Hepatitis C Treatment Completion: Real-World Experience Compared to Measure Assumptions
Ann McNamara, PharmD; Holly Budlong, PharmD, PhD; Ross Otto, MBA; Jesse Peterson, PharmD, MS; Daniel Jude, PharmD, AAHPV, CSP
Fairview Pharmacy Services, Minneapolis, MN

BACKGROUND
- Hepatitis C virus infection remains a major concern worldwide
- An estimated 2.2-3.2 million Americans have chronic hepatitis C infection
- Recent advancements in treatment options for hepatitis C cure true rates above 90% when appropriately deemed
- Fairview Specialty Pharmacy performs onboarding process before treatment initiation

OBJECTIVE
Describe the real-world hepatitis C treatment completion and compare findings with published measure specifications

METHODS
- We evaluated treatment completion rates for 1,216 patients with hepatitis C who received their first-fill of a direct acting antiviral from Fairview Specialty Pharmacy between 1/1/2016 and 12/31/2016
- Patients were excluded if:
  1. Intended duration of therapy was not documented
  2. Less than 16 years of age at the first-fill
  3. Transferred from Fairview to another pharmacy
  4. Compliance was not calculated using:
     a. Internal documentation completion determined by internal treatment duration monitoring (observation number of fills and patient or provider verification)
     b. Published specifications completion determined by minimum duration of therapy and less than 30-day consecutive gaps in refill supply
     c. Next eligibility requirements could not be utilized due to data source of dispensing data
     d. Reason for difference between these two were evaluated and described
- Conclusions were drawn from the real-world hepatitis C treatment completion rates

RESULTS
- Overall, 1,216 patients met inclusion criteria using dispensed data alone (Figure 3)
- Patients had a mean age of 58.1 years and 78% had previously 1 hepatitis C
- Our internal documentation methodology included an additional 17 patients who transferred to another pharmacy during their hepatitis C treatment (Figure 3)
- Among the 1,233 patients, 44.8% had intended treatment duration greater than the minimum duration
- The more common treatment regimen was ledipasvir/sofosbuvir (N=840) and 58% of patients had a regimen with an intended duration greater than the minimum duration (Figure 3)
- Treatment completion rate using our internal documentation was significantly higher than the rate using the published specifications

CONCLUSIONS
- Hepatitis C treatment completion rates determined by dispensing data alone may not provide a comprehensive description of treatment experience and relying on minimum treatment duration may only accurately capture those who complete their treatment
- We were able to confirm that 98 of the 118 (83.6%) patients excluded from numerator using published specifications had not completed therapy
- More than 90% of the patients excluded due to gap criteria had an appropriate gap between their 2nd and 3rd fills, suggesting that the gap criteria may be appropriately excluding patients from the numerator to lower treatment completion rates in real-world settings and that these patients likely completed therapy
- The real-world treatment benchmarks between the two methods highlight potential inconsistencies for pharmacies relying on dispensing data alone to meet hepatitis C treatment completion rates

REFERENCES

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