Dual Routine HCV and HIV Testing as a Method to Improve Detection and Linkage to Care of HCV and HIV-Positive Patients at a Network of Community Health Centers in Philadelphia, PA

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Background

- September 2013: National Nursing Centers Consortium (NNCC) partnered with Public Health Management Corporation (PHMC) to integrate dual routine HCV and HIV testing and linkage to care into four federally qualified health centers
- Replaced routine opt-out HCV/opt-in HIV testing model with routine opt-out HCV/opt-out HIV testing
- Health centers:
 - Mary Howard Health Center: designated to treat an entirely homeless patient population
 - Rising Sun and PHMC Health Connection: provide family medicine to public housing residents
 - Care Clinic: provide primary care to all patients and specialty care for HCV and HIV-positive patients; test and treat site

The model

Routine HIV and HCV testing

Medical Assistant initiated opt-out testing

Laboratory-based reflex testing

• 4th generation HIV test and HCV-antibody with reflex to HCV-RNA test

EMR Modifications

- Eligibility for testing and linkage services
- Patient response documentation , data collection and reporting
- Laboratory orders and test results
- Quality assurance, patient tracking, evaluation and dissemination

Linkage to Care Coordinator

- Helps transition from primary to specialist care by addressing simple social barriers
- Provide patient escorts, tokens for public transportation, call if patients are no shows, determine if patient is lost to care and why

Testing Eligibility

HIV Testing

- Annual testing for patients
 ≥13 years old without HIVpositive diagnosis
- Additional testing if patient reports risk factor or if patient opts-in

HCV Testing

- One-time test on all patients ≥18 years old without an HCVpositive diagnosis
- Subsequent testing based on reported risk factor:
 - Drug use
 - Housing status
 - Incarceration
 - Tattoos/piercings from nonlicensed locations

Mid-Course Adjustments

- March 2013: Health centers implement reflex testing
- September 2013: All health centers adopt medical assistant based model
 - Care Clinic switched from RN/provider initiated testing
- March 2014: 5th health center added to the project
 - Congreso Health Center
 - Treats primarily Hispanic patient population and HIV on-site
- June 2014: All health centers adopt universal HCV testing
 - Testing eligibility at two health centers with patients at low-risk of HCV based on reported risk factors
 - 1945-1965 birth year cohort
 - Traditional CDC risk factors
 - Current or previously homeless

Results

- September 2013-February 2015
- HCV :
- 4,893 patients tested; 601 (12.3%) were HCV-antibody-positive; 584 (97.2%) received confirmatory HCV-RNA testing; 406 (69.5%) patients were identified having current HCV infection (overall prevalence = 8.3%)
- HIV:
- 8,809 patients were tested; 68 (0.8%) were identified as HIV-positive

• Key Finding:

 Bundled testing increased the number of HCV tests that were performed by 52.7%: 1,786 HCV tests performed (12/2012-8/2013) to 2,728 HCV tests performed (9/2013-7/2014)

Results



