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Enhanced Identification and Care for Patients with Undetected HCV and/or HIV via Opt-Out ED Screening with Active Education and Linkage to Care

Infectious diseases continue to be significant and growing concerns for public health. Hepatitis C Virus (HCV) and Human Immunodeficiency Virus (HIV) are of particular concern as they are often underdiagnosed, and therefore left untreated. The World Health Organization estimates that approximately 81% of people living with HCV do not know they are infected, and 19% of HIV positive individuals are also unaware of their status. As such, there is a global focus on the elimination of these debilitating viruses.

A key to success in containment and prevention is the identification of individuals with unknown disease, and successful treatment. Lack of disease awareness and access to appropriate care can significantly impact timely treatment, and ultimately lead to disease spread, high morbidity and even mortality. Thus, identifying individuals with HCV and HIV, and linking them to appropriate care is vital. Linkage to care can be especially complicated in high risk and underserved populations, particularly for those who utilize emergency care services as their primary healthcare option.

With a goal to change this paradigm, an integrated clinical care team at the University of Alabama-Birmingham (UAB) Hospital sought to enhance identification and care for patients with undetected

HCV and HIV by developing and implementing an opt-out screening program in the emergency department (ED), coupled with diseasespecific care linkage services.

Results of this integrated approach has resulted in the identification of 2,349 HCV RNA+ individuals and 195 individuals with newly diagnosed HIV infections, with dedicated care coordinators facilitating enhanced patient engagement and sustained care, as appropriate. Additionally, 99 known HCV positive individuals previously identified by HCV antibody testing were re-engaged to care. Implementation of the care coordination and improved access to HCV providers led to a 91% reduction in the average days between testing and initial medical appointments, enabling rapid treatment, and reduced overall healthcare costs.

For their impact on public health and important patient outcomes, this integrated clinical care team was awarded a 2020 UNIVANTS of Healthcare Excellence award with recognition of Distinction. Congratulations to the leaders of this initiative Joel Rodgers, *HIV/HCV Testing and Linkage Program Manager*, Ricardo Franco, *MD, Infectious Disease*, Sherichia Hardy, *MPH, BSN, RN, CNL*, Sonya Heath, *MD, HIV/HCV Testing and Linkage Program Co-Director*, Sherry Polhill, *MBA, MT(ASCP)CM, Directory, Laboratory*, Wendy Tissier, *Senior Director, Clinical Informatics*.

97%

of acutely infected
HIV individuals are
LINKED TO CARE

61%

INCREASE

in patients with previously
undetected HCV infection

76%

REDUCTION

in healthcare costs

KEY TAKEAWAYS

1. Highly sensitive HCV and HIV Immunoassays enable early antigen and antibody detection for rapid turnaround and communication of results.
2. Implementation of opt-out screening for HCV/HIV in the ED can identify undiagnosed infections in under-served and high-risk individuals, link infected individuals to appropriate care, and help reduce downstream transmission events.
3. Care coordinators can facilitate enhanced linkage to care, improving health by ensuring that patients with identified disease receive care.