


Leveraging Electronic Health Records and Specific Demographic Data to Screen for Hepatitis B in a Community Health Center

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Presenter Disclosures

Eve Waltermaurer, PhD

(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose



The Institute for Family Health


- 17 full-time Federally Qualified Health Centers (FQHC) in NYC and upstate NY
- 2 School based health programs
- 4 Dental centers
- 2 Mental health centers
- 2 Free clinics
- 8 Homeless healthcare sites
- 2 Family Medicine Residency Programs
- >300,000 patient visits
- 90,000 unique patients
- 14% uninsured, 44% publicly insured






Hepatitis B

- Approximately 800,000 – 1.4 million infected in US
- Vaccine preventable
- 2008: approximately 38,000 new infections
- 90% of those infected perinatally develop chronic Hepatitis B
- 1 in 4 of perinatally infected people will die of complications from Hep B
- Most who are infected perinatally are from Hep B endemic countries



DHHS Action Plan on Hepatitis 2011:


- an increase in the proportion of persons who are aware of their hepatitis B virus infection, from 33% to 66%;*
- an increase in the proportion of persons who are aware of their hepatitis C virus infection, from 45% to 66%;*
- a 25% reduction in the number of new cases of HCV infection; and
- elimination of mother-to-child transmission of HBV.




U.S. Department of Health & Human Services

COMBATING THE SILENT EPIDEMIC
OF VITAL BENEFITS

Action Plan for the
Prevention, Care & Treatment
of Viral Hepatitis




Statement of Problem:



The USPSTF **recommends against** routinely screening the general asymptomatic population for chronic hepatitis B virus infection.

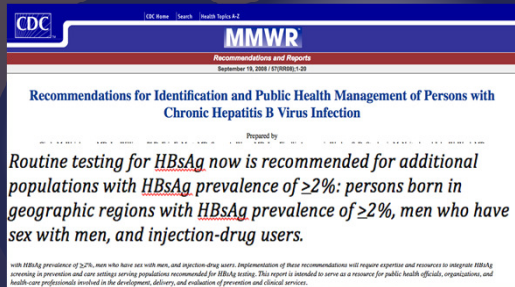
Rating: **D Recommendation.**

Rationale: The USPSTF found no evidence that screening the general population for HBV infection improves long-term health outcomes such as cirrhosis, hepatocellular carcinoma, or mortality. The prevalence of HBV infection is low, the majority of infected individuals do not develop chronic infection, cirrhosis, or HBV-related liver disease. Potential harms of screening include labeling, although there is limited evidence to determine the magnitude of this harm. As a result, the USPSTF concluded that the potential harms of screening for HBV infection in the general population are likely to exceed any potential benefits.




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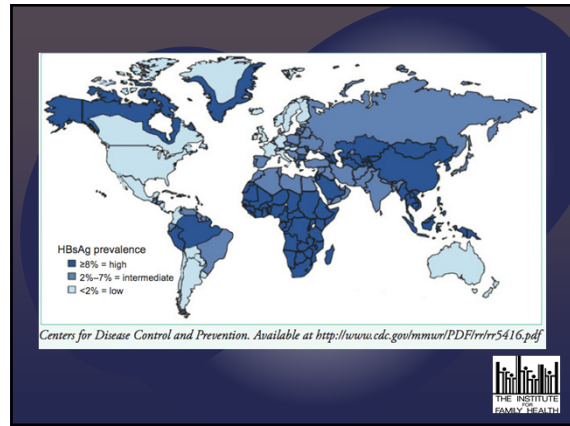
But...



Recommendations for Identification and Public Health Management of Persons with Chronic Hepatitis B Virus Infection

Routine testing for HBsAg now is recommended for additional populations with HBsAg prevalence of $\geq 2\%$: persons born in geographic regions with HBsAg prevalence of $\geq 2\%$, men who have sex with men, and injection-drug users.


