

# Addressing Disparities in Breast Cancer Screening



Health Alliance Plan (HAP) ~ in partnership with Henry Ford Health System and Ford Motor Company, General Motors, DaimlerChrysler



## STATEMENT OF THE PROBLEM



HAP identified a significant disparity between mammography rates for African American women (76%) and Caucasian women (81%), specifically in women aged 50-69. This disparity presented an opportunity to tailor breast cancer screening interventions for eligible African American females.

## GOALS AND RATIONALE

- The “outcome” goals of the project were (1) identification of and (2) measurable reductions in racial/ethnic disparities in breast cancer screening rates.
- The “process” goal of the project was the active involvement of the auto companies in disparity-identification and disparity-reduction efforts on behalf of their employees.

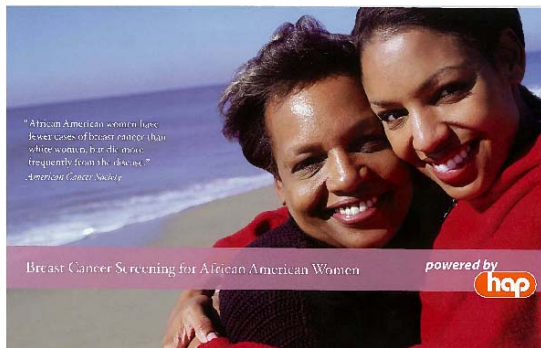
## EVALUATION METHOD

- **Disparity Identification:** Linked race/ethnicity data from the Henry Ford Medical Group (HFMG) medical records system to HAP membership and HEDIS denominator files. That work led to the identification of statistically significant disparities, especially among white-collar employees.
- **Quantitative analysis:** Screening rates were run (from HAP claims data) throughout the project, with final rates identified in December 2006. (Results on right panel.)
- **Qualitative feedback:** HAP and HFMG staff solicited member and provider feedback throughout the project’s intervention phase:
  - Results from barrier analysis survey directed outreach efforts and design.
  - Key barriers and potential solutions were discussed during the Mammogram Blitz and provider focus group events.

## INTERVENTION AND IMPLEMENTATION

The following interventions were directed at African American female HAP members aligned with HFMG and employed by, or a dependent of, Ford Motor Company, General Motors and DaimlerChrysler (n=508) – and their providers:

- **Barrier Analysis** – Identification of key barriers preventing members from getting routine mammograms
- **Member Brochure** – Culturally tailored information featuring an African American HAP member who had been diagnosed with breast cancer
- **Member Incentive** – \$20 Target gift card for receiving a mammogram
- **Mammogram Blitz** – Saturday walk-in event at a local clinic for members to receive a mammogram and perks (chair massages, hand treatments, refreshments)
- **Outbound scheduling calls** – American Cancer Society® made calls to encourage members to schedule their mammograms and provided a “warm transfer” to selected radiology sites for appointment scheduling
- **Provider dinner workshop/focus group** – HFMG primary care physicians attended the event to (1) discuss data revealing disparities in their patient populations, (2) identify barriers providers face and (3) share best practices

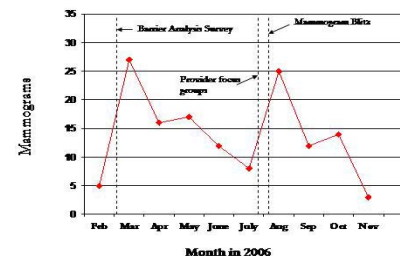


## IMPACT

Screening rates for African American women increased to the point that the initial **disparities identified in 2004-2006 were eliminated**. Specifically:

- The mammography rate for the target audience was 76% in 2004, 75.6% in February 2006, and increased to 82.3% by December 2006.
- Two distinct “peaks” corresponded to outreach activities:

Number of Mammograms Billed per Month for African American women in HAP/HFMG/Autos



Additional analysis of administrative data showed that 38% of the women targeted that received a mammogram in 2006 had not been screened in more than four years.

## MOVING FORWARD

- ★ Conduct analysis of HEDIS data stratified by race/ethnicity, using data on race/ethnicity provided from HFMG to HAP
- ★ Send newly designed breast cancer screening brochures that target African American women to the providers that participated in provider focus group/dinner
- ★ Contact employers for updated phone numbers and addresses prior to telephonic or mail-based outreach
- ★ Replicate successful Mammogram Blitz and similar focused activities