Primary Care
Team-based
HCV Treatment

Best Practice Models

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SFHN Model for Primary Care-Based HCV Treatment

Primary Care Roles
- Adherence and Monitoring Support
- Med Access Support

Centralized Roles
- Regimen Selection
  eReferral Consultation
  (Primary Care MD and PharmD)

Insurance Companies
Patient Assistance Programs

Specialty Pharmacy
SFGH Liver Clinic
• Prescribing models

• Old model
  - HCV Champion receives internal clinic referral, performs chart biopsy, schedules and sees clinic patients, and prescribes treatment

• New model
  - PCP prescribes for one’s own patients
    Advantages → increased capacity, decreased barriers for patient
The TWUH Model

- Med Access Support
  - Nurse or pharmacist → “Treatment Manager”
  - Established relationship with Mission Wellness Pharmacy
  - Weekly check-in with pharmacy tech
  - Available by pager/phone throughout week as needed
  - Faxes supporting documents to pharmacy for PA
  - Assists pharmacy with appeals process when needed
    - Letter of necessity (from provider)
  - Coordinates medication delivery to clinic
    - Medications are typically shipped as a 2 week supply
    - As appropriate, can coordinate for patient to pick up at pharmacy
    - Some insurance companies call patients directly and treatment manager can facilitate this communication
Adherence and Monitoring Support

Before start of treatment
- Counsel regarding med education, review of treatment plan including monitoring schedule, med reconciliation, importance of adherence, transmission and reinfection risks
- Sign treatment plan consent (if used by clinic)

Week 1
- Supply one week of medication
- Schedule one-week follow-up with treatment manager

Week 2
- Check in to review adherence, side effects

Ongoing visits while on treatment
- Continue to monitor for side effects, review lab results and coordinate dose changes while on treatment (if needed)

Communicates with prescriber using eCW TEs
The TWUH Model

Pearls

- No provider visits necessary while on treatment
  - Unless needed to assess/manage side effects of treatment or for non-HCV related issues

- Frequency of visits while on treatment determined by:
  - Level of patient independence
  - Quantity of meds shipped by insurance company
  - Ability of patient to pick up medications at pharmacy
  - Lab monitoring schedule