Centers for Disease Control and Prevention. Available at <http://www.cdc.gov/mmwr/PDF/rr/r5416.pdf>



Race, Ethnicity, and Language Data: Standardization for Health Care Quality Improvement

Institute of Medicine (IOM); August 2009

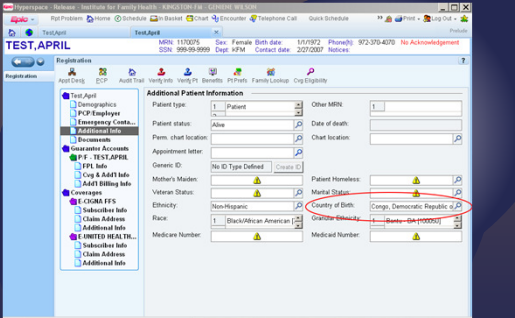
“A lack of standardization of categories for race, ethnicity, and language data has been suggested as one obstacle to achieving more widespread collection and utilization of these data. Many types of entities participate in initiatives to improve the quality of health care; health plans, hospitals, other providers, and health systems can and should obtain race, ethnicity, and language data so these data can be used to identify gaps and improve care for all individuals..”



Source: IOM Report: Race, Ethnicity, and Language Data: Standardization for Health Care Quality Improvement

Institute of Medicine's Recommended Variables for Race, Ethnicity and Primary Language (2009)

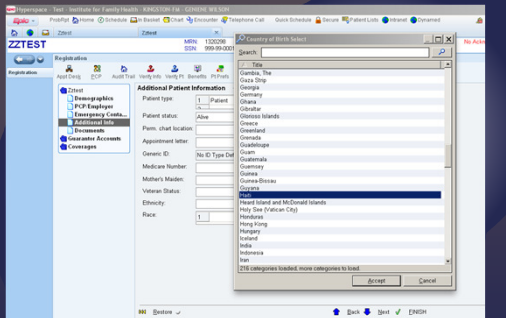
Race and Ethnicity	Spoken English Language Proficiency
<p>OMB Hispanic Ethnicity*</p> <ul style="list-style-type: none"> Hispanic or Latino Not Hispanic or Latino 	<ul style="list-style-type: none"> Very well Well Not well Not at all <p>(Limited English proficiency is defined as "less than very well")</p>
<p>OMB Race (Select one or more)</p> <ul style="list-style-type: none"> Black or African American White Asian American Indian or Alaska Native Native Hawaiian or Other Pacific Islander Some other race† 	<p>Spoken Language Preferred for Health Care</p> <ul style="list-style-type: none"> Locally relevant choices from a national standard list of approximately 600 categories with coding to be determined *"Other, please specify..." response option †Rollup to the OMB categories



TEST, APRIL

Race: 1 [Black/African American]

Ethnicity: 1 [Other Hispanic or Latino]

