**Feasibility Assessment for Capturing and Reporting Chronic Hepatitis C Virus (HCV) Infection Sustained Virological Response (SVR)**

Achieving SVR is the first step toward reducing future HCV morbidity and mortality. Once achieved, SVR is associated with long-term clearance of HCV infection, which is regarded as a virologic ‘‘cure’’ and improved morbidity and mortality. Patients who achieve SVR usually have improvement in liver histology and clinical outcomes.

The AGA is trying to determine the feasibility of reporting the above SVR outcome to the appropriate governing body. By answering the questions below, we will understand the difficulty collecting the data and reporting on this HCV SVR measure. We will use this data in our measure development efforts.

**Please answer the following questions regarding your practice:**

1. What is the name of your practice?
2. How many providers work in your practice?
3. Is your practice integrated into a larger health system? If so, what is the name of that health system?
	1. Does your health system include an infectious diseases practice?
	2. Does that infectious disease practice also manage patients with chronic HCV infection?
4. What is the name of your EHR (please enter brands/names of all EHRs you use)?
5. Does your practice own the EHR and/or can generate reports directly from the EHR? Or do you need to ask a hospital to run reports from the EHR?
6. How many clinical facilities/hospitals does your practice work with?

**Does your health system have a centralized quality office? Or does your practice report quality outcomes separately? The chronic HCV SVR measure requires several individual data elements, so we need to know how easy or hard it is to capture these. Things we are looking for include whether you routinely capture the information as part of your work, whether this information in entered into your EHR, and if so, how easy it is to get the data back out. Below is a list of all the data elements needed for the chronic HCV SVR measure. Please complete the table for the listed data elements:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Data Element** | **Do you routinely capture this information already as part of your work?** | **Is this information available in your EHR?** | **How does this information show up in the report: as text/notes or in defined data fields (e.g. dropdown box)?** | **Are the data captured using codes (eg SNOMED, LOINC, ICD-10)?** | **Is the data a result of clinician assessment or self-reported by the patient?** |
| Diagnosis: Chronic HCV Infection |  |  |  |  |  |
| Diagnostic test performed: HCV Ribonucleic acid (RNA)  |  |  |  |  |  |
| Patient Encounter Code |  |  |  |  |  |
| Patient reason SVR testing not performed/ordered (see below)\* |  |  |  |  |  |
| Medical reason SVR testing not performed/ordered (see below)^ |  |  |  |  |  |

\*Patient reason SVR testing not performed includes but is not limited to: patient declined testing, patient refused treatment, patient lost to follow up

^Medical reason SVR testing not performed includes but is not limited to: patient treatment discontinued early, not covered by insurance, patient death

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**Appendix A: Relevant Codes**

**Chronic Hepatitis C Infection ICD-10 codes:**

B18.2 - Chronic viral hepatitis C

B19.20 - Unspecified viral hepatitis C without hepatic coma

B19.21 - Unspecified viral hepatitis C with hepatic coma

**Patient Encounter CPT Codes:**

99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

**HCV quantitative RNA CPT Codes:**

87522