SUPPLEMENTAL MATERIAL

Data S1. Supplemental Methods

Based upon ICD-10 codes, patients were classified as having PAD if they had previously documented PAD and/or graft procedures; CKD for estimated glomerular filtration rates of <90 mL per minute per 1.73 m² or those with albuminuria; falls if documented on an inpatient or outpatient visit; excess alcohol if diagnosed with alcohol withdrawal, alcohol-related endorgan damage, or rehabilitation for excess alcohol use; major bleeding if a major hemorrhage event and/or a blood transfusion in combination with a clinically-relevant nonmajor bleeding code were documented on an inpatient or outpatient visit.

Table S1. ICD-10-CA diagnosis and CCI procedure codes

Clinical Diagnosis	ICD-10-CA Codes	CCI Procedure Codes
Valvular disease	105 106 134 135 108.0 108.1 108.2 108.3	1.HS.80 1.HS.90 1.HT.80
		1.HT.89 1.HT.90 1.HU.80
		1.HU.90 1.HV.80 1.HV.90
Heart Failure	125.5 142.0 142.6 142.7 142.8 142.9 143 150	
Hypertension	l10-l13 l15	
Diabetes	E10-E14	
Stroke/TIA	I63 I64 H34.1 I61 G45	
PAD	170 171 173.1 173.8 173.9 177.1 179.0 179.2 K55.1 K55.8 K55.9	
	Z95.8 Z95.9	
CAD	125.0 125.1 125.2 125.5 125.8 125.9	
MI	21 22	
Chronic Kidney Disease	N18	
Anemia	D50-D89 D60-D64	
Thrombocytopenia	D69	
Falls	W00-W19	
Excess Alcohol	E52 F10 G62.1 I42.6 K29.2 K70.0 K70.3 K70.9 T51 Z50.2 Z71.4 Z72.1	
Major Bleeding	H35.6 H43.1 H45.0 l60 l61 l62 M25.0 J94.2 l31.2	
	or Transfusion with CRNMB	
Transfusion	T80.3 T80.4 Y65.0 Z51.3	1.LZ.19
CRNMB	185.01 185.11 185.21 185.31 185.41 185.51 185.61 185.71 185.81	
	185.91 K22.11 K22.6 K25.0 K25.2 K25.4 K25.6 K26.0 K26.2	
	K26.4 K26.6 K27.0 K27.2 K27.4 K27.6 K28.0 K28.2 K28.4	
	K28.6 K29.01 K29.11 K29.21 K29.31 K29.41 K29.51 K29.61	
	K29.71 K29.81 K29.91 K31.80 K55.21 K62.5 K66.1 K92.0	
	K92.1 K92.2 No2 S06.4 S06.5 S06.6 R04 R31 R58	

CAD, coronary artery disease; CCI, Canadian Classification of Health Interventions; CRNMB, clinically relevant nonmajor bleeding; CVD, cerebrovascular disease, ICD, International Classification of Disease; PAD, peripheral artery disease; TIA, transient ischemic attack.

Table S2. Oral anticoagulation ATC codes using the PIN profile

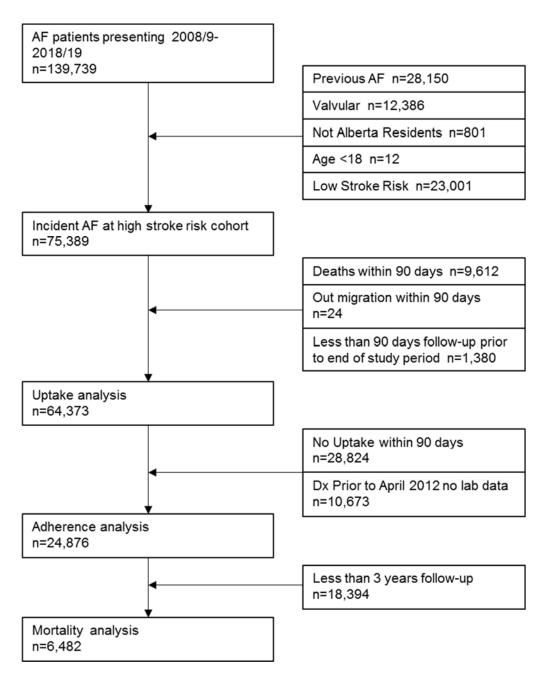
Drug Name (generic)	ATC Code		
Warfarin	B01AA03		
Rivaroxaban	B01AF01, B01AX06		
Apixaban	Bo1AFo2		
Dabigatran	B01AE07		
Edoxaban	Bo1AFo3		

ATC, Anatomical Therapeutic Chemical classification system; PIN, Pharmaceutical Information Network.

Table S3. Changes in oral anticoagulation adherence categories over a 3-year period following initiation of therapy

		NOAC Uptake Transition		Warfarin Uptake Transition	
		Year 1 → 2	Year 2 → 3	Year 1 → 2	Year 2 → 3
		n (%)	n (%)	n (%)	n (%)
Starting Adherence	Ending Adherence				
High	High	2,250 (86.7%)	2,163 (87.7%)	1,348 (76.7%)	1,472 (74.5%)
	Moderate	259 (10.0%)	226 (9.2%)		
	Low	87 (3.4%)	77 (3.1%)	409 (23.3%)	504 (25.5%)
Moderate	High	203 (43.2%)	213 (49.3%)		
	Moderate	141 (30.0%)	121 (28.0%)		
	Low	126 (26.8%)	98 (22.7%)		
Low	High	13 (3.8%)	20 (3.9%)	628 (47.8%)	450 (41.1%)
	Moderate	32 (9.2%)	21 (4.1%)		
	Low	301 (87.0%)	473 (92.0%)	685 (52.2%)	644 (58.9%)
Total		3,412		3,0	70

Figure S1. CONSORT diagram



AF, atrial fibrillation; Dx, diagnosis.

