

Hepatitis C (HCV) Linkage Checklist

Guiding Principle:

EVERYONE
WITH HCV
DESERVES
TREATMENT
AND LINKAGE
TO CARE

Baseline Questions:

- Assess knowledge, reframe HCV and discuss the latest advancements / educate
 - What information do you have about treatments / what experiences have you had?
 - Review current treatment options
 - There are many ways for people to access treatment in San Francisco, and we can help you figure out how to access treatment
 - Duration of treatment is short, there are minimal side effects
 - You will start feeling better quickly!

- When did you first test positive for HCV? _____
 - What type of test did you have? Ab VL/RNA
 - If they haven't had confirmatory testing since their last known exposure/risk for HCV (or don't know if it has been confirmed):
 - Provide/refer for HCV quantitative RNA PCR
 - If Ab+ and RNA undetected, retest in 1+ months to confirm (6 mo if recent exposure)

- Where were you tested? Doctor Community organization Health event
 Jail/prison Syringe exchange Other: _____

WHAT SUPPORT WILL THE CLIENT REQUIRE TO BE SUCCESSFULLY TREATED?

<u>Yes</u>	<u>Assessment</u>	<u>Notes</u>
<u>Questions to ask the client:</u>		
Yes No	Do you <u>want</u> hepatitis C treatment?	
Yes No	Do you think you can take a pill every day?	
Yes No	Do you have a safe place to store medications?	
Yes No	Do you have transportation to attend medical appointments?	
Yes No	Do you generally keep scheduled medical appointments, or is that challenging?	
Yes No	Will you be in San Francisco for 12 weeks?	
Yes No	Can you generally be contacted by phone / is there a reliable means of contacting you?	
Yes No	Are there other competing priorities (e.g. housing or other medical challenges) that you think will post a challenge to completing 12 weeks of treatment?	
Yes No	Do you already have a primary care provider? If yes, are you in regular contact?	
Yes No	Do you have any other concerns about completing 12 weeks of treatment or accessing care?	
<u>Other issues to assess if possible:</u>		
Yes No	If the client has other active medical issues (e.g. HIV, diabetes, etc.), are they stable with adherence to other prescribed medications?	
Yes No	If the client has substance abuse and/or mental health issues, is the patient stabilized or engaged in treatment to the point where they can complete 8-12 weeks of treatment?	
Yes No	Has the client eliminated or minimized liver toxins (i.e., alcohol, high-dose acetaminophen) as much as possible? If not, how can they be supported in this?	

PREPARE TO REFER PATIENT TO TREATMENT

- Do you have insurance? Yes | No What type? _____
- Do you have a Primary Care Provider (PCP)? Yes | No Name/Clinic: _____
- When was you last medical visit? Never 0-6 months 6-12 months more than 1 yr
- Would you like your PCP to treat you for hepatitis C? Yes | No
- Do you have ID? Yes | No Type: _____
- Do you have a phone? Yes | No Number: _____
- Instructions for a reliable means of contacting you other than phone (if applicable): _____
- What neighborhood do you live/hang out in? _____
- What is your favorite place to hang out? _____
- Where do you eat? _____
- What is your transportation like? _____

Before referring for treatment, it is helpful to gather information about any of the following, and provide documentation when available. [Explain: If you know some of this information, it can be useful to help move the insurance process along more quickly.] If the client/patient doesn't know this information that is not a problem:

Client State:

- HIV or hepatitis B coinfection
- Active injection drug users (last 3-6 months)
- MSM with high-risk sexual practices
- Type 2 insulin-resistant diabetes mellitus
- Stage 2 or greater hepatic fibrosis/cirrhosis
- Hepatocellular carcinoma (life expectancy >12 mo)
- Extra-hepatic manifestation of hepatitis C
- Pre- and post-liver transplant
- Other coexistent liver disease
- Persons on long-term hemodialysis
- Women Age 18-51, or who are pregnant
- Debilitating fatigue impacting quality of life
- Health care workers who perform exposure-prone procedures
- Porphyria cutanea tarda (skin condition)

Lab Work

- HCV quantitative RNA (<90 days)
- HCV genotype (any time)
- CBC with platelets
- CMP with LFTs (<90 days)
- PT/INR (late-stage liver disease)

- 2 most recent progress notes with HCV adherence counseling notes, HCV treatment naïve or HCV treatment history, medication list, chronic conditions list (active illegal drug use may be scrutinized)
- Face sheet with insurance and patient info

LINKAGE CHECKLIST

- Provider referral**
- Referral for co-occurring issues
 - Medical
 - Psychological/behavioral health
 - Substance Use

- Health Educator
- Appointment reminders
- Accompany client to medical appointments
- Language Supports
- Transportation

NOTES / ASSESSMENT OF POTENTIAL BARRIERS TO ACCESSING SERVICES: