

2023 Chronic Hepatitis C Outreach & Linkage to Care

Hennepin County Public Health Epidemiology



Viral Hepatitis Surveillance in Hennepin County

- Hennepin County conducts our own viral hepatitis surveillance
 - Only county in state to do so
 - Work in close collaboration with Minnesota Department of Health (MDH)
 - Work from a Hennepin County-specific workflow in the state database, MN Electronic Disease Surveillance System (MEDSS)
 - Surveillance work primarily includes acute and chronic hepatitis B & C





Viral Hepatitis Surveillance in Hennepin County

- Newly reported cases:
 - Send a supplemental form to the ordering clinic or provider requesting additional information
 - Returned information will allow us to classify as acute or chronic
 - Chronic cases are essentially closed and exist in database as persons living with viral hepatitis B or C in MN unless we learn otherwise
 - Acute cases are interviewed for some additional information/education



Outreach Work Planning

- Worked with MDH to develop a plan
 - Focus on confirmed and probable chronic cases from 2020-2022
 - Contact cases to conduct conversational phone interview with the following objectives:
 - Are they aware of their test results, have they discussed with their provider?
 - Determine barriers to connecting to care
 - Provide a warm hand off to clinic for interested patients



Linkage to Care

- Connected with Hennepin Healthcare Viral Hepatitis Clinic to develop protocol for warm hand off
 - Our Hennepin Healthcare EMR access allows us to send messages in EPIC directly to their clinic scheduler when we had a patient interested in setting up an appointment
- Also learned we could warm hand off to NACC and CUHCC



Outreach List Development

- Pulled lists of newly reported probable and confirmed cases from 2020-2022 from MEDSS
- Whittled down list of cases by looking cases up beforehand in MIIC and EPIC
 - Many were no longer residents of Hennepin County, were already treated/in specialty care, were incarcerated, or deceased



Probable Case Outreach Summary

- Included newly reported antibody-positive cases from surveillance years 2020-2022
- Call attempts were made in late March/early April 2023
- Each working number received 3 calls including at least 1 voicemail
- 125 cases attempted
 - 78 (62%) LTF (unreachable, wrong/out of service numbers)
 - 10 (8%) refusals
 - 37 (30%) persons interviewed
 - 4 of these were technically refusals but provided enough information to categorize



Probable Case Outreach Summary

- 37 persons interviewed
 - 12 (32%) unaware of result
 - per our records 4 have sought confirmatory testing since our call
 - 9 (24%) aware of result, stated had negative confirmatory testing that was not reported
 - 7 (19%) aware of result, were told by provider that they had a false positive and do not have HCV despite no confirmatory testing performed
 - 5 (14%) aware of result
 - per our records 2 have sought confirmatory testing since our call
 - 3 (8%) aware of result, do not plan to follow up
 - 1 (3%) reported currently getting treated



Confirmed Case Outreach Summary

- Included newly reported HCV RNA-positive cases from surveillance years 2020-2022
- Call attempts were made in mid-July thru early August 2023
- Each working number received 2 calls including at least 1 voicemail
- 198 cases attempted
 - 146 (73%) LTF (unreachable, wrong/out of service numbers)
 - 23 (12%) refusals
 - 30 (15%) cases interviewed



Confirmed Case Outreach Summary

- 30 cases interviewed
 - 12 (40%) cases referred to Hennepin Healthcare Viral Hepatitis Clinic
 - 5 no-showed for scheduled appts
 - 2 have PA approval but haven't started meds
 - 2 awaiting PA approval
 - 1 was referred but scheduling could not reach
 - 1 currently being treated
 - 1 had pre-visit testing and had a negative antibody test



Confirmed Case Outreach Summary

- 18 remaining cases
 - 6 plan to follow up with PCP
 - 4 have been referred to a specialist but haven't scheduled an appointment
 - 2 reported already treated just no post-treatment labs
 - 2 reported are engaged in specialty care but haven't started treatment
 - 2 stated they are not ready to engage in care (1 specifically listed stable housing as a barrier)
 - 1 moved away from Hennepin County but plans to engage in care
 - 1 reported spontaneous clearance (negative RNA test performed out of country)



Barriers Noted

- Insurance coverage/cost
- Housing
- Concerns about medication side effects
- "I don't go to doctors"
- Many people just needed a little push/help to engage with care



Final Thoughts & Future Work

- Outreach was appreciated by most people we reached
- Incorporate outreach work into regular viral hepatitis work;
 contact newly reported persons from previous reporting year
- Connect with more treating providers/clinics to develop warm hand-off protocol to fit broader range of patient needs



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Hennepin County Hepatitis B Data Dashboard Hennepin County Hepatitis C Data Dashboard

Thank You!

