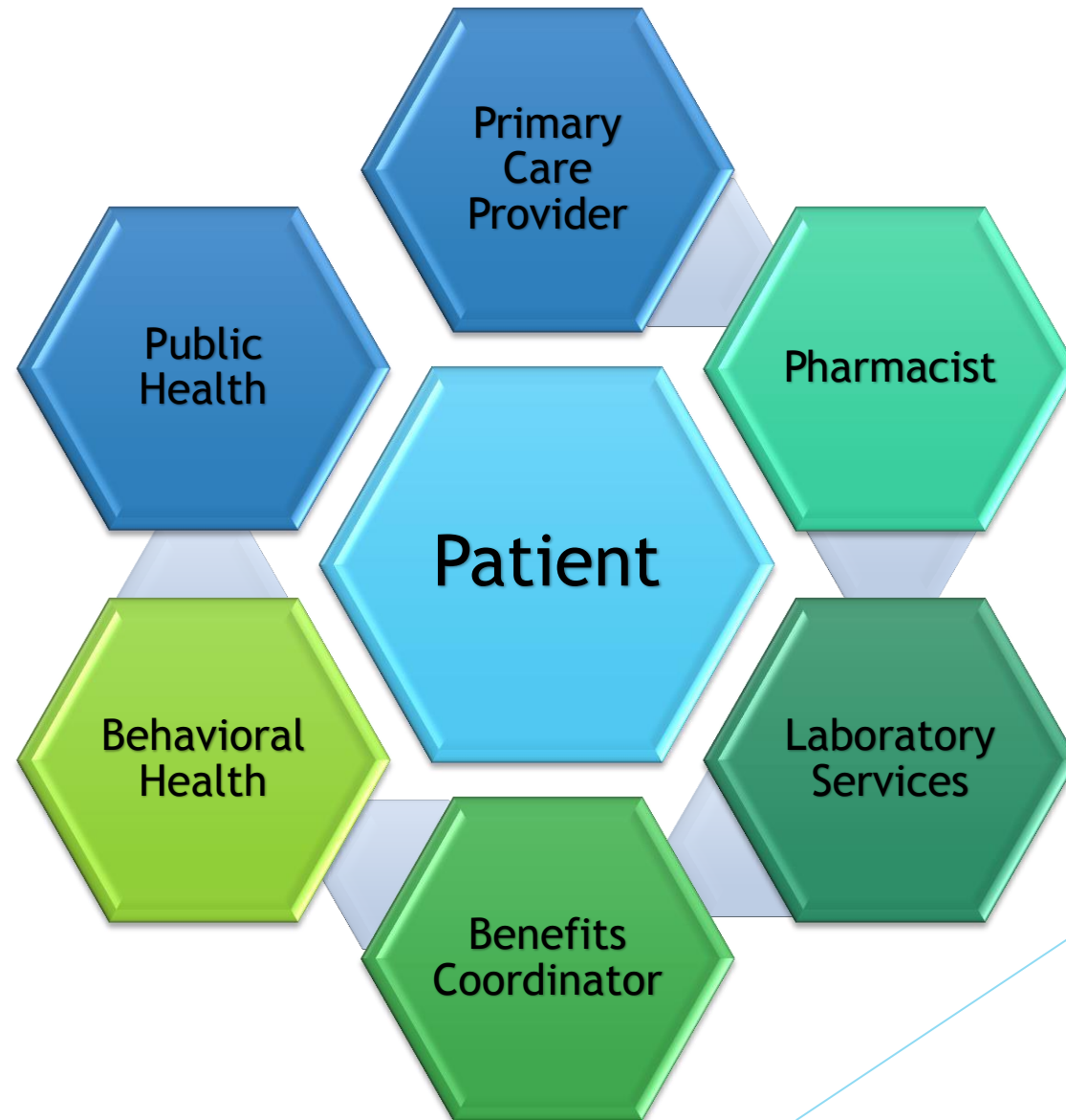


Rationing Care



Poor outcomes

# Inter-collaborative Approach



# Identifying Patients with Hepatitis C

**iCare**

**168 patients**

- 25% screening rate

**VGEN**

**155 patients**

# EHR Documentation

## Referral

Consult from PCP

Walk in

## Initial Visit

PHQ-9  
AUDIT-C

Education

Labs

Immunizations

## Comprehensive visit

Project ECHO

Start Medication Authorization

## Treatment

Counseling

Labs

Immunizations

## End of Treatment

Labs

## SVR

Patient is cured!

Counsel about re-infection and prevention

# Consult Template

Template: HCV Consult Pharmacy Demo

-----  
Quentin N. Burdick Memorial Health Care Facility  
HEPATITIS C TREATMENT PROGRAM  
-----

PCP:

DEMO, PATIENT ARCELAY(00-00-03) is a 10 year old FEMALE being referred to the pharmacy managed hepatitis C treatment clinic at the Quentin N. Burdick Memorial Health Care Facility:

ALL THE FOLLOWING MUST BE ANSWERED BEFORE PATIENT WILL BE ACCEPTED INTO THE CLINIC.

Does the patient have a history of compliance and adherence with prescribed treatment plans?  
\*  Yes  No

Do you feel that the patient is ready to begin treatment for chronic HCV?  
\*  Yes  No

Does patient have recent labs within the last 3 months to establish a baseline prior to initiating treatment? Please see the Hepatitis C menu in the outpatient lab menu for a full list of required labs necessary for initiating treatment.  
\*  Yes  No

Do you want us to order required labs for this patient on your behalf? If not, lab orders will be sent to provider to sign off on.  
\*  Yes  No

Please evaluate and enroll patient into the program and treat for hepatitis c.

