NATIONAL CENTER FOR HIV, VIRAL HEPATITIS, STD, AND TB PREVENTION

Changes in HAND prevalence among Medicaid enrollees from 2016-2021 in the U.S.

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Poster #00603

BACKGROUND

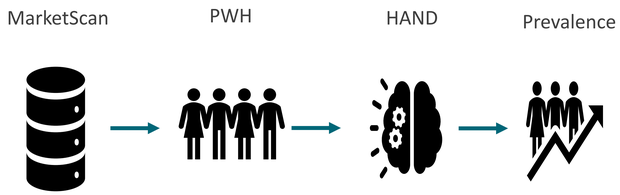
- HIV-associated neurocognitive disorder (HAND) is a range of progressively severe central nervous system complications associated with HIV infection.
- The range can be from mild problems with memory, language, and reasoning to the more severe HIV-associated dementia.
- HAND has declined with the advancement of antiretroviral therapy (ART), however, remains prevalent in older people with HIV (PWH).

Objective

We describe the prevalence of HAND among PWH among Medicaid enrollees in the U.S. from 2016-2021.

Methods

- We analyzed data from Truven Health MarketScan Claims and Encounters®, a large database derived from administrative claims for healthcare services provided to Medicaid enrollees.



- Among enrolled persons aged ≥18 years, we identified PWH with at least one inpatient or outpatient medical claim with an HIV and subsequent major to mild neurocognitive disorders (NDs) ICD-10-CM diagnosis codes.

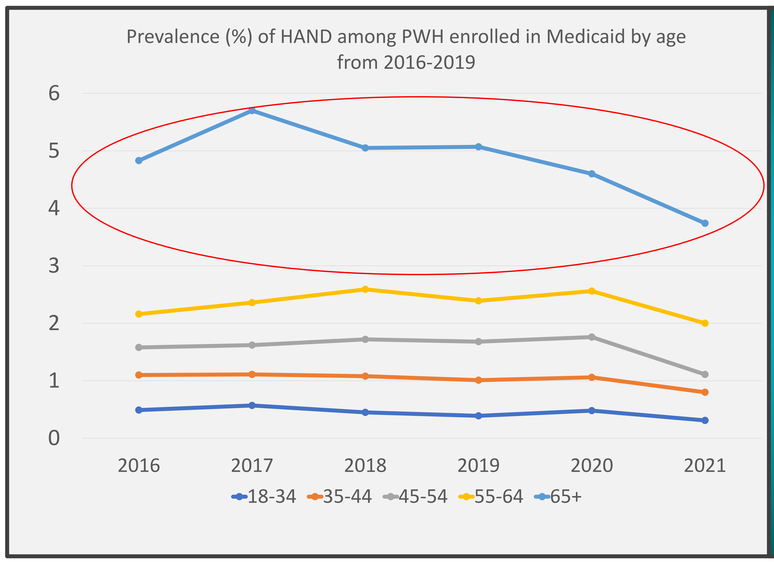
F02.80 → Major Neurocognitive Disorder Due to [Medical Etiology], Without behavioral disturbance

F02.81 → Major Neurocognitive Disorder Due to [Medical Etiology], With behavioral disturbance

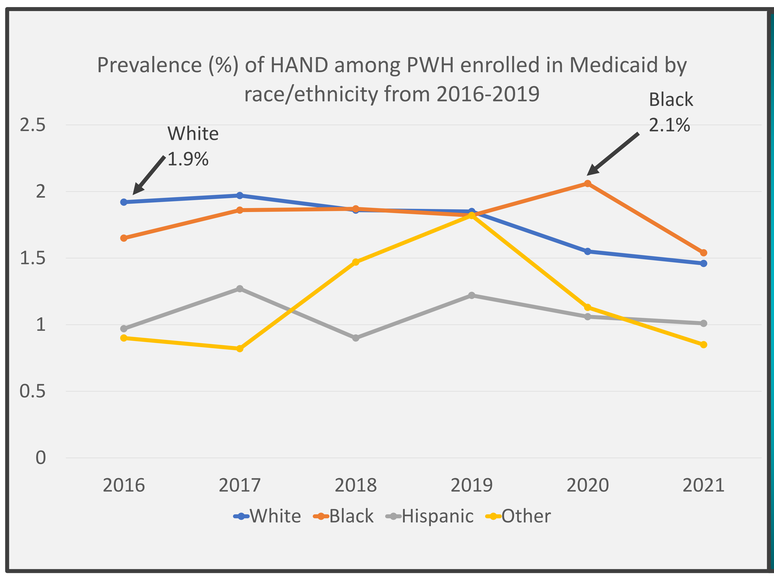
G31.84 → Mild Neurocognitive Disorder Due to [Medical Etiology], Without behavioral disturbance

- We used chi-square testing to compare PWH with an associated NDs diagnosis (HAND) to those without an associated ND diagnosis code (no-HAND) to investigate differences in HAND prevalence by age, sex, race/ethnicity, and by prescribed ART from 2016-2021.

