University Hospitals Specialty Pharmacy (UHSP)

- Part of an integrated healthcare delivery network model within University Hospitals Health System (UHHS)
- HCV Patient Management Program
  - Procurement of specialty medications, prior authorizations, refills, foundation and grant support, appeals, patient adherence and monitoring
  - Onsite: pharmacists; patient support advocates; pharmacy technicians
  - Clinic-based ambulatory pharmacists

OBSERVED HCV CASES USA (2001-2016)*

• Of 100 people infected with HCV 2

Study Design

- Retrospective chart analysis of University Hospitals Health Systems HCV patients
- Patient captured using the UHHS Ambulatory Electronic Medical Record (AEMR)
- Timeframe: January 1st 2018 – June 30th 2018

ICELUSION CRITERIA EXCLUSION CRITERIA

- Adult patients (≥18 years old) seen in the UH Hepatology Clinic/Gastroenterology Clinics
- Documented chronic HCV infection present
- Prescription written for HCV treatment with direct-acting antivirals (DAA) and sent to UHSP
- Prescription written between January 1, 2018 and June 30, 2018
- Patients who never started therapy for HCV at UH
- Patients unwilling to comply with insurance pre-HCV treatment requirements
- Patients who discontinued therapy early due to non-compliance or left UHHS
- Pregnant patients
- Patients <18 years old

RESULTS

Study Population (n=147)

<table>
<thead>
<tr>
<th>BASELINE CHARACTERISTICS</th>
<th>TOTAL (n=147)</th>
<th>UHSP PATIENTS (n=63)</th>
<th>NON-UHSP PATIENTS (n=44)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (average, years)</td>
<td>52.7</td>
<td>59</td>
<td>51.3</td>
</tr>
<tr>
<td>Female Patients</td>
<td>59 (40.1%)</td>
<td>18 (28.6%)</td>
<td>24 (54.5%)</td>
</tr>
<tr>
<td>Male Patients</td>
<td>88 (59.8%)</td>
<td>45 (71.4%)</td>
<td>20 (45.5%)</td>
</tr>
</tbody>
</table>

Insurance Distribution (UHSP Patients [n=63])

- 46% Commercial
- 35% Medicaid
- 18% Medicare
- 22% Uninsured

HCV Genotype Distribution (UHSP Patients [n=63])

- Genotype 1: 90.4%
- Genotype 2: 10.6%
- Genotype 3: 0%

HCV Medications Used (UHSP Patients [n=63])

- Sofosbuvir: 60.3%
- Velpatasvir: 22.7%
- Ledipasvir: 17.5%

HCV Treatment Duration (UHSP Patients [n=63])

- 8 weeks: 92%
- 12 weeks: 8.1%
- 24 weeks: 0%

DISCUSSION AND CONCLUSIONS

Success of UHSP HCV Patient Management Program

- Documented adherence ≥Proportion of days covered (PDC) ≥ 91.6%

Common Barriers to HCV Treatment

- External → social issues; high cost; drug procurement; insurance approval
- Internal → treatment adherence; drug-drug interactions; follow-up appointments and labs; co-morbid conditions; HCV progression

STRENGTHS

- Access to medical record, insurance information, copay information
- Specialty pharmacy → integrated in the health system
- UHHS patient characteristics reflect general HCV population
- Clinic-based pharmacist managed patients vs. no clinic­based pharmacist

LIMITATIONS

- Small sample size
- Single-centersed study
- Short duration (6 months)
- Retrospective
- PDC measures possession versus administration (global limitation)

The researchers report no potential or actual conflicts of interest relevant to this poster or research.


