PRIMARY CARE SCREENING INTERVENTION INCREASES IDENTIFICATION AND LINKAGE TO CARE FOR HEPATITIS C AND HIV PATIENTS WITHIN A LARGE HEALTHCARE SYSTEM

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Carolinas HealthCare System

CONTEXT

- Societal and economic burdens of Hepatitis C Virus (HCV) and Human Immunodeficiency Virus (HIV) continue to grow, even as treatments for these diseases become more readily available and efficacious
- The Centers for Disease Control and Prevention Guidelines:
 - One-time HCV screen for Baby Boomers population (born between 1945 and 1965)
 - One-time HIV screen for all individuals between ages 13-64, regardless of risk factors

OBJECTIVE

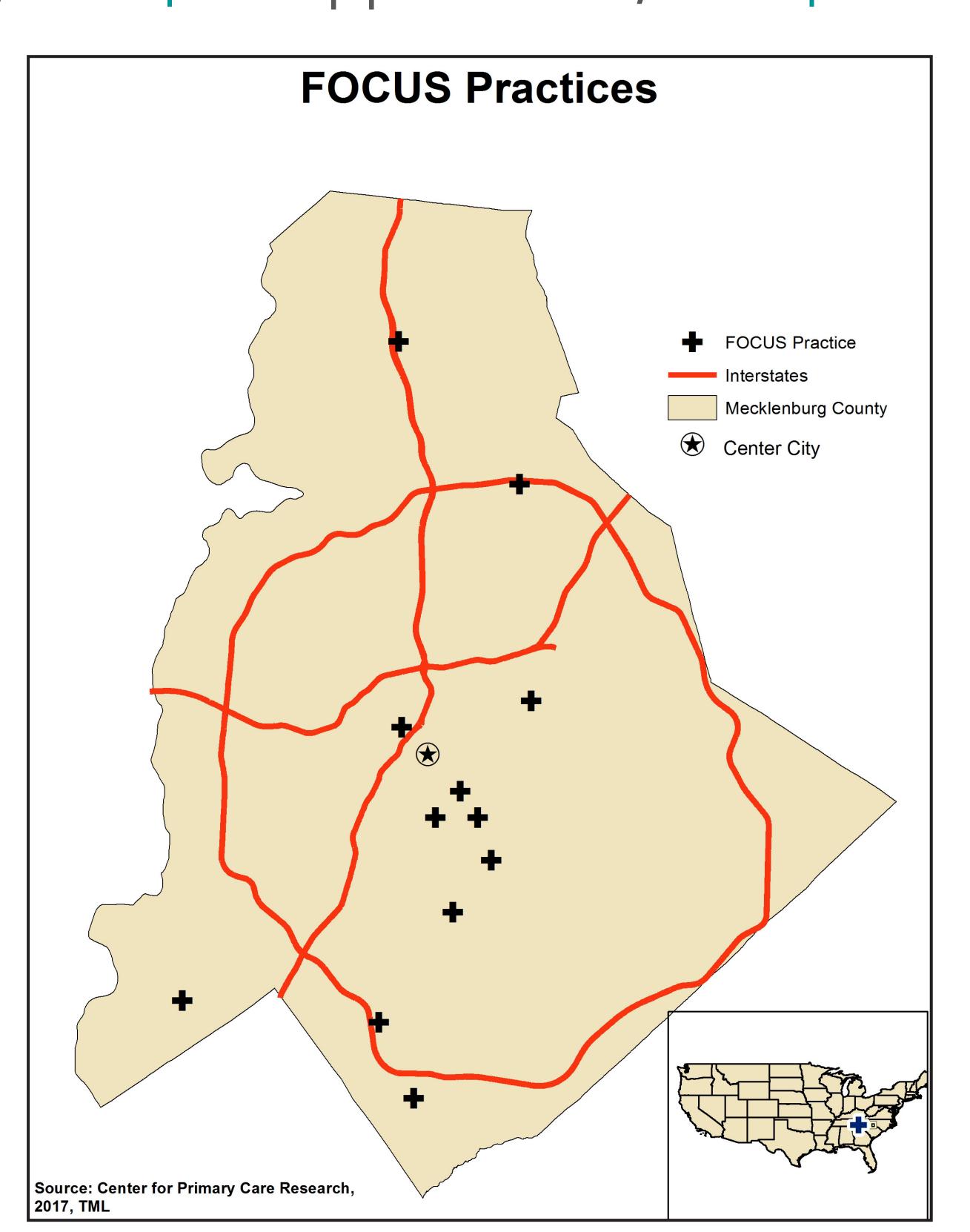
 Design an intervention to improve rates of HCV and HIV screening, especially in the Baby Boomer cohort

SETTING & PARTICIPANTS

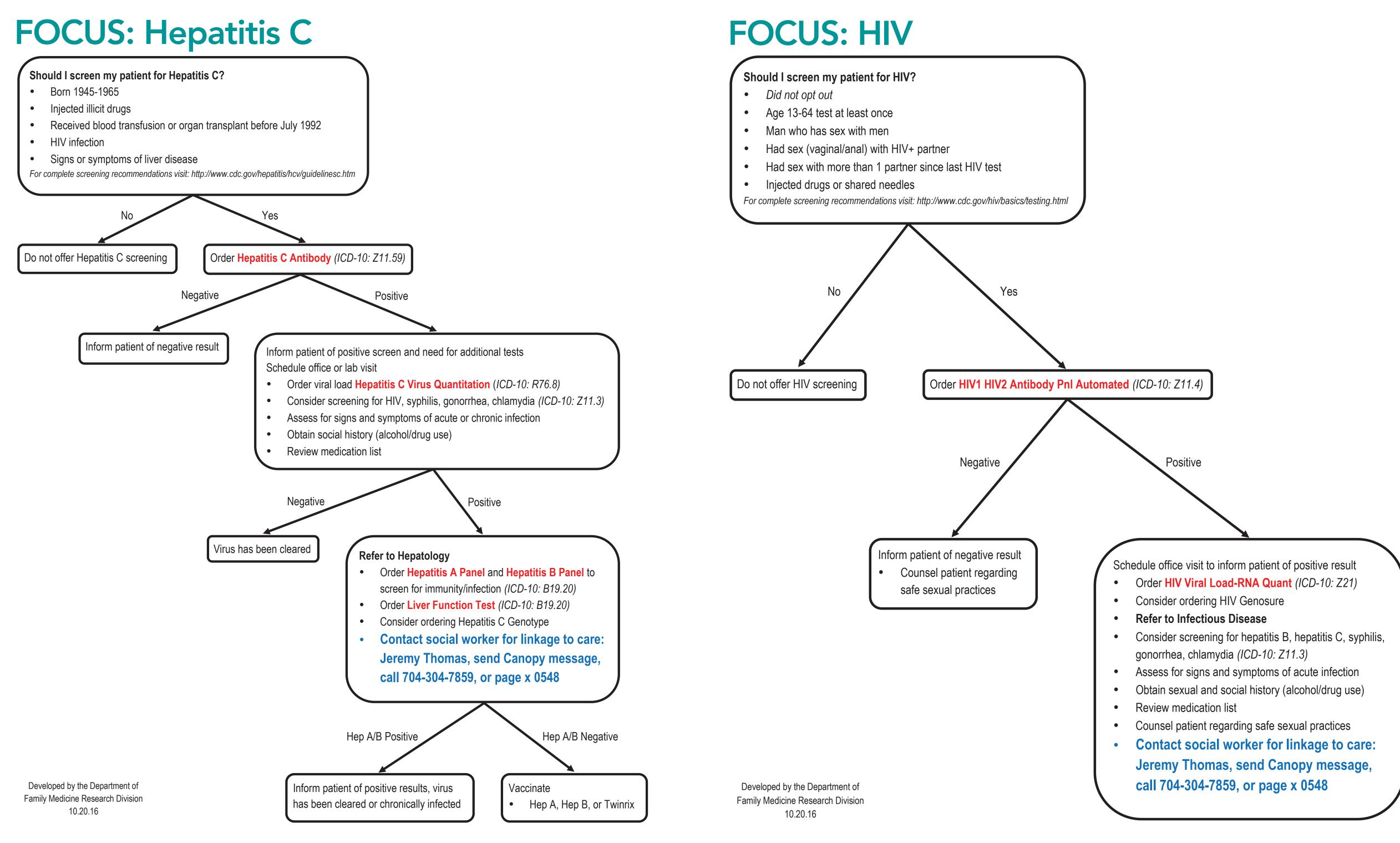
- Carolinas HealthCare System, a non-profit vertically integrated healthcare system with 12 million patient encounters per year
- Twelve primary care practices in the metropolitan area of Charlotte, North Carolina were selected for an Educational Intervention

