

■ Appendix. Details of the Regression Models

A. Modeling policy effects on the proportion of β -blocker adherence (proportion of days covered [PDC] > 0.8) in each month adjusted for patient characteristics using a generalized linear regression model with a linear link function and adjusting for autocorrelation using generalized estimating equations:

$$\text{PDC} > 0.8 = \text{intercept} + \text{time} + \text{copay} + \text{coinsurance} + \text{post_month9} + \text{time_post_month9} + (\text{post_month9} * \text{copay}) + (\text{post_month9} * \text{coinsurance}) + (\text{time_post_month9} * \text{copay}) + (\text{time_post_month9} * \text{coinsurance}) + \text{age} \geq 76 \text{ years} + \text{income} < \text{Can}\$22\,000 + \text{female} + \text{Charlson Comorbidity Index} \geq 5 + \text{congestive heart failure_level} + \text{diabetes} + \text{any hospitalization} + \text{cerebrovascular disease} + \text{peripheral vascular disease} + \text{congestive heart failure} + \text{use of additional antihypertensive agents} + \text{error}$$

B. Modeling policy effects on the proportion of β -blocker initiation after acute myocardial infarction (MI) adjusted for time trends (by quarter of calendar time from Q1 2001 to Q4 2003) and regional differences (1 = intervention region, British Columbia; 0 = control region, Pennsylvania) and patient characteristics using a segmented linear regression model:

$$\text{post_MI_use} = \text{intercept} + \text{quarter} + \text{copay} + \text{coinsurance} + \text{region} + (\text{copay} * \text{region}) + (\text{copay} * \text{quarter}) + (\text{copay} * \text{region} * \text{quarter}) + (\text{coinsurance} * \text{region}) + (\text{coinsurance} * \text{quarter}) + (\text{coinsurance} * \text{region} * \text{quarter}) + \% \text{ age} \geq 76 \text{ years} + \% \text{ female} + \% \text{ prior acute myocardial infarction} + \% \text{ prior revascularization} + \text{error}$$