\* Indicates a Required Field    Preview    OK    Cancel

# EHR Note Templates

- HCV Treatment Program: Initial Visit with Patient  
-----
- HCV Treatment Program: Comprehensive Visit with Patient  
-----
- HCV Treatment Program: Initiation of Treatment Visit with Patient  
-----
- HCV Treatment Program: Continuation of Treatment Visit with Patient  
-----
- HCV Treatment Program: End of Treatment Visit with Patient  
-----
- HCV Treatment Program: Three Months Post Completion of Treatment  
-----

# EHR Note Templates

Template: HCV

=====  
Quentin N. Burdick Memorial Health Care Facility  
HEPATITIS C TREATMENT PROGRAM  
=====

PCP: [REDACTED]

DEMO, PATIENT ARCELAY(00-00-03)

CHIEF COMPLAINT: Invalid visit

OBJECTIVE:

132/64 (Nov 20, 2017@13:42)98 (Nov 20, 2017@13:42) Qualifiers: 80 (Nov 20, 2017@13:42)16 (Nov 20, 2017@13:42)97.6 F [36.4 C] (Nov 20, 2017@13:42) 120.00 lb [54.48 kg]

HCV Treatment Program: Initial Visit with Patient  
=====

Patient is 10 year old FEMALE referred to the HCV clinic for hepatitis c treatment. Labs and vaccinations were reviewed and ordered if necessary. Patient is counseled and educated on the disease, labs and vaccination required, the process of treatment and all other requirements before initiating. All concerns and questions by the patient are answered and explained.

Patient verbalized understanding.

Project Echo presentation is tentatively scheduled for: [REDACTED] ...  
Patient's insurance is [REDACTED].  
All documents are requested from patient if necessary to enroll in patient assistance program.

Additional Counseling points or notes:

Patient's best contact number is [REDACTED].

PHQ-9 Questionnaire

Over the last 2 weeks, how often has the patient been bothered by any of the following problems?

0: Not at all  
1: Several days  
2: More than half the days  
3: Nearly every day

1. Little interest or pleasure in doing things. [REDACTED]  
2. Feeling down, depressed, or hopeless. [REDACTED]  
3. Trouble falling or staying asleep, or sleeping too much. [REDACTED]  
4. Feeling tired or having little energy. [REDACTED]  
5. Poor appetite or overeating [REDACTED]

All None \* Indicates a Required Field Preview OK Cancel



# Hepatitis C Labs Order Menu

## HEPATITIS C LAB PANEL

Hep C Screen  
IF POSITIVE OR KNOWN HISTORY OF HCV DO  
HCV RNA QT REFLEX GENOTYPE

Hep C PCR QUANT

Lab values required within past 3 months

Chem 14  
CBC/Auto Diff  
Fibrotest  
PT/INR  
Anemia Panel  
Vitamin D  
Alpha Fetoprotein Tumor Marker

HIV Screen  
Hepatitis A Total Antibody  
Hepatitis B Surface Antibody  
Hepatitis B Core Antibody  
Hepatitis B Surface Antigen

Must have at least 2 UDS in last 12 months  
at least 3 months apart  
Urine Drug Screen  
Pregnancy Test

Hepatitis C Order Set Initial Tests

Hepatitis C 4 week ETR and SVR labs

Hepatitis C 8 week labs  
All other labs

# Hepatitis C Labs Order Set

Hepatitis C Order Set Initial Tests

Hepatitis C 4 week ETR and SVR labs

## Initial Tests

- Chem 14
- CBC with autodiff
- Display Name Missing
- PT/INR
- Anemia Panel
- Vitamin D
- Alpha Fetoprotein Tumor Marker
- Display Name Missing
- HIV AB SCREEN
- HEPATITIS A TOTAL
- HEPATITIS B SURFACE ANTIBODY
- HEPATITIS B CORE ANTIBODY
- Hepatitis B Surface Antigen

Stop Order Set

## Order a Lab Test

Available Lab Tests

- CHEM 14
- CHEM 14**
- CHEM 8
- CHEM CONTROL <VITROS
- CHEM MASTER LIST
- CHL/CG APTIMA SHL <
- CHL/GC APTIMA <CHLAMY
- CHLAMYDIA ABS,IGG&IGM <
- CHLAMYDIA APTIMA

CHEM 14

Collect Sample **ORANGE/SERU**  
Specimen **SERUM**  
Urgency **ROUTINE**

Enter order comment:

Collection Type

**Send Patient to Lab**

Collection Date/Time

**T**

How Often?

**ONCE**

How Long?

Clinical Indication:

CHEM 14 ORANGE/SERUM SP ONCE

Accept Order

Quit

# Patient Management Tools



# Managing Patients

## Hepatitis C Patient Panel List

Excel document for patient management

Created by Jessica Leston, Brigg Reilley, and David Stephens

Automatically calculates APRI, FIB 4 scores

Excellent for helping to prioritize patients based on liver function and viral load

# Managing Patients

## Hepatitis C Patient Panel List

New panel created by Nelly to help manage patients referred to the clinic

Spin-off of previous panel, automatically calculates APRI, FIB 4 scores

Organized by stage in the treatment processes

Reminders for labs while in treatment, immunizations, notes

# Managing Patients

Snapshot of stage in treatment process  
drop down menus (these can be adjusted)

White: Unable to contact
Green Ready to present to ECHO
Blue Started treatment
Yellow Pending Appt need labs
Red UDS Positive
Purple Medication Approval Pending
Orange Completed treatment, pending SVR labs
Grey CURED

# Patient Panel



## NICE Project- Northern Tier Initiative for Hep C Elimination

### Hepatitis C Patient Panel List

Developed by: LT Neelam 'Nelly' Gazarian, PharmD. QNBMHCF, Belcourt ND

with LCDR Jonathan Owen, PharmD.

email: neelam.gazarian@ihs.gov, jonathan.owen@ihs.gov

## NICE Project- Northern Tier Initiative for Hep C

### Hepatitis C Patient Panel List

Developed by: LT Neelam 'Nelly' Gazarian, PharmD.

with LCDR Jonathan Owen, PharmD.

