

# Hepatitis C Treatment GP Reimbursement

## Background

Funding has been allocated for the provision of integrated Hepatitis C Services. The Primary Options for Acute Care (POAC) service is the mechanism for distributing the funding to GPs across the Auckland Region (ADHB, WDHB, CMDHB) who provide Hepatitis C treatment in a primary care setting.

## GP Reimbursement

GPs are encouraged to utilise the Auckland Regional HealthPathway: [Hepatitis C](#)

A single extended consult per patient can be claimed up to the total amount of \$115.00 (including GST). There is to be no patient co-payment charged.

- Payment for treatment of Hepatitis C by a GP may be claimed once a GP has performed an 'Intention to treat' consultation. Typically this consultation will be of extended duration and will occur after:
  - Confirmation of [Hepatitis C](#) infection (positive Hepatitis C RNA (PCR) test); and
  - Liver function testing using a calculated APRI score or a liver elastography scan to determine if the patient has cirrhosis; and
  - Completion of baseline tests as detailed on the Auckland Regional HealthPathway: [Hepatitis C](#); and
  - Determination that the patient is suitable for primary care treatment of hepatitis C
- By claiming the reimbursement through POAC, the referring GP confirms that the patient is not receiving treatment through the Needle Exchange, Auckland Central Liver Clinic, nor within the Corrections Department Facilities throughout the Northern Region.

## GP Treatment Episode

The 'Intention to treat' consultation will constitute a 'face to face' discussion with the patient concerning their Hepatitis C status and encompass the following activities:

- Discussion of Maviret, the pangenotypic DAA funded by PHARMAC
- Planning management of drug interactions (if any)
- Discussing the treatment regime, adherence and potential side effects of treatment
- Working with the patient to locate the most convenient Maviret AbbVie Care accredited pharmacy or an alternative distribution location.
- Completion of the necessary paperwork (prescription, or alternative distribution form)

In addition it is anticipated that the GP will:

- Arrange on-treatment follow up contact as required to ensure adherence to treatment
- Liaise with the pharmacy when required
- Arrange bloods tests at 12+ weeks post treatment completion (HCV RNA (PCR) and LFT) to check for cure.
- Refer as appropriate if treatment failure (< 2%) or abnormal LFTs despite successful treatment.

## Service Users

Patients (service users) will be those deemed as meeting the PHARMAC criteria for treatment with DAAs, and includes the following:

- The patient has confirmed Hepatitis C (PCR test)
- The patient has had either a recent APRI score calculated, or a liver elastography scan completed within the last 3 years, to determine liver function as either non-cirrhotic or cirrhotic
- The patient does not have cirrhosis or any of the other exclusions from primary care treatment of Hepatitis C as detailed on the Auckland Regional HealthPathway: [Hepatitis C](#)

If cirrhotic or otherwise excluded from primary care treatment, the patient should be referred for further management to the gastroenterology department serving their DHB of domicile. These patients do not qualify for the GP funding outlined here.

## Claiming Process

- Submit a new referral for the patient using the POAC electronic form within the practice management system. Select the relevant **Hep C Treatment** code (*e.g Hep C Treatment*). See figure 1.
- Submit claim (outcome+invoice) using the service code 'Hep C Maviret treatment'
- If electronic claiming is not available, use the hard copy referral form which can be found online [www.poac.co.nz](http://www.poac.co.nz)

**Contact POAC regarding any claiming queries by phone (09) 535 7218.**