Title: The effectiveness of financial incentives for increasing uptake of hepatitis C treatment in primary care: results from the MOTIVATE C trial

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Background:
Almost all Australians living with hepatitis C virus (HCV) are eligible for direct-acting antiviral (DAA) therapy with low out-of-pocket cost, yet uptake remains suboptimal. Financial incentives may help overcome patient- and provider-level barriers to DAA access. MOTIVATE-C was designed to evaluate the effectiveness of financial incentives of varying value for increasing HCV treatment initiation in primary care.

Methods
MOTIVATE C is a pragmatic, sequential, Bayesian adaptive dose-ranging trial conducted across Australia. Medicare-eligible adults self-identifying with untreated HCV registered via an SMS-based system. Participants were randomly assigned a financial incentive ranging from AUD 0 to AUD 1,000, payable on DAA initiation within 12 weeks of registration; participants' prescriber was randomised to AUD 100 co-incentive or no co-incentive. Project navigators supported enrolled participants to connect with their nominated primary care clinician or a trial-affiliated prescriber. The primary endpoint was DAA initiation within 12 weeks, verified by sighting the dispensed medication. Using pre-specified rules, the ratio of allocation to alternative incentive values was adapted over the course of the trial based on observed variation in the rates of treatment initiation. Bayesian statistical modelling will characterise the relationship between incentive value and probability of treatment initiation.

Results
Between 15 May 2023 and 01 Oct 2025, 1,147 participants were randomised; 70% (805/1,147) contacted a navigator and were assessed for eligibility. Subsequently, 60% (691/1,147) received navigational support and of these, 53% (364/691) initiated

DAA treatment. Of those assessed for sustained viral response, 95% (138/145) were non-viraemic ≥4 weeks post-treatment completion. All participants had primary endpoint ascertainment at abstract submission. The probability of DAA initiation at each incentive value will be presented at the conference.

Conclusion: MOTIVATE-C will provide robust evidence on the impact of financial incentives on HCV treatment initiation in primary care when used as part of a navigator supported treatment program.

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