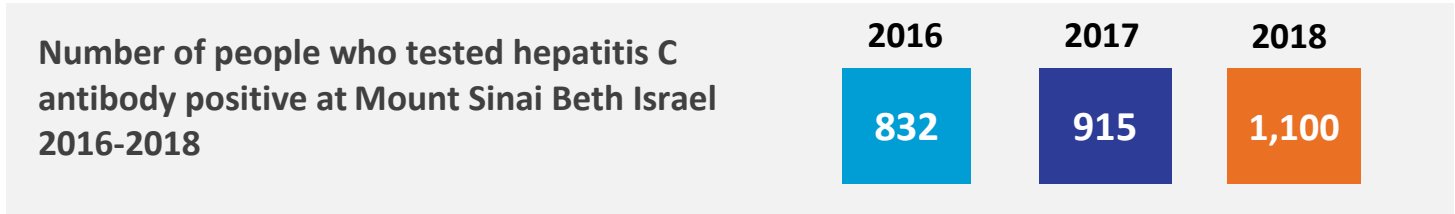# Hepatitis C Testing and Treatment Dashboard
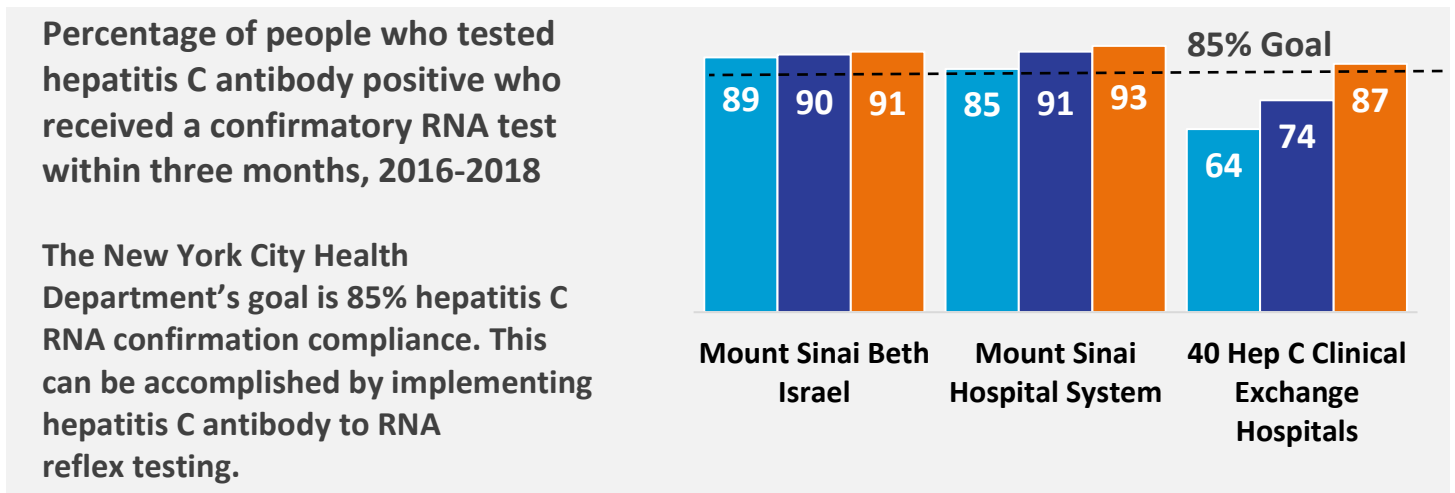## Mount Sinai Beth Israel*
### 2016-2018 New York City Health Department Surveillance Data
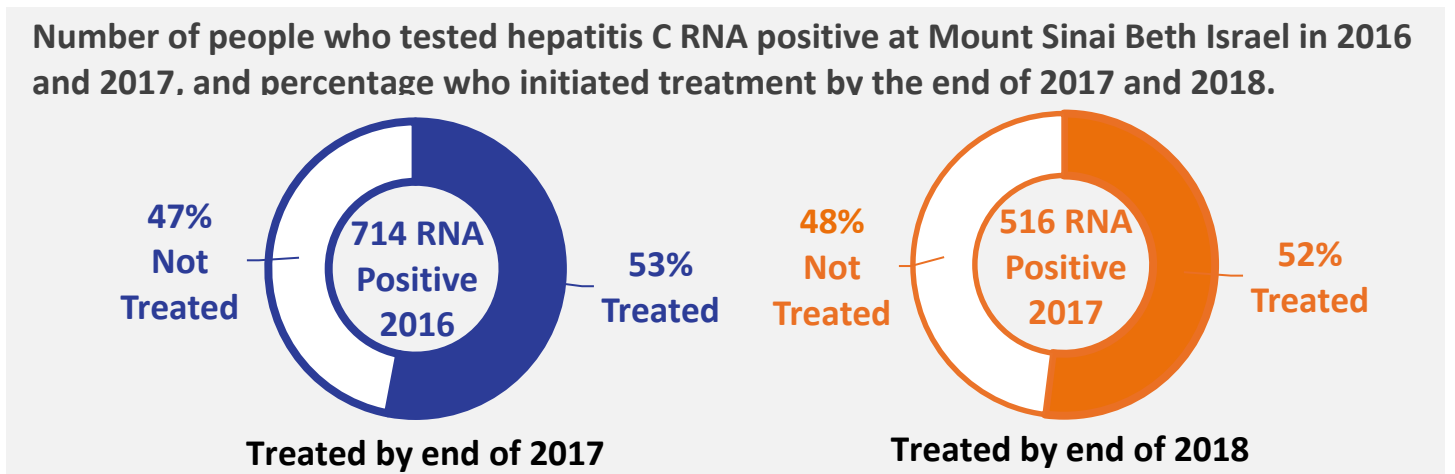
## Hepatitis C Antibody Testing

