

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 will be the mechanism for distributing the funding to GPs across Auckland Metro who provide Hepatitis C treatment in a primary care setting.

GP Reimbursement

- 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 a positive HCV PCR and, where relevant, completion of a liver fibrosis assessment (either APRI alone, or APRI followed by liver elastography scan).
- GPs are encouraged to utilise the **Chronic Hepatitis C** pathway on the Auckland Regional HealthPathways website (<http://aucklandregion.healthpathways.org.nz>)
- By claiming the reimbursement through POAC, the referring GP confirms that the patient is not receiving treatment through alternative providers such as the Needle Exchange or the Pharmacy test and treat programme

GP Treatment Episode

The 'Intention to treat' consultation will occur after confirmation of HCV infection and liver fibrosis assessment, and will constitute a 'face to face' discussion with the patient concerning their Hepatitis C status. It will encompass the following activities:

- Pre-treatment blood tests if required
- Referral to secondary care for treatment of HCV if primary care treatment is contraindicated
- Referral of patients with severe fibrosis or cirrhosis to secondary care for surveillance for hepatocellular carcinoma, even if treating in primary care
- Planning management of drug interactions,
- Discussing the treatment regime, adherence and potential side effects of treatment
- Completion of the prescription.
- Working with the patient to locate the most convenient AbbVie Care accredited pharmacy - only AbbVie Care accredited pharmacies are able to dispense funded Maviret® ([glecaprevir + pibrentasvir](#)).

In addition it is anticipated that the GP will:

- Arrange bloods tests, both
 - on-treatment liver function tests if cirrhotic

- follow-up HCV RNA test for cure at least 4 weeks after completion of treatment.
- Address any potential new drug-drug interactions and missed dose issues
- Liaise with the pharmacy when required
- Discuss prevention of re-infection

Service Users

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

- The patient has confirmed current Hepatitis C infection (positive PCR test)
- Where relevant, the patient has had a liver fibrosis assessment: either APRI score only, or APRI score followed by a Liver Elastography Scan, to help determine suitability for treatment in primary care.
- Primary care treatment is not contraindicated.
 - Primary care treatment is contraindicated if < 12 year old or unsuccessful previous DAA treatment for HCV.
 - Patients with cirrhosis may be suitable for treatment in primary care - take advice from a liver specialist before treating.

Claiming Process

- Submit a new referral for the patient using the POAC electronic form within the practice management system. Select the **Hepatitis C Treatment** diagnosis coding.
- Submit claim (outcome + invoice) using the service code **Hepatitis C Treatment (GP)**

Contact POAC regarding any claiming queries by email accounts@poac.co.nz