

E-mail Sent to AHRQ Staff October 29, 2007 (slightly edited)

Thanks for getting back to me so quickly.

The information you provided is quite helpful. A couple follow-ups:

I understand rule whereby a disparity must be at least 10% for it to be mentioned in the text of the report. But what is the criterion for determining whether there is any disparity at all – in other words what explains, for example, the 18 core measures where Table 4.1 on page 129 shows approximately equal effectiveness for blacks and whites?

I thought perhaps that the 10% rule was being used to determine whether there was any disparity at all. That would explain a number of the 18 instances in Table 4.1, which involve very small relative percentage differences regardless of whether one examines the favorable or adverse outcome. But I also found several situations where there disparity was in excess of 10% but Table 2.1a on 85-87 showed equivalence. These included:

a. *Page 85, adults with diabetes who had three recommended exams:* Table 14a shows rates of 49.4% for whites and 41.5% for blacks. But Table 2.1a indicates that there is no difference in effectiveness of care. Whether cast in terms of relative differences in the positive or the negative outcome, the disparity would be well above 10% and I cannot imagine that the difference would not be significant. So why is there an indicator of equivalence?

b. *Page 86, adolescents who received 3 or more doses of hepatitis B vaccine:* Table 76a shows rates of 79.4% for whites and 83.7% for blacks. If couched in the negative, the black rate would be 79.1% (16.3/20.6) of the white rate – a greater than 10% black advantage. But Table 2.1a shows equivalence.

c. *Page 87, adults with major depressive episodes who received treatment:* Table 93a shows rates of 66.0% for whites and 60.5% for blacks. In negative terms the black rate is 1.16 (39.5/34) times the white rate. But Table 2.1 a shows equivalence. Again, I would assume the difference is statistically significant.

So I am curious both as to the criteria for identifying a disparity, albeit not an important one, and why some 10% disparities are not deemed disparities at all.

Also, without getting into the details of how I got to that point, from Table 4.2 on page 130, I got the understanding that directional changes were made without regard to which group had the better rate – i.e., if a disparity declined, it would be counted as such even if blacks originally had the better rate – and that some of the increase or decreases included the 18 measures for which the Table 4.1 on 129 indicated there was no difference. Is that correct?

If you have ready answers to these questions, I'd appreciate them. If they require some research and you're busy with the new reports, I don't really have a pressing need for the information.