Regional Variation in Patient Characteristics and Treatment Patterns for Over 17 Million **COVID-19** Patients in the United States

Objective

• This study described the regional variation in demographic and clinical characteristics as well as treatment patterns among COVID-19 patients receiving treatment in the US.

Conclusions

- Less than one in five of the total reported US COVID-19 patients had a medical claim with diagnosis of COVID-19; a higher burden of treated COVID-19 patients was observed among patients from the Northeast and South US regions.
- Younger adults (aged 18 to 44 years) within each US region accounted for a large proportion of the treated COVID-19 patients.
- Conditions related to metabolic syndrome including essential hypertension, hyperlipidemia, type 2 diabetes mellitus were among the most common significant comorbid conditions among treated COVID-19 patients with highest prevalence among patients from South US region.
- Despite the high overall number of treated COVID-19 patients, utilization of COVID-19 specific approved and unapproved medications were low nationwide, with lowest utilization observed in Northeast US region.

Limitations

- Limitations regarding study design and data sources should be considered while interpreting the results from this analysis
- Pre-adjudicated open-source claims databases like Dx and LRx are assumed to have missing data compared with closed claims databases thereby resulting in under-reporting of some diagnoses and medication use.
- Additionally, claims data, in general, are subject to incomplete or inaccurate coding, missing data, and the lack of specific billing codes for some conditions since the purpose of claims is obtaining reimbursements.
- Given the retrospective design of this study, no causal inferences can be made.

References

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Introduction

- Over 100 million Americans reported Coronavirus Disease 2019 (COVID-19) infection by early 2023. However, only a small proportion of these patients generated healthcare claims with a documented COVID-19 diagnosis.¹
- The northeast United States (US) states account for a higher proportion of confirmed COVID-19 cases compared to other US regions.² Little is known about regional differences in distribution of clinical conditions (identified as chain-of-event and significant comorbid conditions)³ identified as risk factors for mortality among COVID-19 patients.
- · Research on patients hospitalized with COVID-19 infections showed that the proportion of patients receiving remdesivir increased gradually through February 2021 and varied drastically across health centers.⁴ However, regional differences in treatment patterns among COVID-19 patients is lacking.⁴

Data sources

Figure 1. IQVIA's New Data Warehouse Dx and LRx databases

Dx database

Provides patient-level information on pre-adjudicated claims from physician and specialist offices

- 800,000 office-based physicians and specialists
- Representing 60-70% of physician activity in the US

Key attributes:

- Patient demographics
- Diagnoses
- Medical and service
- procedures
- No hospitalization claims

Study population

- Among over 277 million patients in the Dx database, 6.4% had an ICD-10 diagnosis code for COVID-19 during the selection window. Figure 2 illustrates the patient selection for this study
- The northeast US region had a prevalence of 7.15% of treated COVID-19 patients (Figure 2)

Figure 2. Patient selection

Starting Sample

Patients with ≥1 claim in Dx with a COVID-19 diagnosis during the selection window (April 1 2020 – April 30, 2022). Date of the first claim with COVID-19 diagnosis during the selection window was termed the 'index date'

Patients with \geq 1 claim in Dx >180 days prior to the index date

Final Sample

Patients with no missing data regarding region of residence

Figure 3. Prevalence of COVID-19 by US Regions



Methods

Demographic characteristics

LRx database

- Provides patient-level information on dispensed
- prescription from retail, mail.
- long term care and specialty
- pharmacies, representing 88% of retail fills
- 65% of mail order fills
- 52% of long-term care channel

Key attributes:

- Patient demographics
- Prescription details
- Charge, payment, co-pay
- amount • No diagnosis except for
- specialty care pharmacy fills



- Among overall treated COVID-19 patients in the US, the highest proportion of patients were aged 18-44 years (33.8%) followed by those aged 45-64 years (27.9%) and 65+ years (23.7%). Minors (<18 years) accounted for only 14.4% of the overall treated COVID-19 population (Table 1).
- Within each age group, the south US region accounted for highest proportion of patients compared to other US regions.
- Within each region, those aged 18-44 years accounted for over a third of the treated COVID-19 patients
- Over 57% of the treated COVID-19 patients nationally were women.
- The gender distribution of study patients was similar across regions.
- Commercially insured patients accounted for over 80% of patients nationally and within each region.