In Medicaid enrollees with HIV, HAND prevalence remains steady with the annual crude prevalence ranging from 1.6% in 2016 to 1.9% in 2020



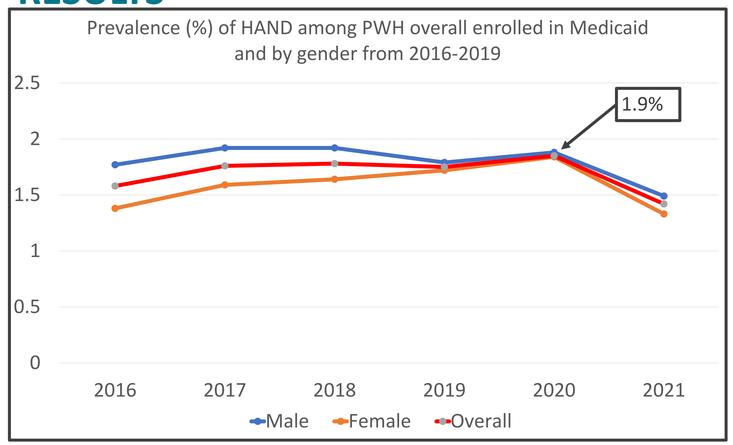
The prevalence of HAND significantly increased with age (p-value=0.0001); highest prevalence among ages 65+ years (range 3.7% in 2021-5.7% in 2017).



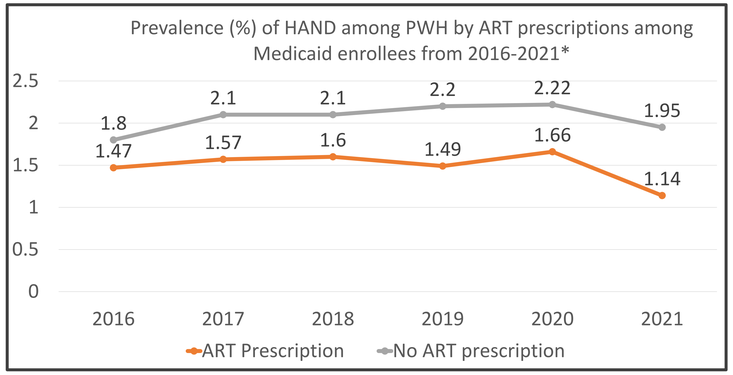
In 2016, there were significant differences by race/ethnicity (p-value= 0.0002), with White persons having the highest prevalence of HAND (1.9%).

In 2020, Black persons (2.1%) had the highest prevalence of HAND (p-value= 0.0014).

RESULTS



- The annual crude prevalence of HAND ranged from 1.6% (512/31,897) in 2016 to 1.9% (558/29,967) in 2020.
- Males had a significantly higher prevalence of HAND compared to females in 2016 (1.8% vs 1.4%; p-value= 0.0066) and 2017 (1.9% vs 1.6%; p-value= 0.027) but from 2018-2021 there were no differences by sex.



- Among the 190,648 PWH from 2016-2021, the frequency of ART prescriptions ranged from 58% (18,671/31,897) in 2016 to 64% (21,018/32,820) in 2021.
- Prevalence of HAND was significantly higher among persons without an ART prescription (range 1.8% in 2016-2.2% in 2020) compared to those with an ART prescription (range 1.1% in 2021-1.7% in 2020) for each year.

*Significant differences (p-value < 0.05) were found for each year.

Conclusion

- In this large cohort of PWH, HAND prevalence remained steady with differences in prevalence by age and race/ethnicity.
- As the PWH population ages, it is critical to strengthen interventions that improve access to ART, promote adherence, address barriers to supportive services and care, and reduce health disparities.

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