

Healthcare Utilization and Opportunities for HCV Testing and Treatment among Persons under Community Supervision in Pawtucket, RI



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Introduction

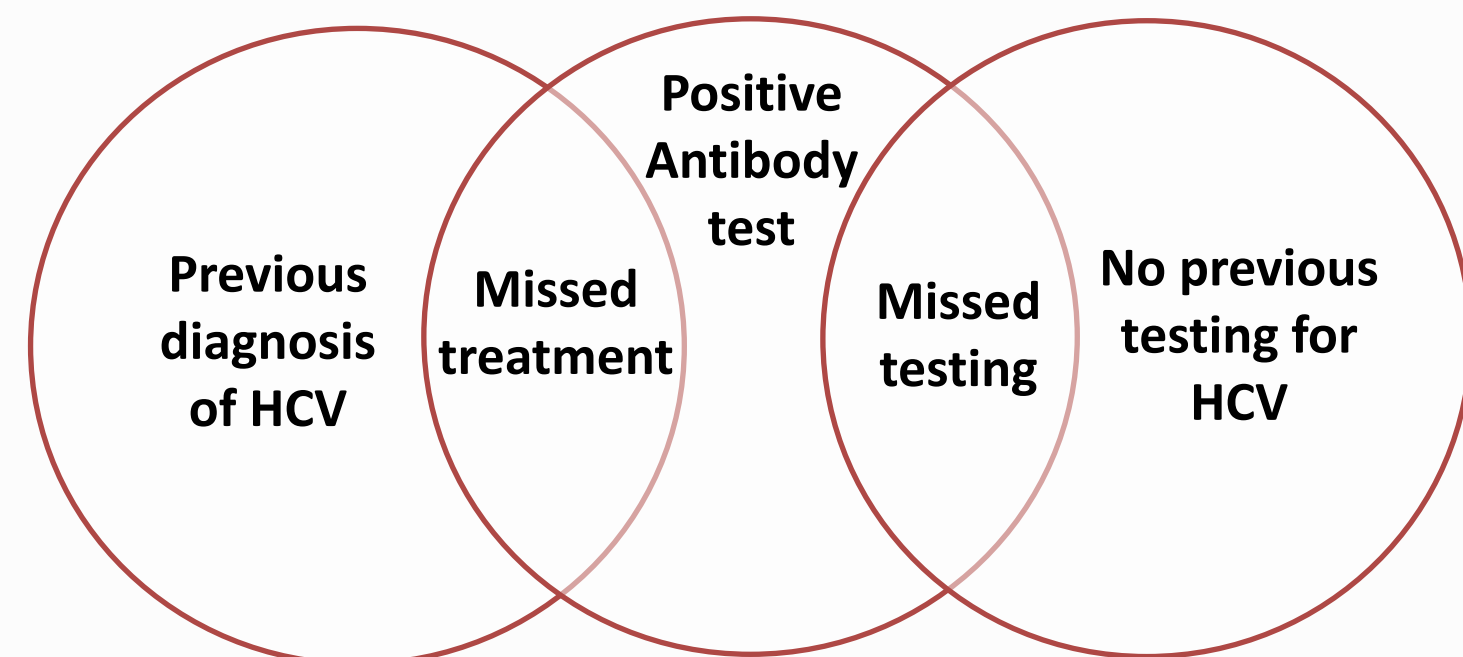
- An estimated 29-33% of the 5-7 million people living with HCV in the United States are detained in a correctional facility (1,2).
- Over one-half of those infected with HCV are unaware of their infection (3).
- Many individuals do not complete screening, confirmatory testing and are never linked to treatment(4).
- HCV testing and linkage to care at community supervision offices offers a scalable model to identify new infections and link to HCV treatment.

Purpose

To identify missed opportunities for HCV testing and treatment among individuals enrolled in an HCV testing and linkage to care study at a community supervision office.

Methods

- Patients on probation or parole were enrolled in an HCV testing and linkage study.
- Patients were screened for HCV, completed a baseline assessment, and linked to care.
- Baseline assessment was analyzed for missed opportunities of HCV testing and treatment services, and other healthcare utilization.



Results

Category		Total (n=250)	Percentage
Gender	Male	194	0.78
	Female	56	0.22
Age	Age (Mean)	41.1	
	High risk birth cohort (born 1945-1965)	36	0.14
Homeless	Yes	88	0.35
	No		
Health Insurance	Yes	229	0.92
	Private	15	0.06
	Public	215	0.86
Healthcare	Have seen PCP in last 12 months	145	0.58
	Have gone to an ED in last 12 months	128	0.51
Substance Use Treatment	Alcohol/Drug Treatment Inpatient	56	0.22
	Alcohol/Drug Treatment Outpatient	75	0.30
HCV History	Previously been diagnosed with HCV	29	0.12
	Ever tested for HCV	135	0.54
Injection Drug Use	Ever	59	0.24
	Ever share works	38	0.15
	Inject in last 3 months	10	0.04

Table 1- Baseline characteristics of the study population

- Forty-five (18%) study participants had reactive HCV antibody tests, 20 of which were unaware of their HCV infection.
- Thirteen participants (29% of the antibody-reactive population) had previously been told they had HCV over ten years ago. None had ever received treatment for HCV.
- One hundred and thirty-five (61.1%) participants reported previous testing for HCV. The most common site of testing was in jail/prison (n=87).
- Ten participants (4%) with no previous history of HCV testing had positive HCV antibody testing.
- Twenty-five participants (10%) who reported HCV infection had never been treated.

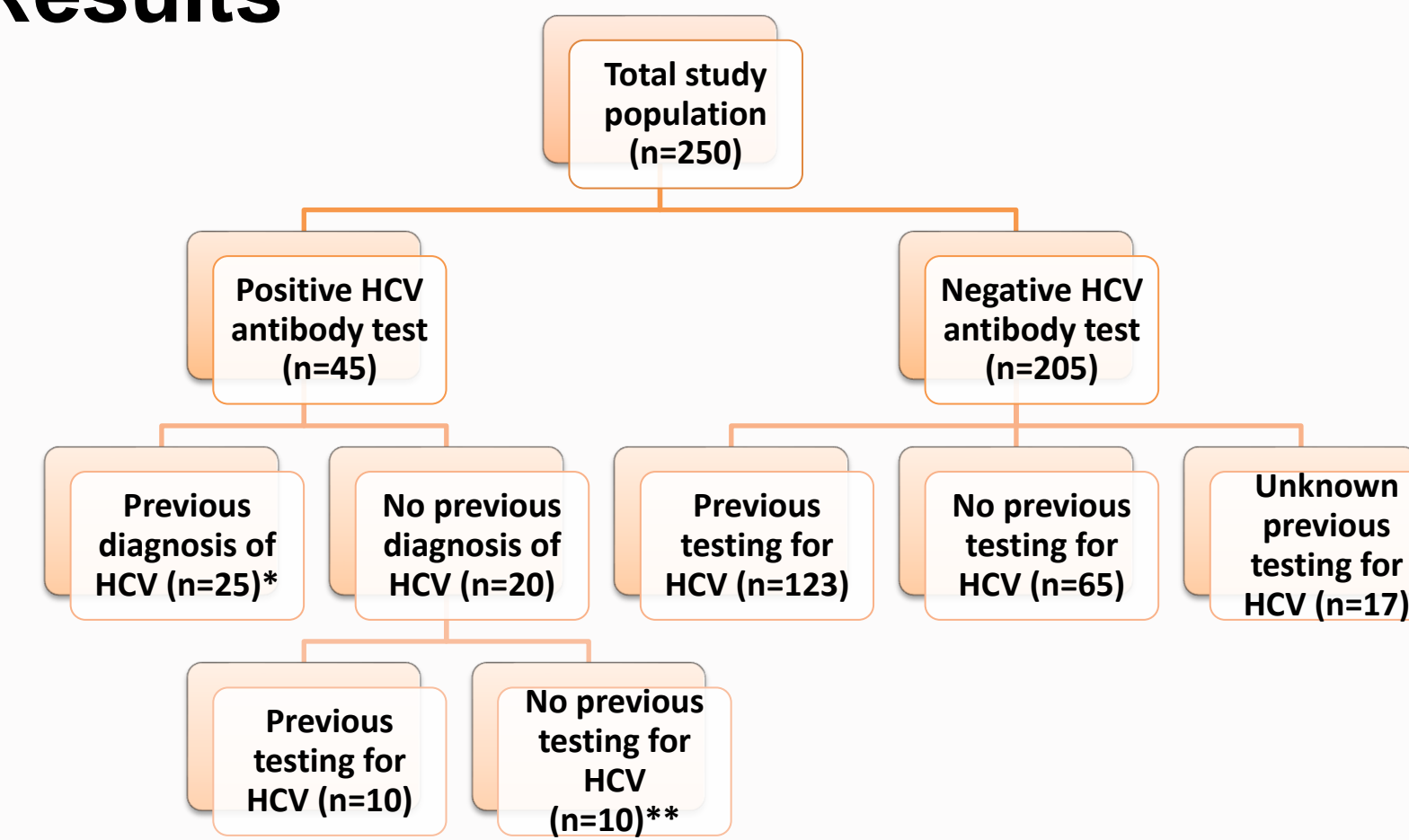


Figure 1- HCV antibody test results, previous HCV diagnoses and testing.

