



The Hepatitis C Care Management Program: Nephrologist Overview



Our Goal

GOAL

To eradicate HCV in our population to the greatest extent possible

If we achieve this goal while educating our patients and staff on preventing the spread of hepatitis C, we may eradicate it from our clinics.



Hepatitis C Evaluation and Treatment Algorithm

The Algorithm outlines steps for the evaluation and treatment of a patient with active Hepatitis C virus.

- **Confirmation of Hepatitis C Virus - Physician Discusses Diagnosis with Patient** – HCV Ab with Reflex to Confirmation Reactive, active virus present
- **Active Kidney Transplant Status** – Determination of treatment based on Transplant Team's recommendations.
- **Hospice** – If the patient is in Hospice, discontinue the algorithm.
- **Confirm the Treatment Decision with the Patient** – Confirm the patient's decision regarding Hepatitis C treatment and obtain consent for HIV testing.
- **Obtain Labs** – Continue Hepatitis C Treatment evaluation with lab draw.
- **Identify Hepatitis C Genotype** – Based on the identified Genotype, algorithm directs next steps for treatment evaluation
- **Based on lab results** – Evaluation for treatment continues per algorithm or with referral to Specialist.
- **Prescription is provided to Patient** – Based on Hepatitis C Evaluation, a prescription for Zepatier may be indicated.
- **Hepatitis C Care Coordination Team** – Assists with medication authorization process.
- **Monitoring and Follow up** - Based on treatments, algorithm directs follow-up monitoring and lab draws.



Referral of Patients to a Specialist

Per the Evaluation and Treatment Algorithm, patients who will be referred to hepatology specialist include:

- Hepatitis C genotype 2,3,5,or 6
- HIV positive
- Hepatitis B positive
- Need for treatment with Ribavirin
- Contraindication due to other drug therapy
- Pediatric Patients (under age 18)

If severe liver fibrosis and decompensated cirrhosis, as indicated by:

- APRI score of >0.4 ,
- Platelet count $< 150,000$
- PT/INR >2 ,
- Total Bilirubin >2.0 mg/dL
- Child–Pugh B or C

the patient will be referred to hepatologist for evaluation **prior to treatment**.

If APRI is >0.4 but the patient does not have decompensated cirrhosis, the patient **will begin treatment** and a referral to hepatology made.



Treatment with Zepatier

Adult patients in our clinics who are infected with hepatitis C **genotypes 1A and 4** may be treated using Zepatier.

One tablet contains:

- 50 mg elbasvir (HCVNS5A inhibitor)
- 100 mg grazoprevir (HCV NS3/4A inhibitor)

Recommended dosage:

One tablet taken orally
once daily with or
without food

Cannot be split or
crushed



Drug Contraindications

Zepatier is contraindicated for patients who:

- Have been previously treated for hepatitis C
- Are currently taking one of the following contraindicated class of medications.

Drug Class	Example
Anticonvulsants	Phenytoin; Carbamazepine
Antimycobacterials	Rifampin
Herbal Products	St. John's Wort
HIV Medications	Efavirenz; Atazanvir; Darunavir; Lopinavir; Squinavir; Tipranavir
Immunosuppressants	Cyclosporine

For patients whom Zepatier is contraindicated, the FreseniusRx pharmacist can work with the MD to see if alternative medications may be used.



Hepatitis C Care Coordination Team Key Benefits

FreseniusRx has developed a multidisciplinary program to help ensure the ease and effectiveness of hepatitis C treatment for our patients.

The Hepatitis C Care Coordination Team (CCT) will assist with:

- Monitoring drug-drug interaction and safety
- Patient counseling and monitoring patient compliance

If FreseniusRx is chosen as the patient's pharmacy:

- Secure delivery of medications
- Support for Prior-Authorization and Medical Necessity



FreseniusRx Specialty Pharmacy Benefits

Secure medication delivery to clinic^{*}

*Where Available

E-Prescribe or Fax to FreseniusRx – Florida

- Please identify in notes where to send Prior Authorization Forms (Office, Clinic, Other)
- Support for Prior Authorization and Medical Necessity

Ongoing Medication Monitoring

- Contraindicated therapies
- Drug-Drug Interactions
- Access to Home and Clinic medications

Unique ability to monitor patient medication regime and adherence due to coordinated care team model and consistent interaction with patients in clinic.



