

Will a peer-led telehealth model of care significantly increase HCV treatment initiation?



Participants: 203 adults in rural Oregon (USA) who were HCV positive and who had injected drugs or recently used non-prescribed opioids.



Intervention: Peers helped with navigating insurance approvals, attending telemedicine appointments, medication delivery and storage, adherence support, and accessing needed social services (e.g. housing). A clinical team provided same-day telemedicine appointments and discussions with peers on patient concerns.



Comparator: Peer-assisted referral to local providers (enhanced usual care).