METHODS

- Electronic medical record (EMR) alert prompting HCV screening targeting the eligible Baby Boomer population
- Testing was integrated in to normal clinic work flow
- Implemented in May 2016
- Developed a provider peer-to-peer Educational Intervention program
- Presented algorithms to guide efforts to increase HCV and HIV screening
- Assisted with linkage to care for positive patients
- Implemented in October 2016 at the 12 selected primary care practices



ALGORITHMS FOR HCV SCREENINGS AND LINKAGE TO CARE

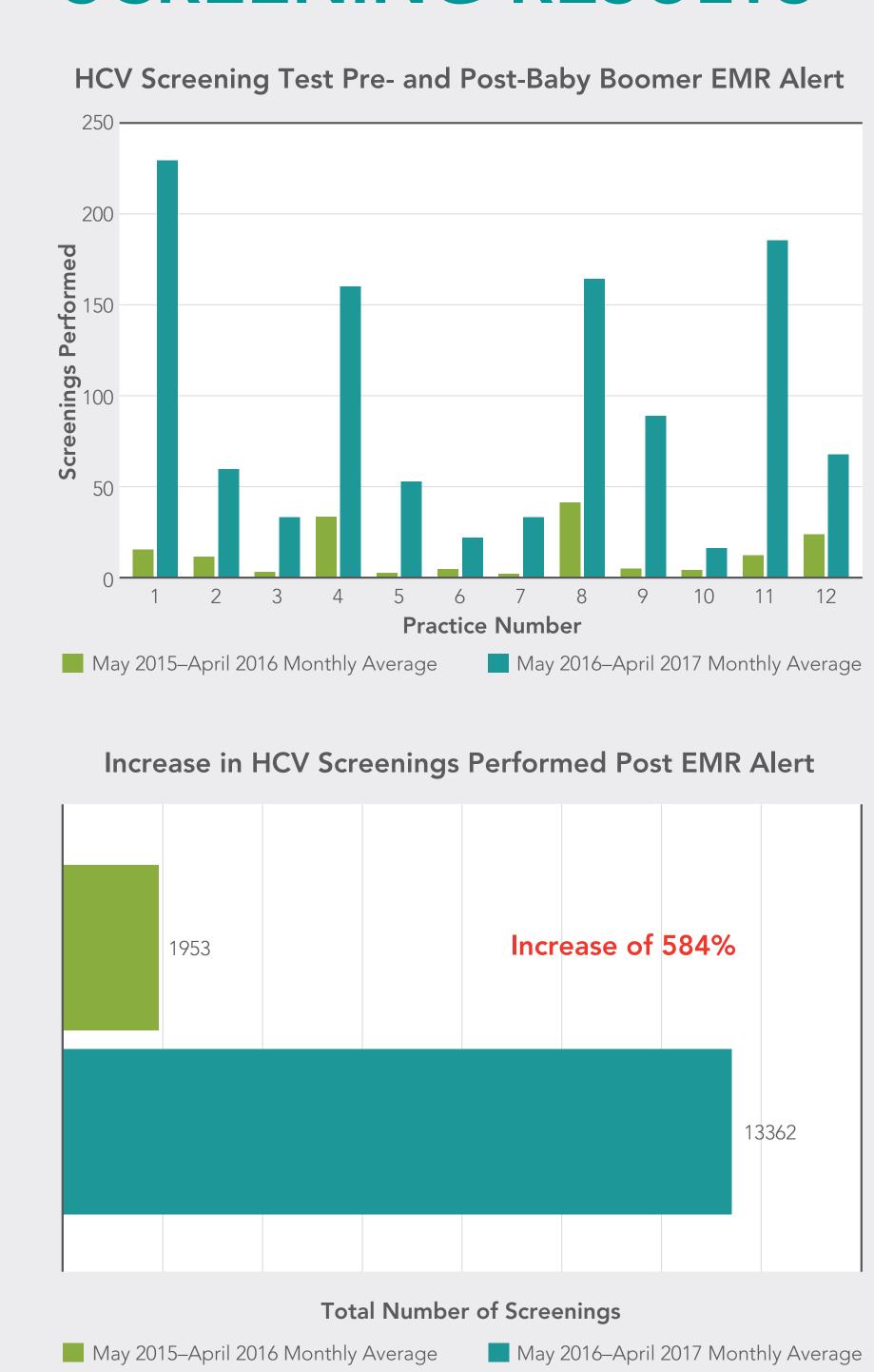


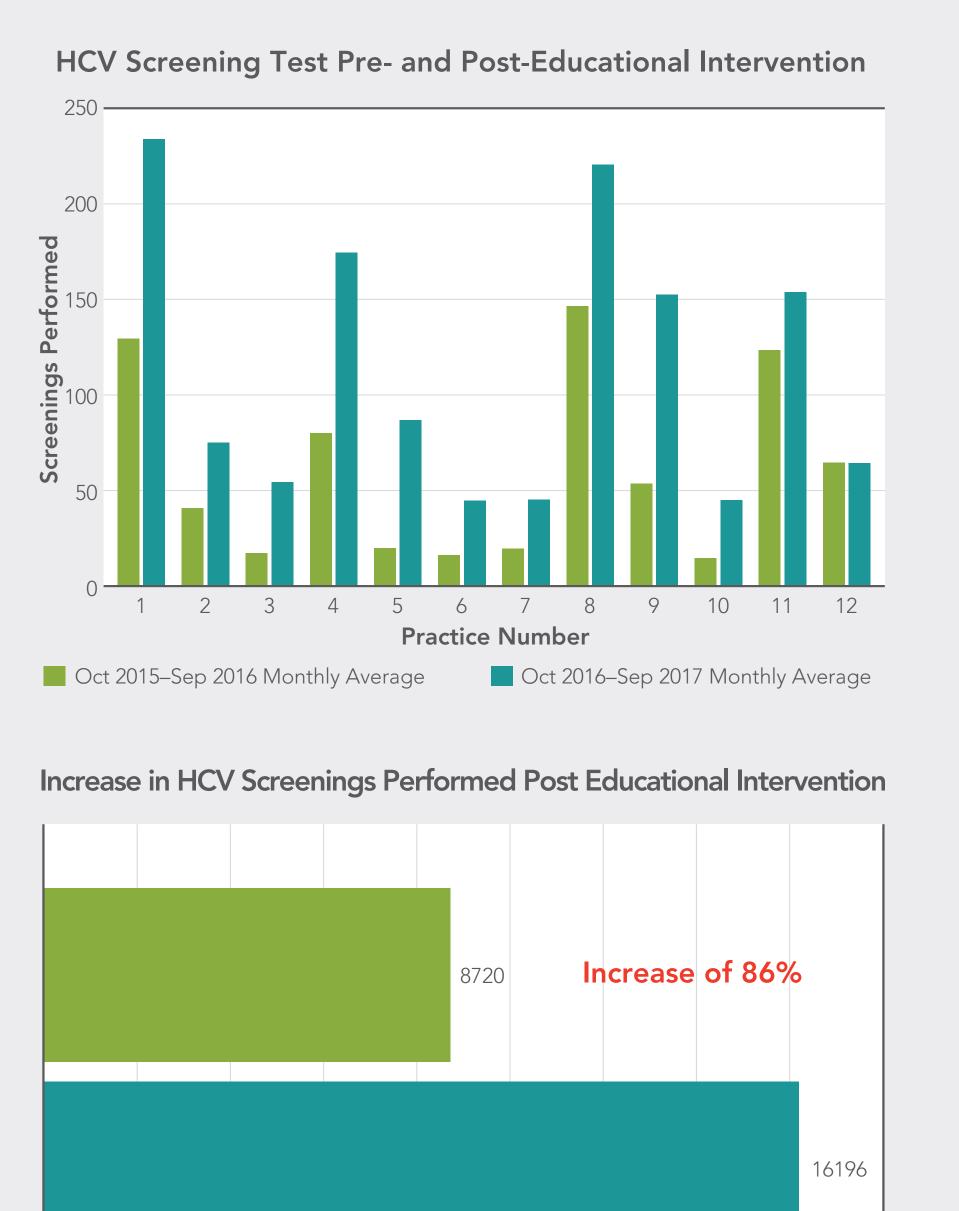
Carolinas Medical Center Mercy

CONCLUSIONS

- Linkage to care was significantly above the national rate at 86% for HCV patients and 95% for HIV patients.
- Screening increased significantly for both HCV (86%) and HIV (29%) year over year following the Educational Intervention rollout.
- HCV screening also increased 584% year over year following the electronic medical record (EMR) alert for Baby Boomer age cohort
- EMR modifications and provider education along with availability of connect-to-care partners within a large, vertically integrated healthcare system can significantly enhance screening and linkage to care for patients with HCV and HIV

