

Heart and Vascular (HAV) Health Equity Level-up Program (HELP)

Close the Gap (CTG) champions health equity for women and people of color living with cardiovascular disease in the U.S.

HAV-HELP provides healthcare professionals with an actionable approach to improve pathways to specialty care and increase access to needed interventions for women and people of color living with cardiovascular disease.

Peripheral Artery Disease

Black patients are **2 times** more likely* to receive an amputation and less likely to receive revascularization first.^{1,2}

Coronary Artery Disease

Hispanic patients are **15% less likely*** to receive PCI when presenting with heart attack symptoms.³

*Compared to non-Hispanic white adults

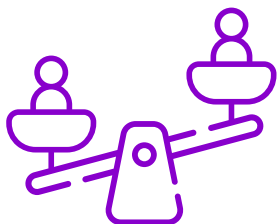
“Close the Gap is not a feel-good initiative. It really is a testament to the mission that underlies everything that we do as a company at Boston Scientific. We are here to improve healthcare outcomes for all patients.”

—Camille Chang Gilmore
Vice President, Human Resources and
Global Chief Diversity, Equity & Inclusion Officer



The HAV-HELP 3-Phase Approach

Close the Gap’s dedicated team helps you accelerate towards your health equity goals.



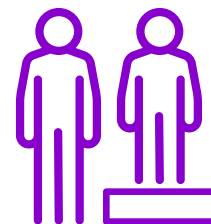
UNCOVER CARE DISPARITIES

Outline health equity priorities and identify opportunities to reduce disparities in cardiovascular specialty care.



CHAMPION CHANGE

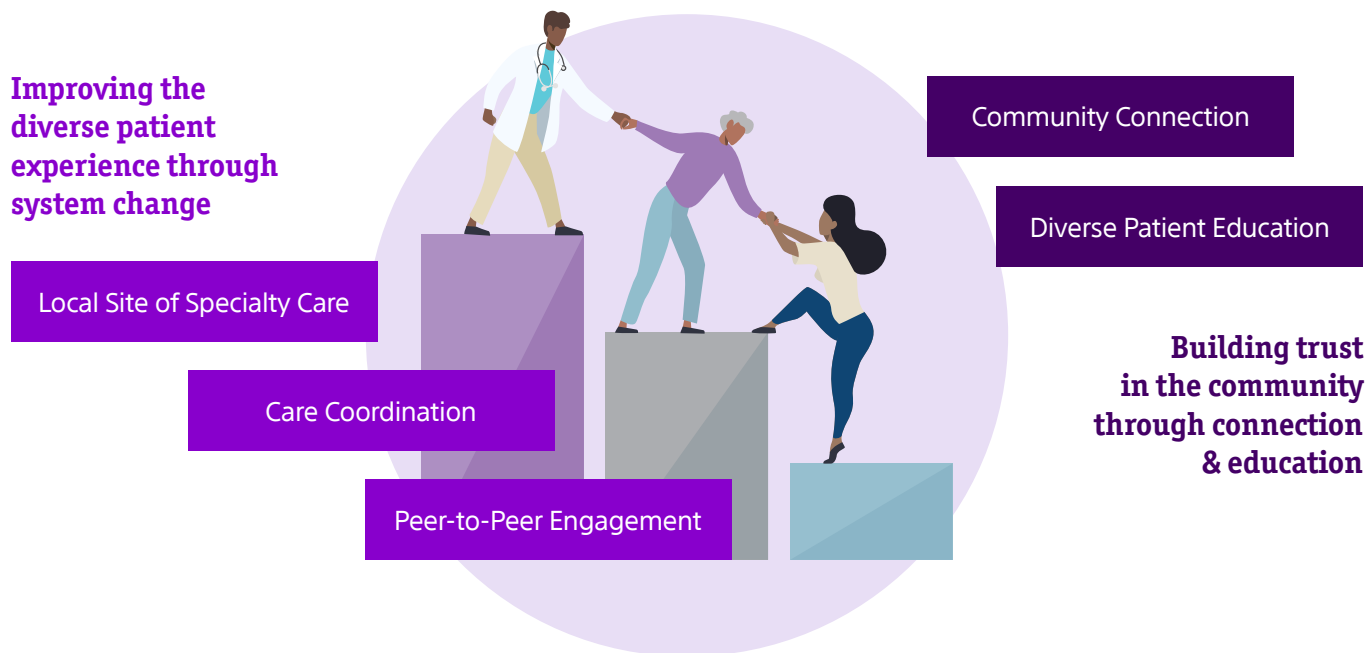
Build action plans that remove barriers to specialty care and help women and people of color more confidently navigate the healthcare system.



SHARE IMPACT

Capture the value and share the impact of the action plans to inspire an ongoing commitment to equitable cardiovascular care.

Health Equity Action Plan Imperatives & Strategies



HAV-HELP provides disparity insights and action plan resources for Black, Hispanic and women patients living with Atrial Fibrillation, Coronary Artery Disease, Heart Failure and Peripheral Artery Disease.

HAV-HELP Impact:

In 2023, we collaborated with 74 customers in 22 states across the U.S. One customer, MedStar Health, developed an action plan informed by CTG's Disparity Index Tool (DIT) — a resource that uses published epidemiological studies and local claims data to create a snapshot of treatment inequities.

"Since we've launched the mobile health center [local site of specialty care] and with the work of the Community Health Advocates [care coordination], we've increased our timely follow-up rates by nearly 10%, and when you divide it out by race, you see that that improvement was almost all among our patients that identify as Black or African American."

—Dr. Luke Carlson, Medical Director
Care Transformation, MedStar Health, Baltimore region

Learn more about MedStar Health's full action plan here:

[MedStar Health case study](#)

Interested in learning more?

Contact your Boston Scientific Representative or email closethegap@bsci.com

www.fightforhealthequity.com

1. Mustapha JA, Katzen BT, Neville RF, et al. Determinants of Long-Term Outcomes and Costs in the Management of Critical Limb Ischemia: A Population-Based Cohort Study. *JAHA*. 2018;7(16):e009724. doi:10.1161/JAHA.118.009724

2. Criqui MH, Vargas V, Denenberg JO, et al. Ethnicity and Peripheral Arterial Disease: The San Diego Population Study. *Circulation*. 2005;112(17):2703-2707. doi:10.1161/CIRCULATIONAHA.105.546507

3. Tertulien T, Broughton ST, Swabe G, Essien UR, Magnani JW. Association of Race and Ethnicity on the Management of Acute Non-ST-Segment Elevation Myocardial Infarction. *J Am Heart Assoc*. 2022 Jun 21;11(12):e025758. doi: 10.1161/JAHA.121.025758. Epub 2022 Jun 14. PMID: 35699168; PMCID: PMC9238643.