

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 is available per patient for those already diagnosed with an active HCV infection (i.e. are HCV RNA positive) and who are suitable for 8 week course of Maviret.
- This POAC payment can be claimed up to the total amount of \$120.75 (including GST).
- Co-payments may be charged to the patient for subsequent visits relating to the same episode of treatment.
- 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 RNA positivity and stage of liver disease (i.e. cirrhotic/ non-cirrhotic status) has been received.
- Should the same patient discontinue treatment, and require a further extended consult to re-start their treatment, a further claim up to the full amount of \$120.75 (including GST) can be made via POAC.
- 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 another provider.

GP Treatment Episode

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

- Ordering further tests if required as per advice available: Chronic Hepatitis C Pathway on the Auckland Regional HealthPathways website
- Supply of script for 8 weeks Maviret
- Planning management of drug interactions
- Discussing the treatment regime, adherence and potential side effects of treatment
- Working with the patient to locate the most convenient pharmacy that supplies Maviret
- Providing Awanui request form for SVR4 test of cure

In addition, it is anticipated that the GP will:

- Arrange bloods tests, both during treatment (if any) and follow-up (4weeks after treatment completion). Note: On-treatment blood tests are only required if GPs treating cirrhotic patients.
- Liaise with the pharmacy when required

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 infection (PCR test)
- If severe fibrosis or cirrhotic (LSM 10.5 kPa or above) and compensated (normal bilirubin, albumin), then the patient should be referred, after completion of treatment for further follow-up to the local gastroenterology department.
- If cirrhotic (LSM 12.5 kPa or above) and decompensated (elevated bilirubin, decreased albumin), then the patient should be referred, to the local gastroenterology department. 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 **Hepatitis C Testing and Treatment** diagnosis coding.
- Submit claim (outcome + invoice) using the service code:

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