Number of people who tested hepatitis C antibody positive at Mount Sinai Beth Israel 2016-2018

| 2016 | 2017 | 2018 |
|------|------|------|
| 832  | 915  | 1,100 |

## Hepatitis C RNA Confirmatory Testing

Percentage of people who tested hepatitis C antibody positive who received a confirmatory RNA test within three months, 2016-2018

The New York City Health Department's goal is 85% hepatitis C RNA confirmation compliance. This can be accomplished by implementing hepatitis C antibody to RNA reflex testing.

85% Goal

| | Mount Sinai Beth Israel | Mount Sinai Hospital System | 40 Hep C Clinical Exchange Hospitals |
|------|------|------|------|
| 2016 | 89 | 85 | 64 |
| 2017 | 90 | 91 | 74 |
| 2018 | 91 | 93 | 87 |

## Hepatitis C Treatment Initiation

Number of people who tested hepatitis C RNA positive at Mount Sinai Beth Israel in 2016 and 2017, and percentage who initiated treatment by the end of 2017 and 2018.

714 RNA Positive 2016 — 47% Not Treated — 53% Treated
**Treated by end of 2017**

516 RNA Positive 2017 — 48% Not Treated — 52% Treated
**Treated by end of 2018**

*For 2018, data for outpatient sites were removed from the main hospital's data. This update may explain the change from previous year.

**Data source:** New York City Health Department Surveillance.
To read the "Hepatitis A, B and C in New York City: 2017 Annual Report," visit nyc.gov/health and search for **hepatitis**. For more information about the dashboard, email **hep@health.nyc.gov**.

# Frequently Asked Questions

1. **What is the Hepatitis C Dashboard?** The Hepatitis C Dashboard is a tool for measuring the quality of hepatitis C care being delivered to New York City (NYC) residents at acute care hospitals. It can be used by hospitals to monitor care, measure outcomes, compare rates across hospitals and advocate for change.

2. **What indicators are included in the Dashboard?** The Dashboard includes three indicators: antibody testing, RNA confirmation rates and treatment initiation rates.

3. **How are the Dashboard data generated?** NYC clinical laboratories report all hepatitis C antibody positive tests, all positive and negative hepatitis C RNA tests, and genotype tests through an automated electronic laboratory reporting system to the New York City Health Department's Hepatitis Surveillance Registry.

4. **How are test results assigned to each hospital?** Hospitals are assigned a patient test result based on the address of the ordering facility reported to the surveillance registry. To receive the list of addresses attributed to your hospital, email hcvdashboard@health.nyc.gov.

5. **How are hepatitis C RNA confirmation rates estimated?** Data for RNA confirmation rates are generated from the surveillance registry using the following criteria:
   - The denominator includes all people with positive hepatitis C antibody test result at an acute care hospital or affiliated clinics in the preceding calendar year.
   - The numerator includes people who received at least one hepatitis C RNA test at the same facility within three months of at least one positive antibody test.

6. **How are treatment initiation rates estimated?** Treatment initiation rates are generated from the New York City Health Department's surveillance registry using the following criteria:
   - The denominator includes all people whose last positive hepatitis C RNA test result in the preceding calendar year was performed at an acute care hospital or affiliated clinics.
   - The numerator includes people who received a subsequent negative hepatitis C RNA test result from the same facility or from any other NYC facility within the defined period and any past history of a positive hepatitis C RNA test with a high viral load (≥1,000 IU/mL).[1]

7. **What is reflex RNA testing?** Reflex RNA testing means that a lab will automatically perform a hepatitis C RNA test if the result of the hepatitis C antibody test is positive. This may be achieved by using the same specimen or a second specimen collected at the same time as the initial specimen. Reflex testing eliminates the need to recall the patient for a second test and facilitates completion of the Recommended Testing Sequence for Identifying Current Hepatitis C Infection outlined by the Centers for Disease Control and Prevention (CDC): health.ny.gov/diseases/communicable/hepatitis/hepatitis_c/docs/reflex_testing_letter.pdf.

8. **What does the Health Code require?** In October 2017, Article 13 of the New York City Health Code was amended to require laboratories to routinely perform a confirmatory hepatitis C RNA test when there is a positive hepatitis C antibody test result. The text of the adopted rule can be found on the NYC Rules website: rules.cityofnewyork.us/content/amendment-clinical-laboratories-article-13-nyc-health-code-regarding-performance-0.

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[1] Moore MS, Bocour A, Jordan L, et al. Development and Validation of Surveillance-Based Algorithms to Estimate Hepatitis C Treatment and Cure in New York City. *Journal of Public Health Management and Practice*. 2017:1. doi:10.1097/phh.0000000000000688.