

Utilizing Claims Data to Identify the Drivers of Disparities in Health Care Journeys

cardiac health

Significant racial disparities for prevalence of clinically diagnosed atrial fibrillation (AFib) in the US are well documented. Prevalence of diagnosed AF is highest among non-Hispanic White (NHW) populations. However, **AF risk factors** such as **hypertension, obesity, and diabetes** are more common among non-Hispanic Black (NHB) populations and populations with higher social needs.

Accelerate Health Equity (AHE) and Independence Blue Cross (IBX) have begun analyzing claims data in Philadelphia to help reduce disparities in cardiac health care. This research aims to **describe disparities in AF diagnosis among IBX members by both patient-level characteristics and neighborhood-level social determinants of health.***

findings

- 5.1% of IBX members were diagnosed with AFib during our study period (2018-2021)
 - 5.6% of NHW members and 4.1% of NHB members were diagnosed with AF
 - 4.9% of low SBI members, 5.4% of medium SBI members, 5.2% of high SBI members were diagnosed with AFib
- Racial disparity of age-adjusted AF diagnosis was largest among members that lived in most disadvantaged neighborhoods
 - Age-adjusted AFib diagnosis rate in the high sbi: 53/1000 NHW people vs 31/1000 NHB people
- These disparities in AFib diagnosis existed even among members who **received regular primary care visits and members who had continuous insurance coverage**
- When looking at members with AFib associated claim, **NHB members diagnosed with AFib were less likely to have continued AFib claims than NHW members** — this trend was visible across health systems in the greater Philadelphia area
- Significant differences in post-diagnosis AFib-related management and treatment such as **catheter ablation, cardioversion, and maze procedures by race and SDOH were not observed** in our study population
- **58% of members diagnosed with AFib were prescribed an anticoagulant during the study period. NHW members were slightly more likely to be prescribed an anticoagulant than NHB members (58% vs 55%)**

recommendations

proposed intervention



Given our findings, we encourage **providers to talk to all patients about AFib, including those in more disadvantaged neighborhoods, and recommend educating providers about these disparities in AF diagnosis rates.**

next steps

- **Expand the research to other cardiac conditions** such as Acute Myocardial Infarction
- Understand **why anticoagulant prescription rates are lower than anticipated**