email: neelam.gazarian@ihs.gov, jonathan.owen@ihs.gov

Patient Name	ID	DOB	Patient Status	Age in 2017	Date for Next	AST/SGOT	ALT SGPT	Platelets	>0.7 APRI likely fibrosis or cirrhosis	APRI Stage	>3.25 likely advanced fibrosis, <1.45 unlikely advanced fibrosis	FIB 4	FIB 4 Stage Calc	Viral Load	Genotype	Labs ordered	Notes
					Appt												
Smith,Jane	12345	3/3/1986	Pending Appt need labs	31	10/2/2017	140	180	250	1.4	3	1.293938	1	3800000	1a	Sheet11A1	HARV	
Smith,s	12346	1/1/1961	Already started treatment	56	11/5/2017	48	48	299	0.401337793	1	1.2975899	1	4100000	1a or 1b	Sheet21E2	FO, Exp	
Joe,j	12347	1/2/1981	May need Beh Health Consult	36	10/7/2017	42	60	348	0.301724138	1	0.56091483	1	200	unknown	Sheet31A1	Medic	
Joe,john	12348	1/3/1977	Pending Appt need labs	40	10/2/2017	28	36	297	0.235690236	1	0.6285073	1	18000000	2b	Sheet41A1	Expans	
Smith,m	123	1/4/1987	Ready to present to ECHO	30	10/13/2017	30	41	239	0.313807531	1	0.58810203	1	200		Sheet51A1	Expans	
Smith,a	1234	1/5/2015	Pending Appt need labs	2	11/14/2017	484	624	223	5.426008969	3	0.17377136	1	370000	1a or 1b	Sheet61A1	Medic	
Smith,b	111	1/6/1933	Purple Medication Approval Pending	84	10/15/2017	96	104	169	1.420118343	3	4.67893643	3		1a or 1b	Sheet71A1		
Smith,c	1112	1/7/1945	Ready to present to ECHO	72	11/16/2017	50	70	333.5	0.374812594	1	1.2902018	1	430000	1a	Sheet81A1	echo 9	
Smith,d	1549	1/8/1965	Already started treatment	52	10/17/2017	34	31	195.6	0.434560327	1	1.62342625	3	2600	1	Sheet91A1	Medic	
luck,donald	1456	2/8/2017	Medication Approval Pending	0	9/26/2017	55	41	277	0.496389892	1	0	1	920000	1a or 1 b	Sheet101A1		
Mouse,Mickey	78946	8/15/1955	Already started treatment	62	8/1/2017	38	42	177	0.536723164	1	2.05389092	3	9200000	2b	Sheet111A1	2b EP	
mouse,Minnie	4568	8/8/1999	Pending Appt need labs	18		105	133	212	1.238207547	3	0.77303672	1			Sheet121A1	Expans	
an,peter	45566	1/12/1966	Already started treatment	51		43	56	345	0.311594203	1	0.84942595	1	4400000	1	Sheet131A1	1a or	
Poppins,Mary	4848	5/9/1988	Completed treatment, pending SVR labs	29		47	67	211	0.556872038	1	0.78917987	1		#REF!	Sheet141A1	Harvo	
Wonka,Willy	89621	5/9/1944	Cannot contact	73			37		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		#REF!	Sheet151A1	no ins	
Free,Willy	4576	3/8/1992	May need Beh Health Consult	25		50	110	244	0.512295082	1	0.4884542	1	4000000	3	Sheet161A1	medic	
Joe,a	4562	5/9/1985	Pending Appt need labs	32		88	216	314.5	0.699523052	1	0.60923539	1	3600	3	Sheet171A1	expans	
Joe,b	78956	12/12/1986	CURED	30					#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	15000	3	Sheet181A1	no ins	
Joe,c	7778	1/18/1955	Cannot contact	62		48	54	230	0.52173913	1	1.76079263	3			Sheet191A1	expans	
Joe,d	98686	9/8/1998	Ready to present to ECHO	19		129	116	78	4.134615385	3	2.91755945	3	120000		Sheet201A1	no ins	
Joe,e	8587	8/7/1965	Medication Approval Pending	52		95	150	204	1.164215686	3	1.9772025	3		1	Sheet211A1	medic	
Joe,f	78456	12/21/1949	Ready to present to ECHO	67		96	90	268	0.895522388	3	2.52982213	3			Sheet221A1	Expans	
Joe,g	32625	1/22/1961	Pending Appt need labs	56					#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!			Sheet231A1	Expans	

# Individual Patient Data

Labs to Order	Date Ordered	Select from Menu	Date Hep A Shot 1st	Date Hep A 2nd Shot 6 months	Date Hep B 0 week	Date 2nd Shot 1 month	Date 3rd Shot 6 months	Date Twinrix Shot	Date Twinrix 2nd shot	Date Twinrix 3rd shot
<input type="checkbox"/> HCV Screen				6/28/1900		1/28/1900	6/28/1900		1/28/1900	5/27/1900
<input type="checkbox"/> HCV Viral Load		Pick from drop down								
<input checked="" type="checkbox"/> HCV GT	11/20/2017									
<input type="checkbox"/> NSSA Resistance										
<input checked="" type="checkbox"/> Pregnancy Test	11/20/2017	Negative								
<input checked="" type="checkbox"/> HIV Screen	11/20/2017									
<input type="checkbox"/> Chem 14										
<input type="checkbox"/> CBC										
<input type="checkbox"/> PT/INR										
<input type="checkbox"/> Anemia Panel		Hep A serology/shot								
<input type="checkbox"/> Vit D		Pick from drop down								
<input type="checkbox"/> AFP Marker										
<input type="checkbox"/> Fibrotest										
<input type="checkbox"/> Hep A Ab										
<input type="checkbox"/> Hep B s Ab										
<input type="checkbox"/> Hep B s Ag										
<input type="checkbox"/> Hep B core Ab										
<input type="checkbox"/> UDS										
	Enter Date --> MM/DD/YYYY									
			Treatment Start Date							
<b>At 4 week</b>			<u>1/28/1900</u>	At 4 week						
<input type="checkbox"/> HCV Viral Load										
<input type="checkbox"/> Chem 14										
<input type="checkbox"/> CBC										
<b>At 8 weeks</b>			<u>2/25/1900</u>	At 8 weeks						
<input type="checkbox"/> HCV Viral Load										
<input type="checkbox"/> Chem 14										
<input type="checkbox"/> CBC										
<b>At ETR</b>			<u>3/24/1900</u>	At ETR						
<input type="checkbox"/> HCV Viral Load										
<input type="checkbox"/> Chem 14										
<input type="checkbox"/> CBC										
<b>At SVR</b>			<u>6/16/1900</u>	At SVR						
<input type="checkbox"/> HCV Viral Load										
<input type="checkbox"/> Chem 14										
<input type="checkbox"/> CBC										

HCV RNA Results [Link to Ongoing Patients](#)

Order 8 week Labs  
Order 8 week Labs



# Appointment Calendar

**OCTOBER  
2017**

NOTE:

ENTER MONTH:

ENTER YEAR:

ENTER START DAY:

[Link to Ongoing Patients](#)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
01	02 Smith,Jane: 12345 doe,John: 12348	03	04	05	06	07 doe,j: 12347
08	09	10	11	12	13 smith,m: 123	14
15 smith,b: 111	16	17 smith,d: 1549	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

# Navigating Insurance/Prior Authorizations

## Comprehensive Visit Clinic Notes

### Project ECHO

- Recommended regimen

### Lab Values

- Chem 14, CBC, anemia panel, Vit D, AFT, HIV, Hep A & B, pregnancy
- Viral load and genotype
- Fibrosis Score: APRI, FIB4, Fibrotest

### Abstinence requirements

- Urine drug screens and/or clinical notes

### Compliance

# Patient Assistance Program

## Gilead's Support Path

- Harvoni®, Epclusa®
- iAssist: <https://www.assistrx.com/iassist/>

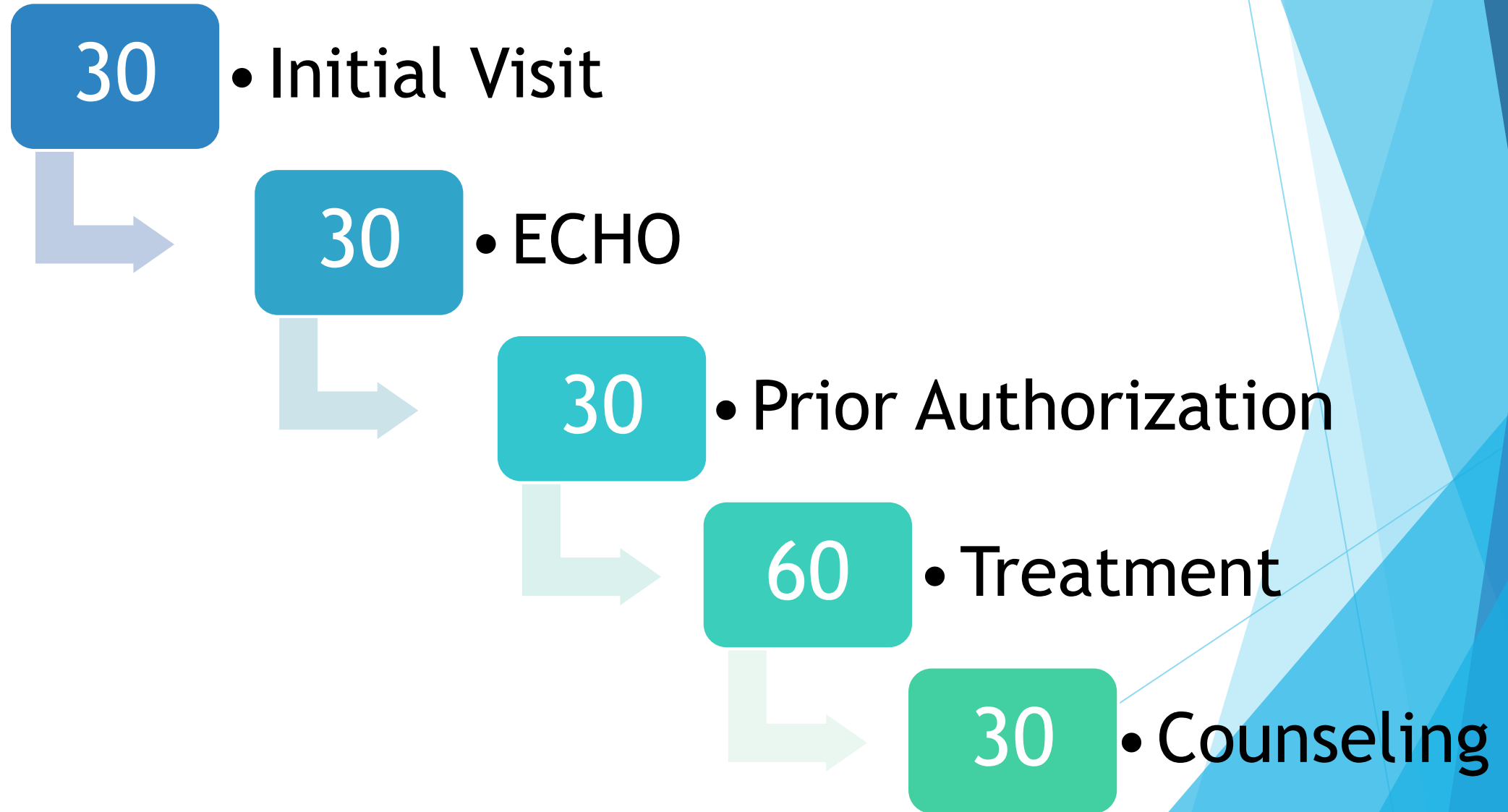
## AbbVie Patient Assistance Foundation

- Mavyret®

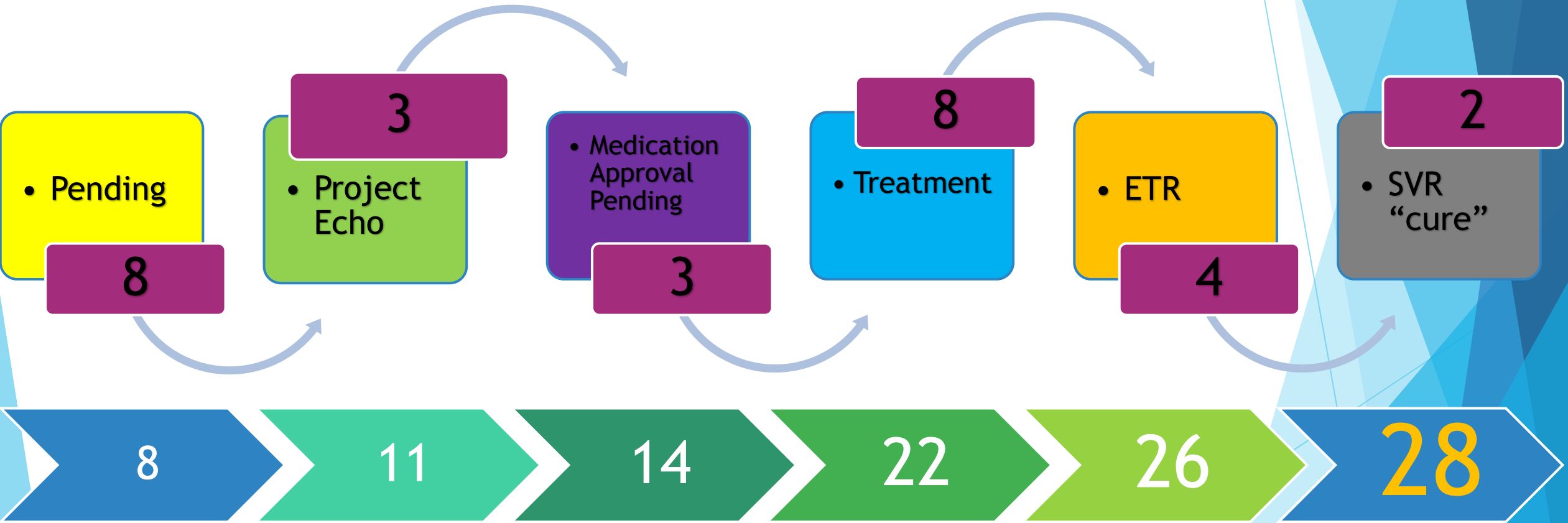
# Patient Assistance Programs

- ▶ Tribal ID card
- ▶ Income documents
  - ▶ Max income allowed differs by program
- ▶ Proof of no insurance
  - ▶ American Indians/Alaska Natives (AI/AN): Indian Health Coverage Exemption
- ▶ “American Indians and Alaska Natives (AI/ANs) and other people eligible for services through the Indian Health Service, tribal programs, or urban Indian programs (like the spouse or child of an eligible Indian) **don't** have to pay the fee for not having health coverage. This is called having an Indian health coverage exemption.”