*- Missed opportunities for HCV treatment.

** - Missed opportunities for HCV testing.

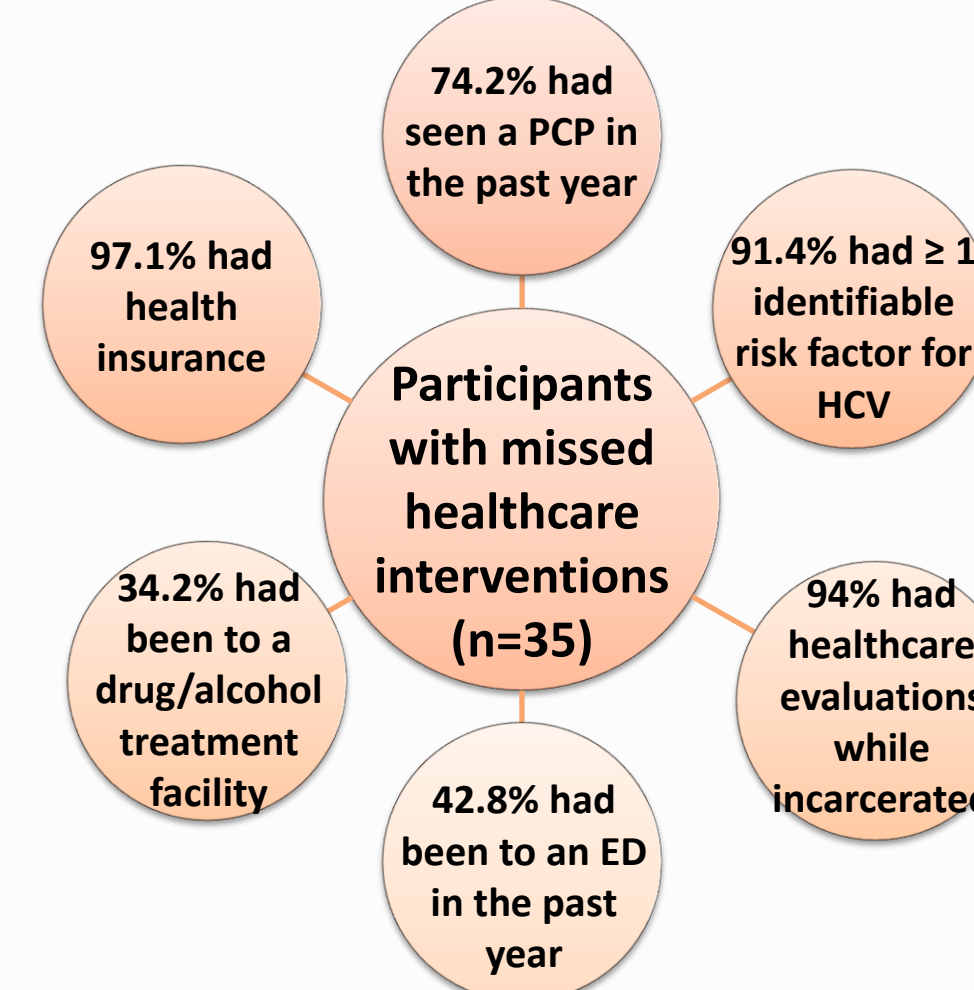


Figure 2- Previous opportunities for HCV care

Conclusions

- Screening for HCV at community supervision sites can identify previously-undiagnosed HCV infections.
- Many patients are aware of their HCV-positive status but have never received treatment.
- Many patients with risk factors for HCV are not being tested for HCV, despite involvement in healthcare systems.
- Highest rates of prior testing for HCV was in jail or prison.
- Over 90% of participants had health insurance and may qualify for disease-curing treatment.

Relevance

Rhode Island Medicaid recently expanded coverage to include curative, but costly, treatment for HCV (5). Decreasing barriers to testing is necessary to maximize the care continuum.

Future Directions

- Understanding why primary care physicians may not screen individuals at risk for HCV.
- Educating providers on risk factors for HCV, HCV screening, and Medicaid expansion.

Acknowledgments

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References

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