

Background

The University of New Mexico Health System (UNMHS) is New Mexico's academic medical center with the main hub located in Albuquerque, NM. UNMHS is home to over 150 medical specialties, operates over 30 clinics through the state, and receives over 1 million visits annually. In July 2020, UNMHS launched the UNM Hepatitis C Elimination Project; an HCV micro-elimination initiative to ensure all UNMHS patients are appropriately screened and linked to care for HCV. An early goal was to adopt reflex HCV RNA testing to improve quality of HCV testing. This ongoing process improvement is aligned with national and international goals for HCV elimination.

Abstract Title

CLOSING THE GAP: IMPLEMENTING HEPATITIS C REFLEX TESTING WITHIN THE UNIVERSITY OF NEW MEXICO HEALTH SYSTEM

Purpose

One-time, universal Hepatitis C (HCV) screening is recommended for all adults ages 18 and older. Screening is to be performed regardless of risk factors for transmission, such as injection drug use (IDU). Screening should be completed with HCV-antibody testing with reflex to HCV RNA-polymerase chain reaction (PCR) as the initial test. This enables patients and providers to know if a patient has viremia or simply prior exposure to the virus with clearance with or without medication. Antibody-only testing creates an additional risk for gaps in the care cascade.

Material/Methods

The UNM Hepatitis C Elimination Project, a micro-elimination program in a university health system, worked in collaboration with key stakeholders to integrate reflex HCV RNA testing after positive antibody testing into the electronic health record. This replaced antibody-only as the most-used test within care sets and power plans. Analysis was completed to assess the uptake and sustainability of the testing change.

Result(s)

In 2023 there were a total of 973 unique Hep C Reactive Screens in the UNM Health System 476 of the reactive results come from a non-reflex HCV test (Hep C Antibody or Hep Panel) Only 59% of patients received a confirmatory test when a non-reflex test was used. 41% did not receive a confirmatory test with a non-reflex test. 497 of the reactive results come from reflex test (HCVDX) 100% of patients received a confirmatory test when a reflex test was used.

Conclusion(s)

The launch and uptake of reflex testing is pivotal. HCVDX data allows the UNM Hepatitis C Elimination Project to know more about our patient population, develop meaningful metrics for elimination within UNMHS, and allow us to better direct limited resources. Reflex testing is a crucial tool for providers and clinical teams, allowing for easy interpretation of lab results and offering clearer communication between provider and patient. HCVDX has closed the time gap of time of HCV diagnosis to referral through the monitoring of an HCV RNA positive lab result pool. Reflex Testing (HCVDX) is the most ordered test within the UNMHS. Reflex testing is the best available test for HCV screening and automation has been a powerful tool for system-wide uptake of reflex testing. It has proved sustainable over time in a busy university health system with frequent staff changes.