# Time Investment and Workload (Minutes)

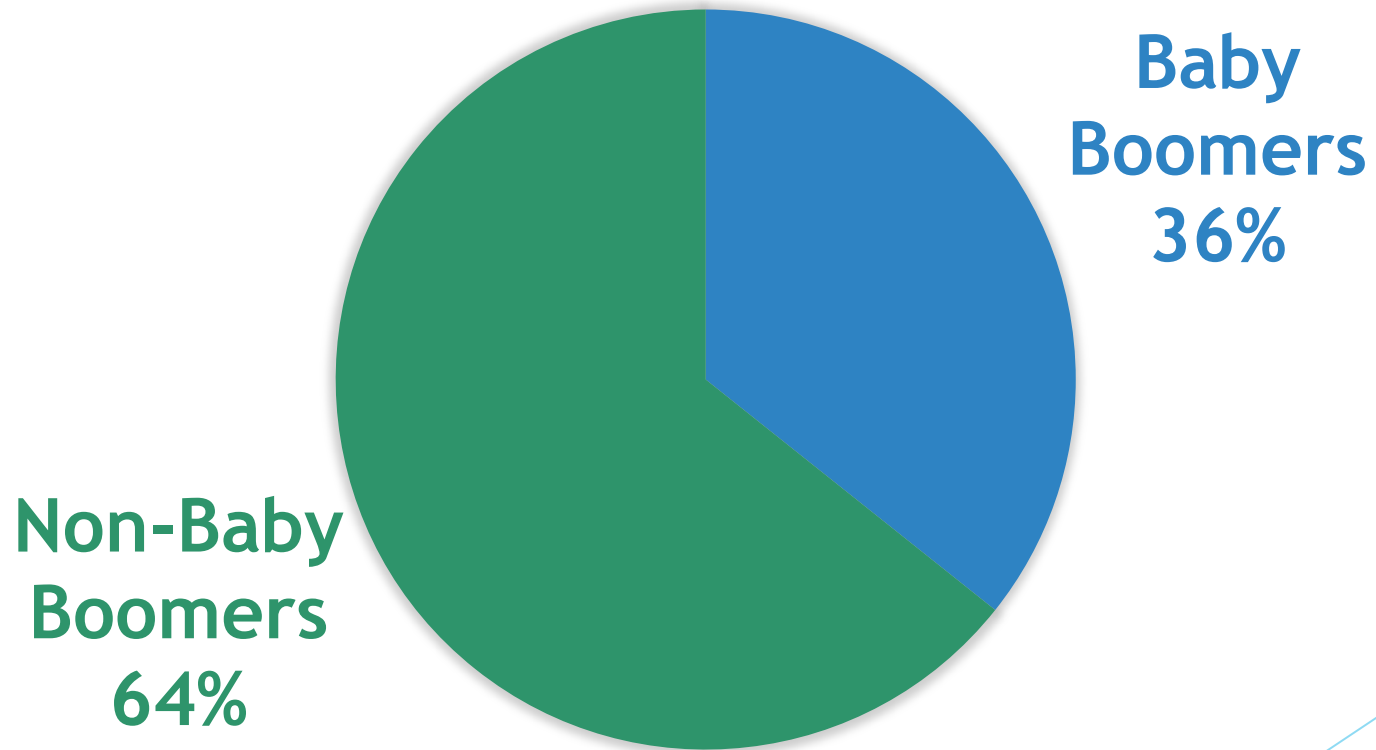


# Current Status

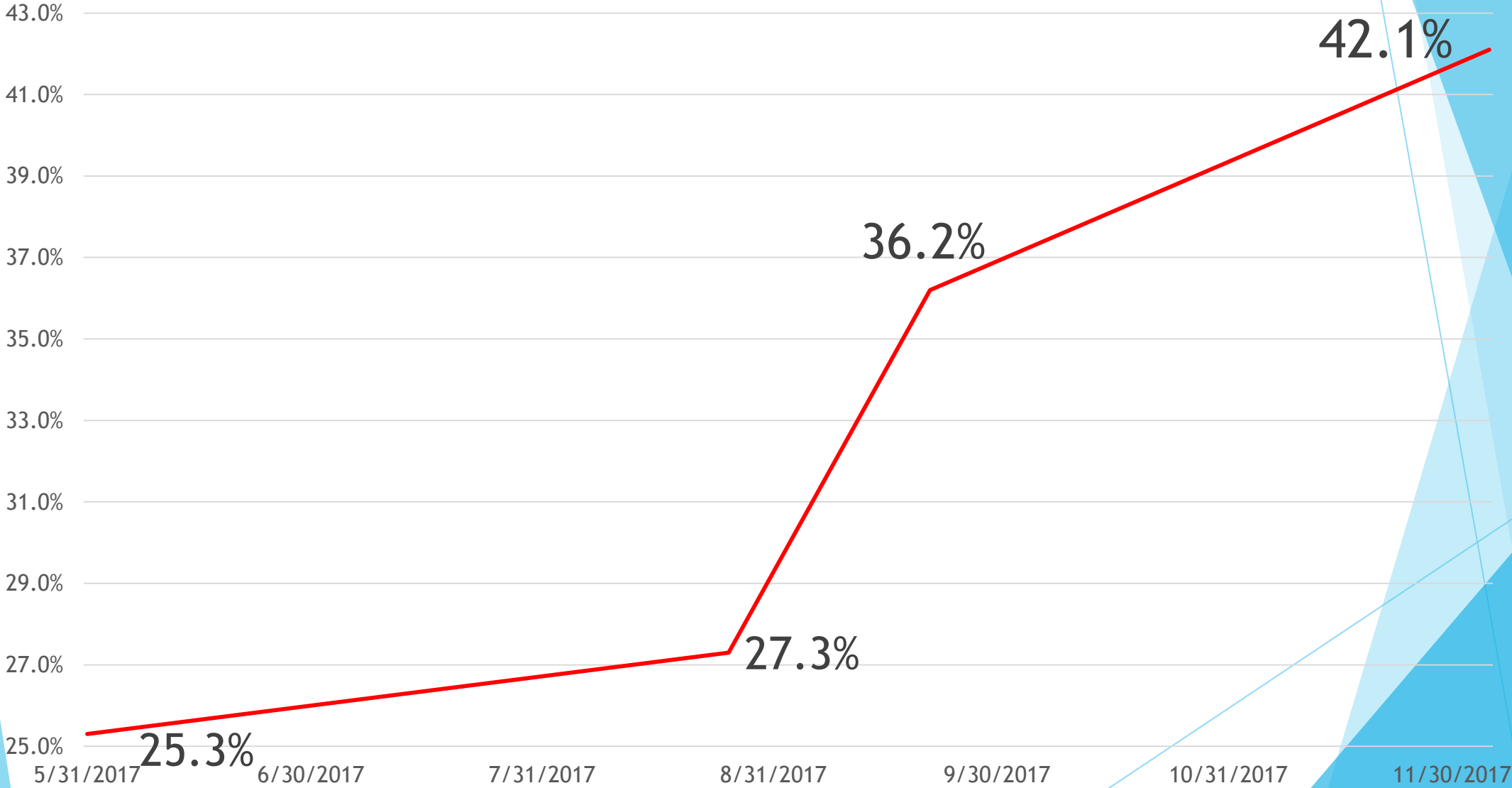


# Patients Enrolled in Clinic

## AGE DISTRIBUTION

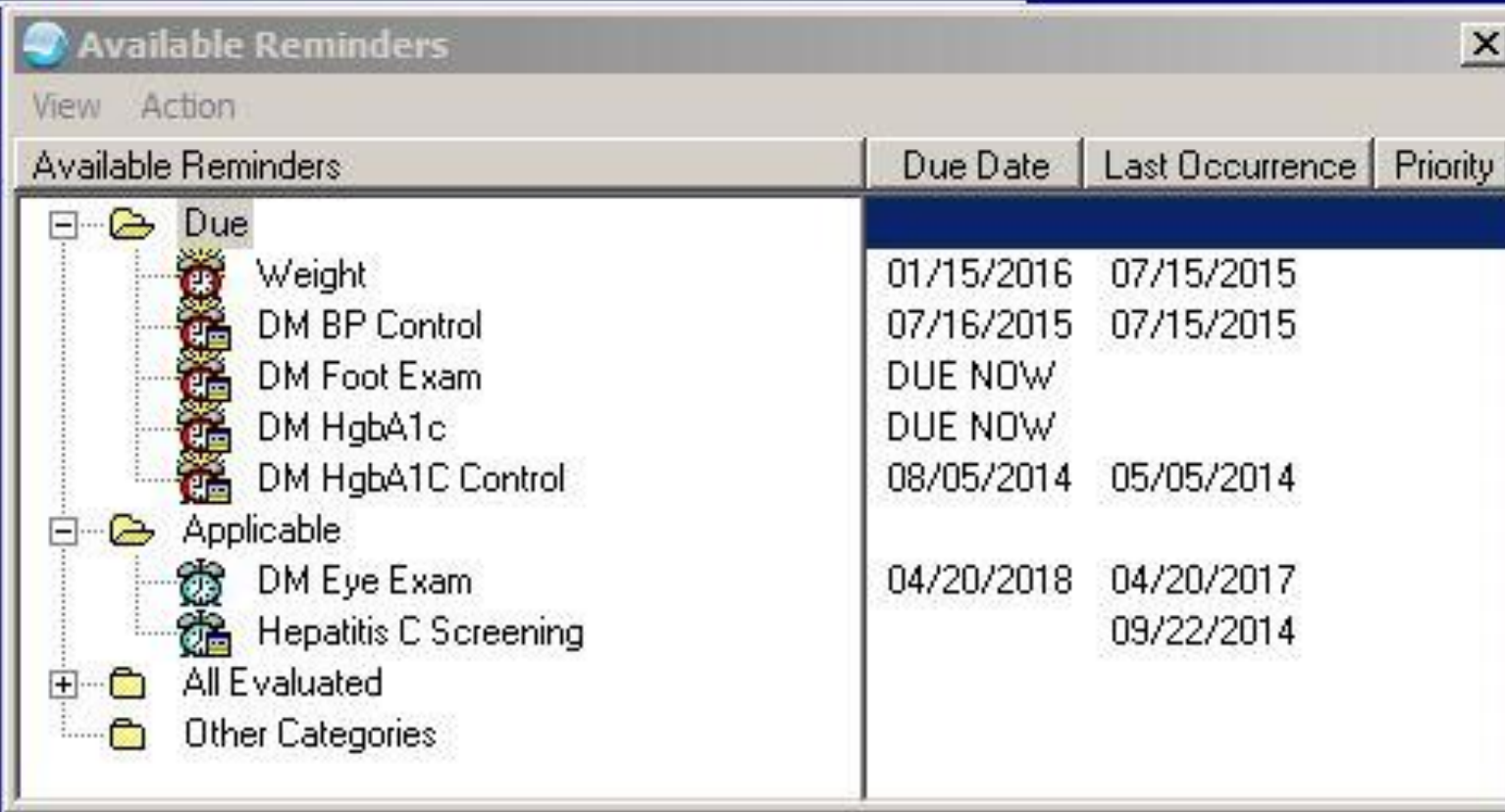


# HCV Screening Rate





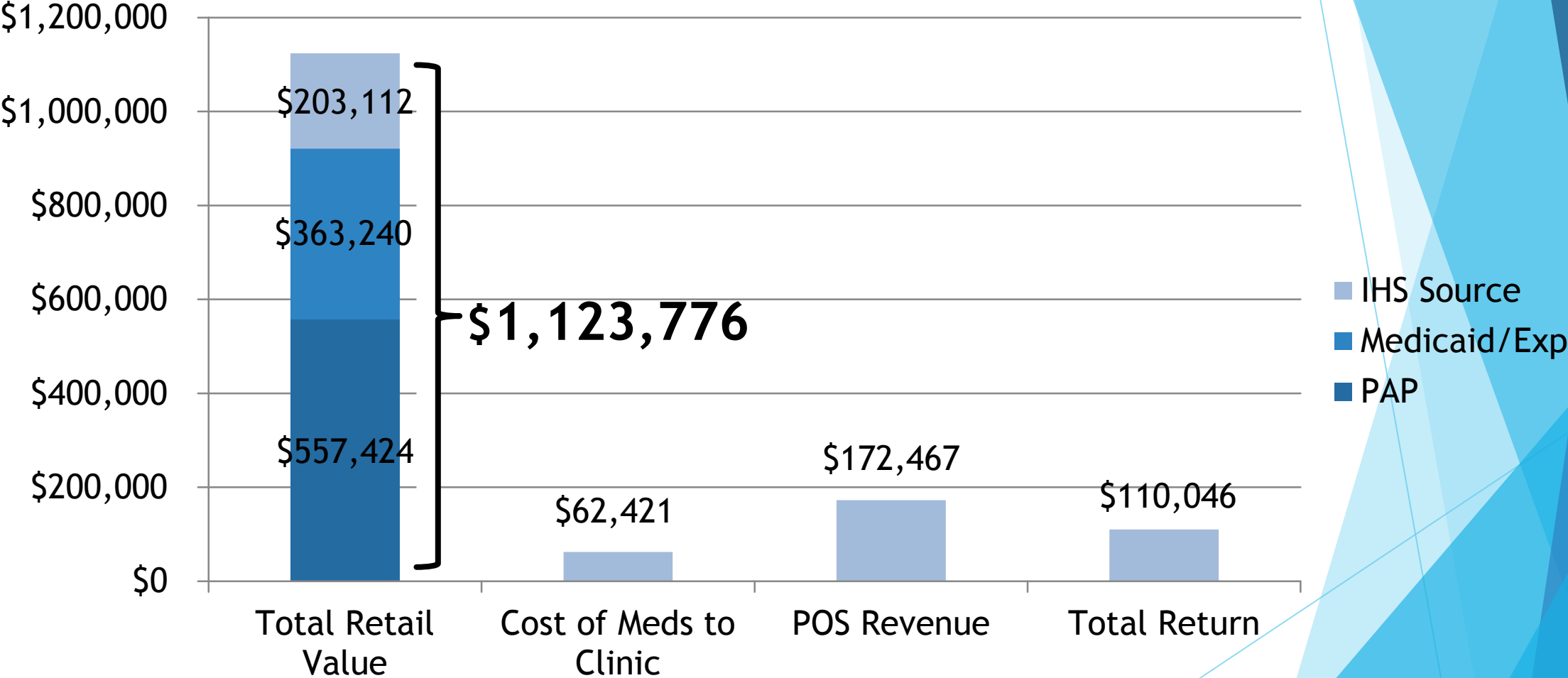
# HCV Screening Rate



The screenshot shows a window titled "Available Reminders" with a menu bar containing "View" and "Action". The window displays a list of reminders organized into folders. The "Due" folder is expanded, showing several reminders. The "Applicable" folder is also expanded, showing "DM Eye Exam" and "Hepatitis C Screening". The "All Evaluated" and "Other Categories" folders are collapsed. The table below shows the data for the reminders listed.

Available Reminders	Due Date	Last Occurrence	Priority
Due			
Weight	01/15/2016	07/15/2015	
DM BP Control	07/16/2015	07/15/2015	
DM Foot Exam	DUE NOW		
DM HgbA1c	DUE NOW		
DM HgbA1C Control	08/05/2014	05/05/2014	
Applicable			
DM Eye Exam	04/20/2018	04/20/2017	
Hepatitis C Screening		09/22/2014	
All Evaluated			
Other Categories			

# Cost Analysis: Cumulative



# Next Steps

- ▶ Leading efforts in the Great Plains, Bemidji and Billings Areas
  - ▶ Sharing experiences and resources with other service units