Table 1: Demographic characteristics of treated COVID-19 patients stratified by US region

Demographic characteristics	Overall (N=17,682,111)	Northeast (N=3,778,734)	Midwest (N=3,484,577)	South (N=7,444,318)	West (N=2,961,029)	Unknown (N=13,453)	Patients from South US claims during 12 months p	S had the highest mean number of pharmacy s prior to the index diagnosis (Table 3)							
Age group															
<18 years	2,544,842 (14.4%)	519,615 (13.8%)	411,802 (11.8%)	1,184,379 (15.9%)	426,884 (14.4%)	2,162 (16.1%)	Table 3: Baseline HCRU ar	mong treate	ng treated COVID-19 patients stratified						
18-44 years	5,967,006 (33.7%)	1,318,865 (34.9%)	1,171,704 (33.6%)	2,431,662 (32.7%)	1,041,107 (35.2%)	3,668 (27.3%)	by US region								
45-64 years	4,926,798 (27.9%)	1,080,605 (28.6%)	994,749 (28.5%)	2,055,372 (27.6%)	793.450 (26.8%)	2,622 (19.5%)			Reg	Region					
65+ years	4,199,493 (23.7%)	851,017 (22.5%)	899,363 (25.8%)	1,753,530 (23.6%)	690.614 (23.3%)	4,969 (36.9%)	Treatment Characteristics	Northeast	Midwest	South	West				
Missing/unknown	43,972 (0.2%)	8,632 (0.2%)	6,959 (0.2%)	19,375 (0.3%)	8,974 (0.3%)	32 (0.2%)		N=3,778,734	N=3,484,577	N=7,444,318	N=2,961,029				
Sex							Number of days with medical claims								
Female	1,0139,688 (57.3%)	2,147,885 (56.8%)	1,986,808 (57.0%)	4,290,717 (57.6%)	1,706,475 (57.6%)	7,803 (58.0%)	12-month pre-index								
Male	7,498,820 (42.4%)	1,622,370 (42.9%)	1,490,881 (42.8%)	3,134,319 (42.1%)	1,245,629 (42.1%)	5,621 (41.8%)	Mean	16.0	14.4	12.8	13.4				
Missing/Unknown	43,603 (0.2%)	8,479 (0.2%)	6,888 (0.2%)	19,282 (0.3%)	8,925 (0.3%)	29 (0.2%)	SD	34.7	25.6	24.2	23.6				
Insurance type							Median	6.0	6.0	6.0	6.0				
Commercial	14,680,364 (83.0%)	3,158,394 (83.6%)	2,837,833 (81.4%)	6,214,777 (83.5%)	246,0991 (83.1%)	8,369 (62.2%)	Number of pharmacy claims 12-month pre-index								
Medicare	2,582,054 (14.6%)	534,589 (14.1%)	585,850 (16.8%)	1,084,846 (14.6%)	371,724 (12.6%)	5,045 (37.5%)	Mean	21.6	25.2	24.1	22.9				
Medicaid	415,149 (2.3%)	85,081 (2.3%)	59,742 (1.7%)	143,004 (1.9%)	127,302 (4.3%)	20 (0.1%)	SD	29.8	33.1	31.4	31.9				
Cash/Uninsured/Other	4,518 (<0.1%)	670 (<0.1%)	1,152 (<0.1%)	1,691 (<0.1%)	1,012 (<0.1%)	19 (0.1%)	Median	11.0	14.0	13.0	11.0				

Table 2: Distribution of COE and SCC among treated COVID-19 patients stratified by US region