Facility Support



Hepatitis C Program Support

Expert Resources are available to answer your questions and advise on medical issues:

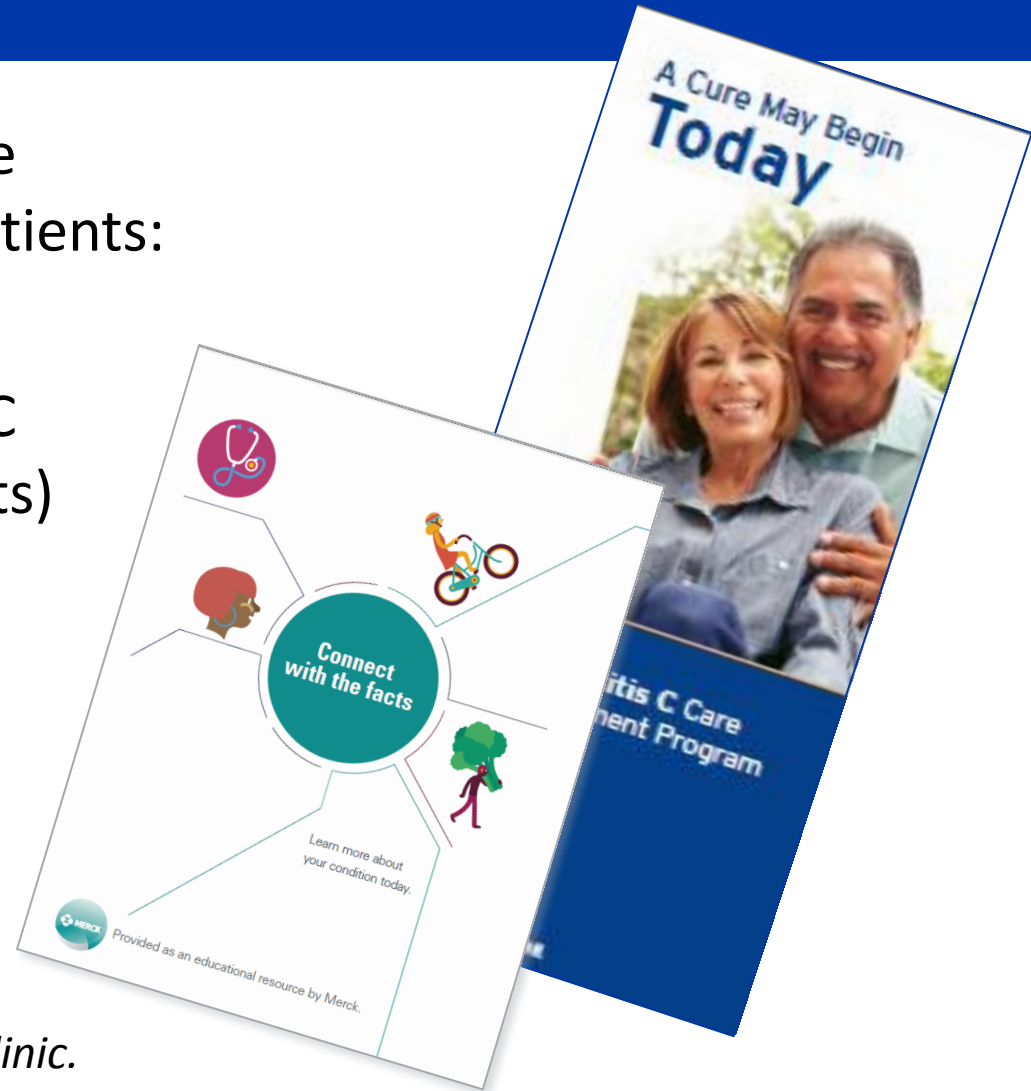
- Hepatologists associated with the SC Liver Foundation for general consult and Q&A.
- Nationwide Network of Pre-identified Specialists are available to Refer Fresenius Medical Care patients for priority appointments.
- Fresenius Medical Care Medical Office Members
- Merck Medical Science Liaisons
- Hepatitis C Care Management Program Advisors

**Contact Hepatitis C Care Coordination Team
for All Support Requests:
HepC-Support@fmc-na.com or 1-800-801-1496**

Patient Education

Patient education materials are available to share with your patients:

- *Connect With the Facts* - discusses general Hepatitis C facts (for all Reactive Patients)
- *A Cure May Begin Today* – describes treatment of Hepatitis C (for treatment eligible patients)



Will be provided to you at the Patient's clinic.



Nephrologist Points of Engagement

1

Order HCV Ab with Reflex to Confirmation lab

2

Order algorithm

3

**Discuss diagnosis with patient and
provide educational materials**

4

Follow evaluation and treatment algorithm

5

**Write medication prescription, based on treatment
evaluation.**

6

**Follow patient during treatment with help of clinic
staff and Hepatitis C CCT**

Care Coordination with Specialists

The Hepatitis C Care Management Program supports Care Coordination with Specialists.

Fresenius Medical Care Clinics Available for Hepatitis C Monitoring Lab Draws

- Orders from specialists will need to be provided to clinic via nephrologist.
- Results will be sent to Nephrologist and Specialist

FreseniusRx as Specialty Pharmacy

- Specialists can e-Prescribe to FreseniusRx



Hepatitis C May be Curable

A cure is defined as **sustained viral response (SVR)** –The absence of detectable viral RNA with an assay sensitive to 25 IU/mL or less for 12 weeks after completion of treatment.*

*AASLD/IDSA HCV Guidance Panel. *Hepatology*. 2015;62:932-954.