# Next Steps



# Success Story

## ND Medicaid and Expansion



Drop minimum fibrosure score requirements

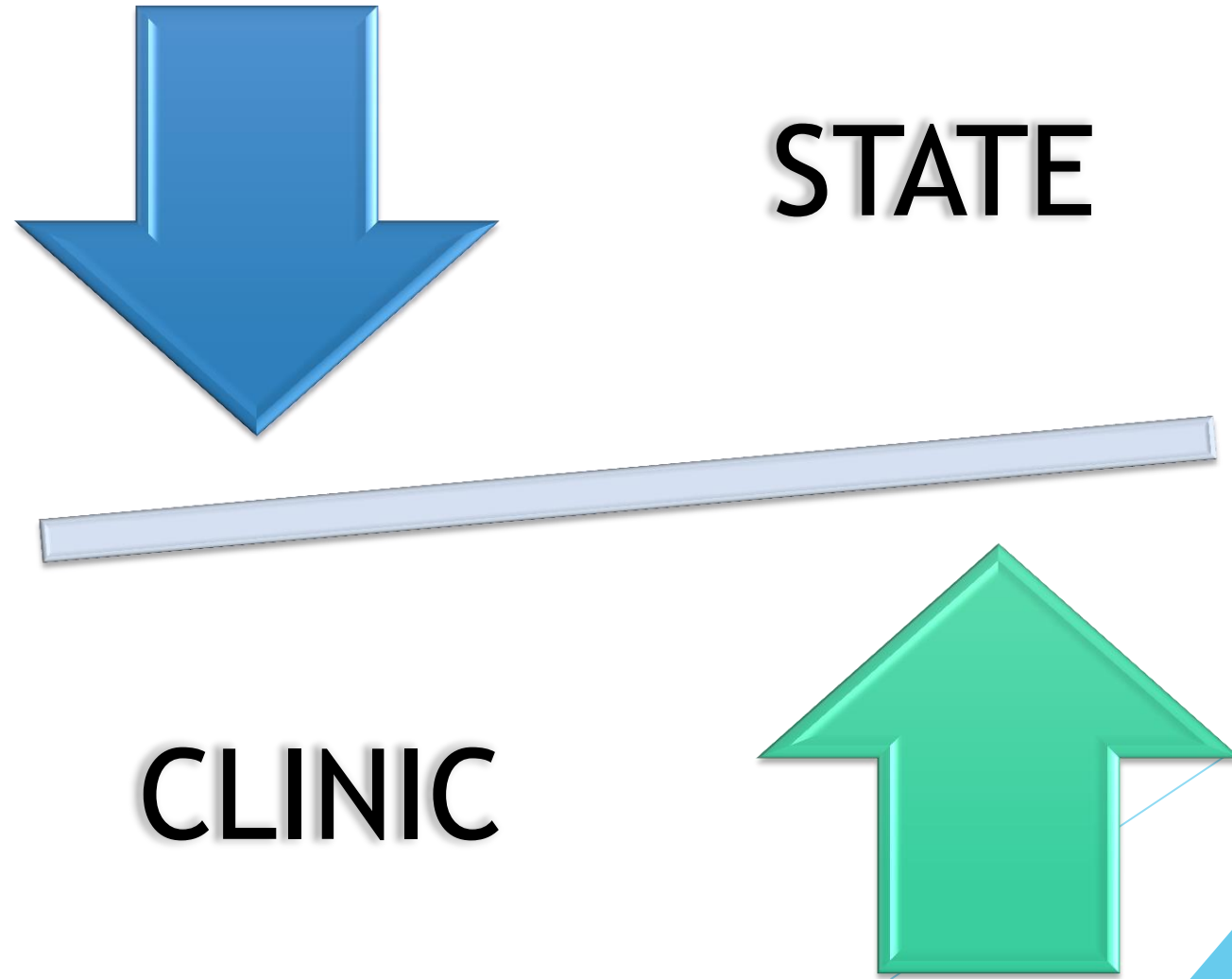


12-months abstinence requirements remains



No NS5A resistance test required unless prescribing Zepatier®

# Medicaid Letter - Balancing Act



# Hepatitis Listserv

Share info  
via text HCV  
to 97779

Create a  
NICE Project  
Listserv to  
continuously  
improve and  
grow  
resources

Create a  
MAX.gov to  
share  
resources

# Patient's Story

- ▶ First patient enrolled in HCV clinic summer of 2017, achieved SVR mid-November

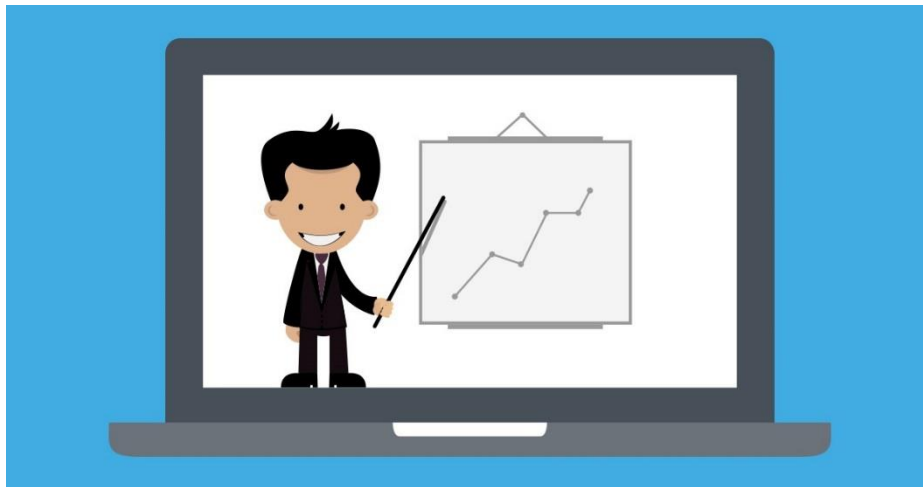
*“I have been waiting for this for so long. I know I have made some mistakes in the past, but I had started to turn my life around. I am very thankful to them for not being judgmental and for treating me with respect. I am finally able to start a family. God bless you!”*

- First patient to attain SVR in HCV clinic



# Recorded Webinars

- ▶ <http://www.npaihb.org/hcv/#clinical-resources>
- ▶ How to create an iCare panel
- ▶ How to create a quick order menu for required labs
- ▶ How to use the NICE patient management tool
- ▶ Hepatitis C clinic workflow
- ▶ Medicaid Letter, appointment cards



# Special Thanks

- ▶ Jessica Leston , HCV/HIV/STI Clinical Programs Director for the Northwest Portland Area Indian Health Board
- ▶ Brigg Reilley, National HIV/AIDS Program
- ▶ David Stephens, BSN, RN, Case Manager for the Northwest Portland Area Indian Health Board.

# Questions



# Thank you

► Contact Info:

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