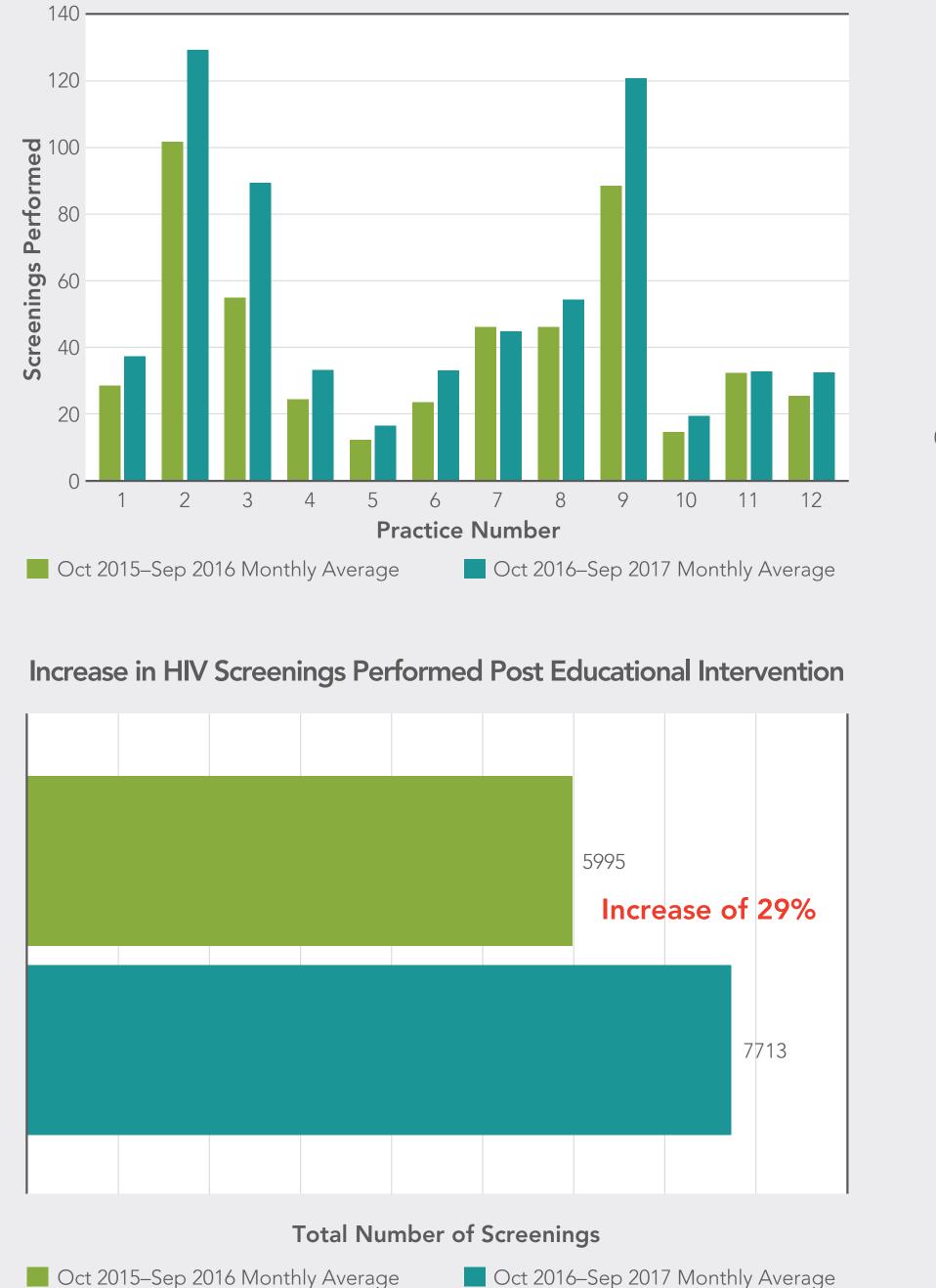
SCREENING RESULTS



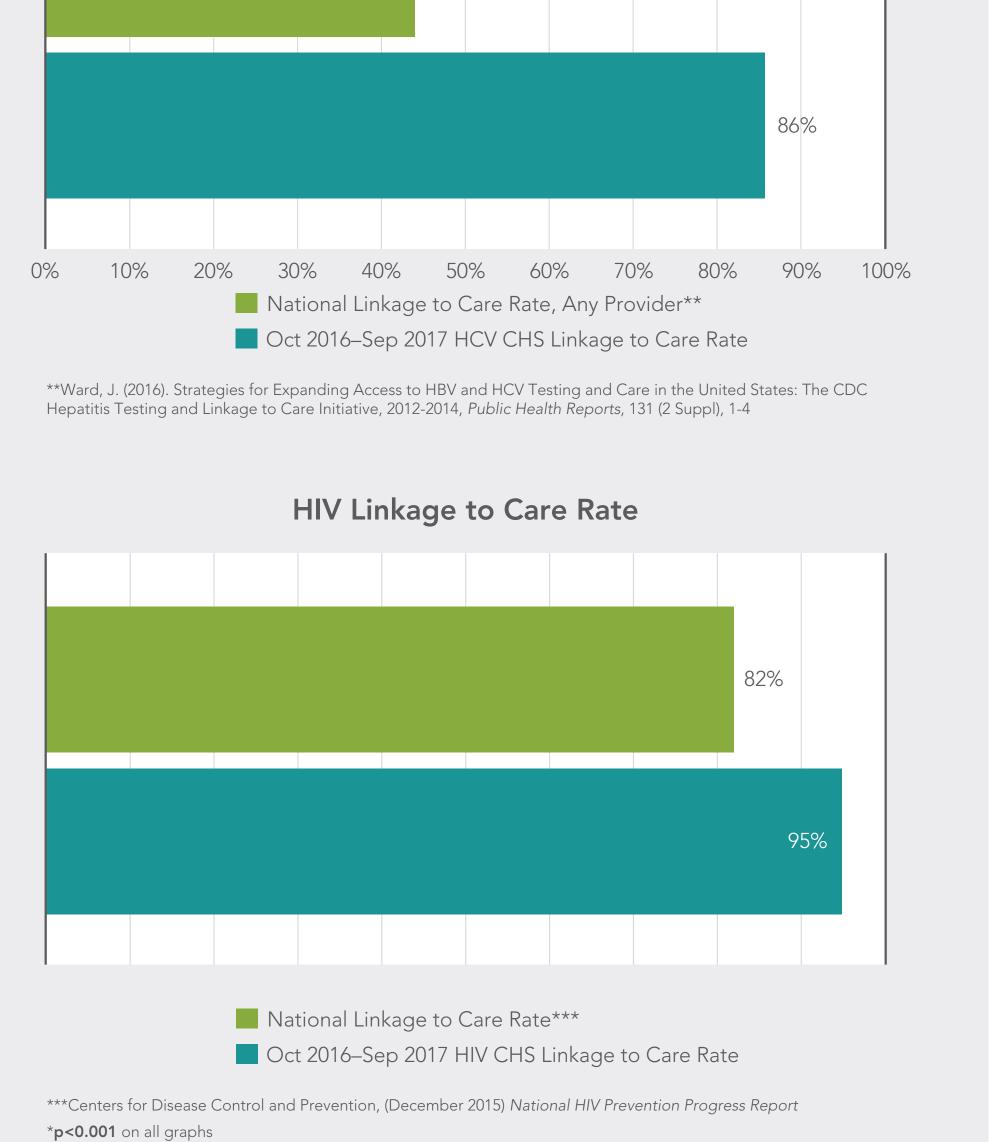


Total Number of Screenings

Oct 2015–Sep 2016 Monthly Average Oct 2016–Sep 2017 Monthly Average



HIV Screening Pre- and Post-Educational Intervention



HCV Linkage to Care Rate

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and linkage to care

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