	Total Covid-19)					<u>Region</u>					
Clinical Characteristics	Patients (N=17,682,111))	Northeast (N=3,778,73	4)	Midwest (N=3,484,57	7)	South (N=7,444,31	8)	West (N=2,961,	029)	Unknov (N=13,4	/n 53)
Chain of event conditions												
Pneumonia, unspecified	902,008	5.10%	148,344	3.93%	173,179	4.97%	417,274	5.61%	163,075	5.51%	136	1.01%
Acute respiratory failure	1,299,699	7.35%	195,658	5.18%	285,085	8.18%	560,124	7.52%	258,718	8.74%	114	0.85%
Respiratory failure, unspecified	237,023	1.34%	38,163	1.01%	49,915	1.43%	103,852	1.40%	45,066	1.52%	27	0.20%
Cardiac arrest, unspecified	56,356	0.32%	9,226	0.24%	10,564	0.30%	25,894	0.35%	10,664	0.36%	8	0.06%
Adult respiratory distress syndrome	144,919	0.82%	24,712	0.65%	33,658	0.97%	57,019	0.77%	29,504	1.00%	26	0.19%
Sepsis, unspecified	394,375	2.23%	65,580	1.74%	73,105	2.10%	167,550	2.25%	88,095	2.98%	45	0.33%
/iral pneumonia, unspecified	83,313	0.47%	17,128	0.45%	17,067	0.49%	36,080	0.48%	13,017	0.44%	21	0.16%
Asphyxia	836,361	4.73%	127,618	3.38%	193,393	5.55%	355,513	4.78%	159,707	5.39%	130	0.97%
Respiratory arrest	6,369	0.04%	1,086	0.03%	1,193	0.03%	2,979	0.04%	1,110	0.04%	1	0.01%
Significant contributing conditions												
Essential (primary) hypertension	6,453,254	36.50%	1,286,895	34.06%	1,303,797	37.42%	2,866,928	38.51%	990,369	33.45%	5,265	39.14%
Diabetes mellitus without complications, Inspecified	54,377	0.31%	15,718	0.42%	10,076	0.29%	20,489	0.28%	8,073	0.27%	21	0.16%
Dementia, unspecified	617,863	3.49%	143,109	3.79%	133,452	3.83%	250,514	3.37%	90,684	3.06%	104	0.77%
Chronic obstructive pulmonary disease, Inspecified	1,298,901	7.35%	240,507	6.36%	308,571	8.86%	562,674	7.56%	186,648	6.30%	501	3.72%
Atherosclerotic heart disease	1,751,310	9.90%	368,515	9.75%	376,434	10.80%	768,632	10.33%	236,770	8.00%	959	7.13%
ype 2 diabetes mellitus without complications	3,370,452	19.06%	708,834	18.76%	649,611	18.64%	1,426,970	19.17%	580,667	19.61%	4,370	32.48%
Atrial fibrillation and flutter	1,155,546	6.54%	227,170	6.01%	268,522	7.71%	482,561	6.48%	176,870	5.97%	423	3.14%
Congestive heart failure	1,350,220	7.64%	253,141	6.70%	305,264	8.76%	579,914	7.79%	211,364	7.14%	537	3.99%
Tobacco use	1,268,898	7.18%	243,031	6.43%	322,820	9.26%	506,990	6.81%	195,888	6.62%	169	1.26%
Chronic kidney disease, unspecified	870,893	4.93%	156,923	4.15%	184,531	5.30%	380,834	5.12%	147,978	5.00%	627	4.66%
Alzheimer disease, unspecified	269,817	1.53%	59,624	1.58%	63,334	1.82%	109,465	1.47%	37,128	1.25%	266	1.98%
Hypertensive heart disease without congestive neart failure	379,199	2.14%	94,054	2.49%	52,164	1.50%	179,128	2.41%	51,894	1.75%	1,959	14.56%
Hyperlipidemia, unspecified	3,970.804	22,46%	919.670	24.34%	758.427	21,77%	1,635,303	21,97%	654.649	22.11%	2,755	20,48%
Other specified disorders of kidney and ureter	878.380	4.97%	204.642	5.42%	186.684	5.36%	344.004	4.62%	142.607	4.82%	443	3.29%
Obesity, unspecified	3,476.655	19,66%	740.297	19.59%	719.475	20,65%	1,420,929	19.09%	593.963	20.06%	1,991	14.80%
Stroke, not specified as hemorrhage or	-,,		,		,		.,,				.,	
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COE = Chain of Event, SCC = Significant contributing conditions

• For this retrospective cohort study, patients with a healthcare claim in IQVIA's professional claims database (Dx) (Figure 1) with a COVID-19 diagnosis (ICD-10 CM code) between 01 April 2020 and 30 April 2022 were identified (Figure 2).

The date of the first COVID-19 diagnosis was termed as the index date.

Demographic characteristics were assessed on index date among patients in the overall cohort and within each region.

• Clinical characteristics including chain-of-event conditions were assessed +/- 7 days of the last COVID-19 diagnosis. Significant comorbid conditions were assessed during the 6-month period prior to the index date through end of the follow-up period.

• Treatment patterns for key approved and unapproved COVID-19 medications were assessed for patients using HCPCS codes in Dx and NDC codes in IQVIA's longitudinal prescription claims database (LRx).

Clinical characteristics and health resource utilization

- The majority of the treated COVID-19 patients had a Charlson comorbidity index (CCI) score of zero indicative of no CCI comorbidity
 - Respiratory failure and pneumonia were the most common chain-of-event conditions among patients in each region (Table 2)

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- Essential hypertension, hyperlipidemia, type 2 diabetes mellitus and obesity were the most common significant contributing conditions reported among the overall COVID-19 cohort; with patients from South US reporting the highest prevalence of the former three conditions whereas patients from Midwest US reported the higher prevalence of obesity.

On average patients from Northeast US had highest number of days with any medical claims during 12 months prior to index diagnosis.

Treatment natterns