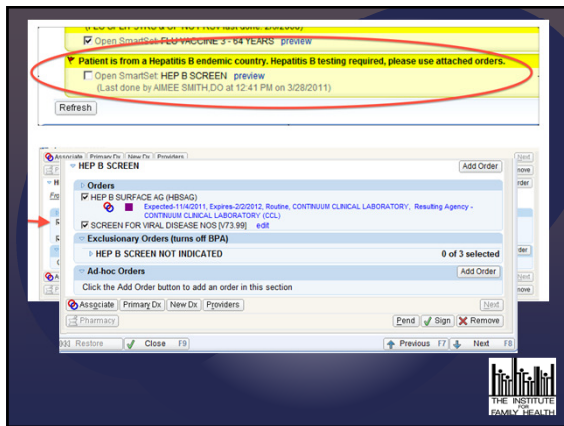


ZZTEST

Quality of Birth Select

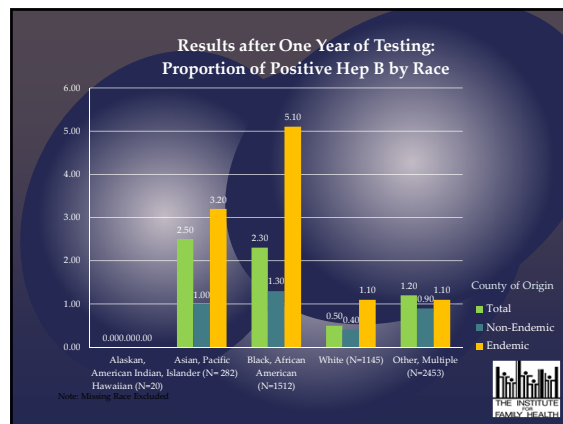
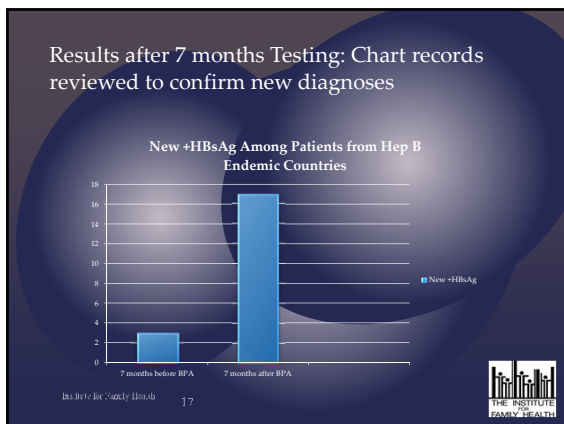
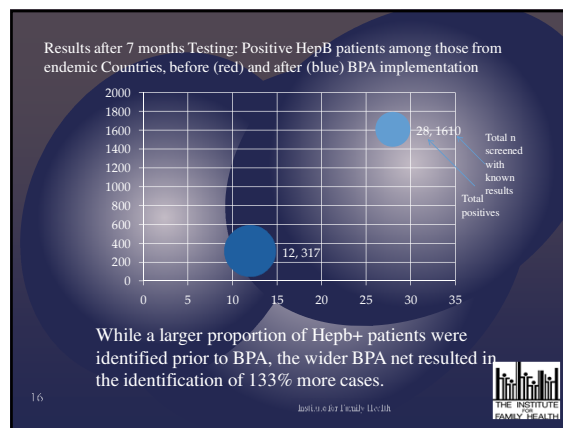
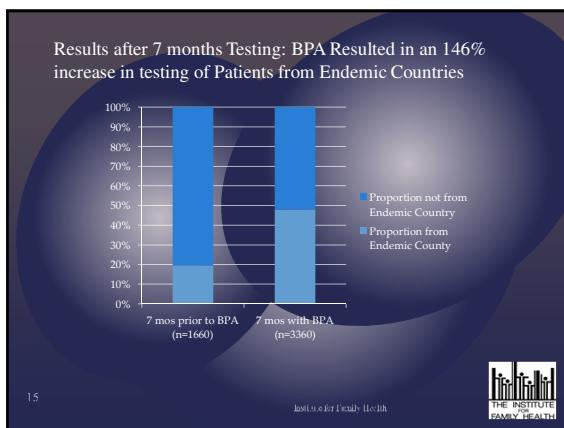
- United States
- Canada
- Germany
- France
- United Kingdom
- Spain
- Italy
- Japan
- China
- India
- South Korea
- Other

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Results after 5 Months: Response to alert by use of attached order set

- 32,515 Fires Occurred
- 3,962 were acknowledged
- 785 had test ordered directly from alert
- 10 previously unknown cases of Hepatitis B identified (1.3%) based on chart review




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One Year Relative risk of HepB among patients seen after BPA initiation

	HepB +	HepB-
From Endemic Country	49 (1.8%)	2676
Not from Endemic Country	30 (0.9%)	3230

Risk Ratio = 1.95 (1.24-3.07)
 There is a 2-time increased likelihood of HepB among those from endemic countries compared with those who are not



New Hep B BPA includes other immigrant screening tests




Ins.B11 (Rev. 7/2014) 20



Future Directions:

- Initiatives to bring hepatitis training to IFH residency programs
- Continue provider education efforts on hepatitis
- Positive Hep B smartset to help manage chronic Hep B patients

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Online Tools for Providers:

- <http://www.soapnote.org/infectious/hepatitis-b-chronic/>
- <http://www.cdc.gov/hepatitis/Resources/Professionals/training/Serology/training.htm>
- <http://www.aafp.org/online/en/home/publications/news/news-now/health-of-the-public/20120201immunrecs.html>



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