Figure S2. Change in OAC class prescription within 1 year

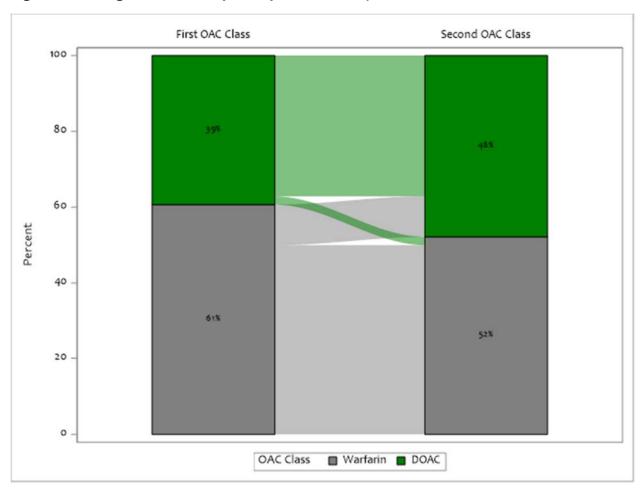
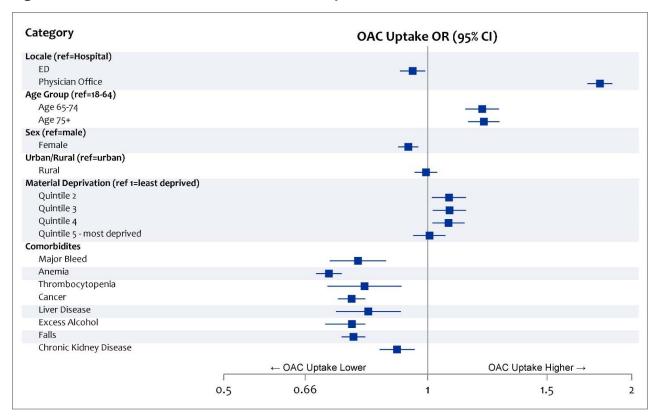
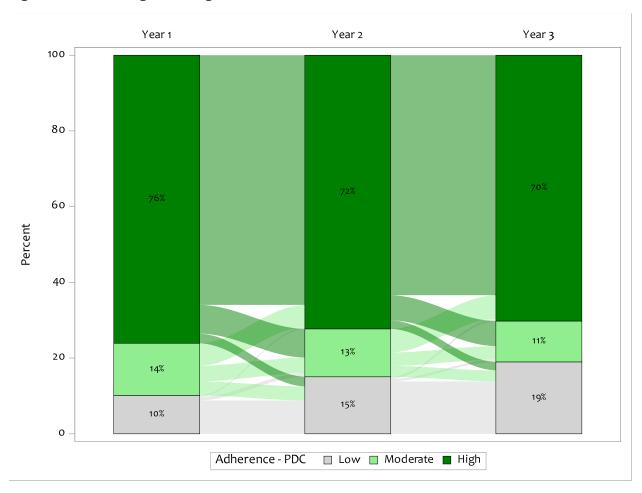


Figure S3. Predictors associated with OAC uptake



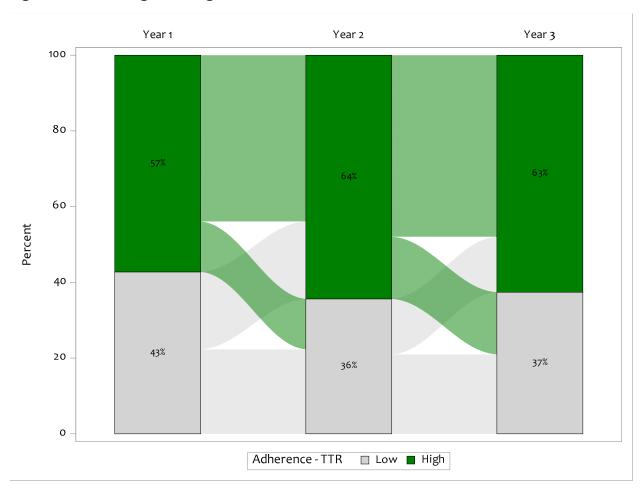
Odds ratios (OR) and 95% confidence intervals (CI) for factors affecting OAC uptake

Figure S4. Change in categories of adherence to DOAC over time



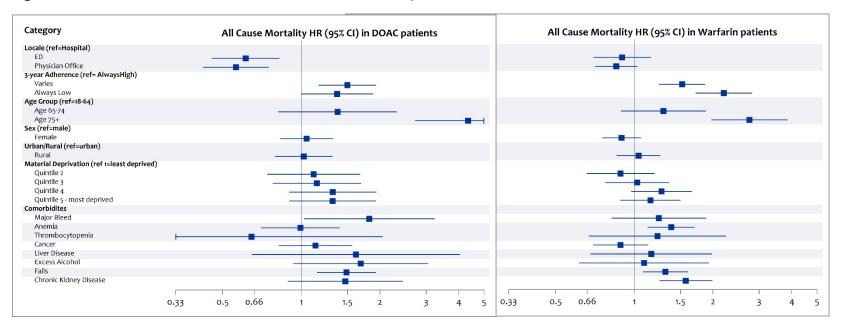
DOAC, direct oral anticoagulant; PDC, proportion of days covered.

Figure S₅. Change in categories of adherence to warfarin over time



TTR, time in therapeutic range.

Figure S6. Predictors associated with all-cause mortality



Hazard ratios (OR) and 95% confidence intervals (CI) for factors affecting all cause mortality. Follow up for all cause mortality begins at 3 years after the first OAC dispense.