Wildfire and Ozone Impact on Health



CENTER FOR IMPROVING

Wildfire Legislative Committee

July 30, 2024





Who We Are



CENTER FOR IMPROVING

Our Mission

To equip partners and communities in Colorado and across the nation with the resources, services and unbiased data needed to improve health and health care.

Our Vision

Everyone has the opportunity to be healthy and has access to equitable, affordable, high-quality health care.

We Are

- Non-profit
- Independent and objective
- Service-oriented



Who We Serve

Change Agents

Individuals, communities, or organizations working to lower costs, improve care, and make Colorado healthier.





How We Serve



Public CO APCD Data
 Identify opportunities for improvement in your community through interactive reports and publications

Non-Public CO APCD Data

License data from the most comprehensive claims database in CO to address your specific project needs

- Administrator of the Colorado All Payer Claims Database
- Research & Evaluation Services

- Program Focus Areas: Advance Care Planning, Palliative Care
- Community Engagement

What's in the CO APCD



1.1+ Billion Claims (2013-2023)



74% of Covered Lives (medical only, 2022)



49 Commercial Payers* + Medicaid & Medicare (FFS and Advantage)



5.6+ Million Lives*, Including 1M (50%) of self-insured



Trend information (2013-Present)

*Reflects calendar year 2023 payers only

What's not in the CO APCD

Federal Programs - VA, Tricare, Indian Health Services



Uninsured and self-pay claims



Majority of ERISA-based self-insured employers

Wildfire and Ozone Impact on Health Analysis

Purpose of the Study

- Investigate the impact of air quality on emergency department (ED) visits
- Provide data-driven insights to inform legislative and public health discussions
- Support general public understanding of health impact of spike pollutant events

Study Design

- 2018 and 2019 (high frequency of wildfires, not exacerbated by COVID)
- Isolated to cost and utilization of ED visits for principle diagnosis of respiratory and cardiovascular conditions
- Geographic county trends, age group breakouts, payer variation
- Air quality data from the EPA for wildfire and ozone pollutants



General Findings

Seasonal Variation:

- Increases in ED visits are often correlated with time of year
- Air quality may exacerbate seasonal jumps in incidents, especially for young and elderly

Age Group Vulnerability:

- 0-17 and over 65 impacted the most for both types of poor air quality
- Higher incidents of ED visits for 0-17 age group, regardless of air quality

Wildfires vs. Ozone:

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• Stronger patterns for Wildfire and ED visits compared to Ozone and ED visits



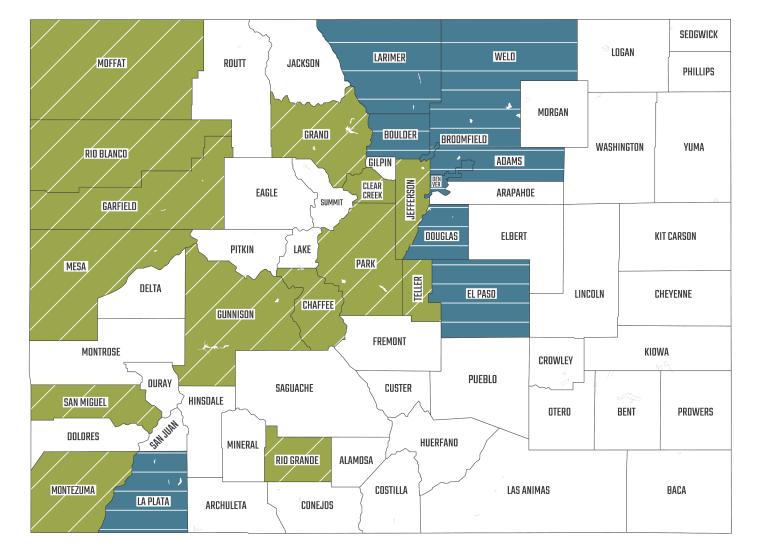
Counties Impacted by **Wildfires** (High PM2.5 Concentration)

Counties Impacted by **Ozone** (High Max Mean Concentration)



*Note, this analysis is limited to counties and months that had available EPA data for wildfire and ozone in 2018 and 2019, and does not indicate all counties that may have been impacted by poor air quality as a result.

Counties Impacted in 2018/2019



Wildfire Impact on ED Visits

2019 Findings: Higher rates of ED visits in counties during months above wildfire air quality threshold

Vulnerable Age Groups: Children under 17 and Adults over 65+

• Higher ED visit rates in 6/8 (75%) of the impacted counties during above-threshold months

County Specific Spikes:

• **Denver, La Plata,** and **Weld** had repeated occurrences of higher ED visits related to wildfires, suggesting geographic areas where air quality could be a significant health concern

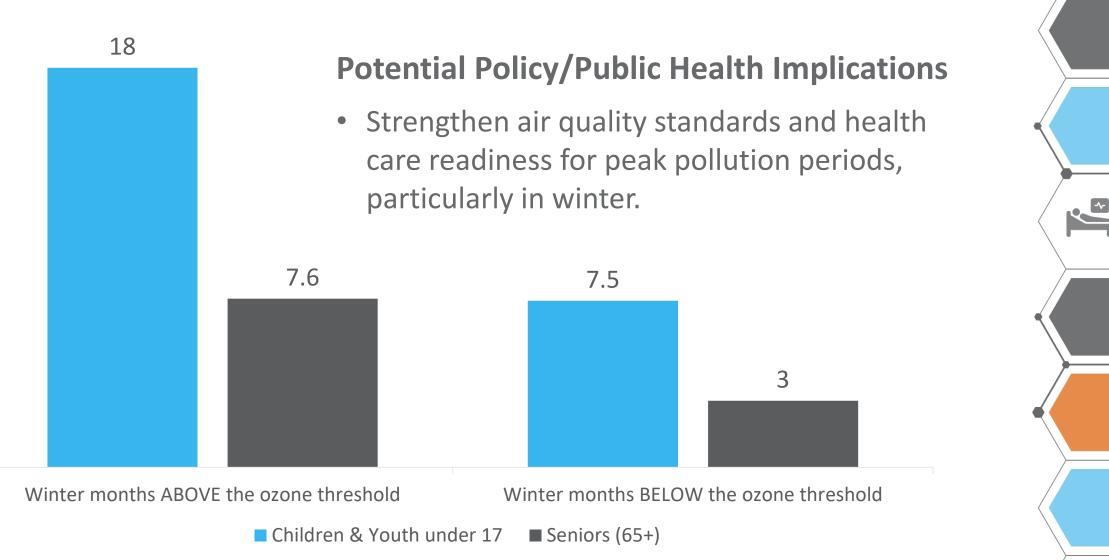
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Potential Policy/Public Health Implications:

- Focus on protecting vulnerable age groups through targeted health interventions and support services
- Ensure medical professionals and facilities in rural and underserved areas are equipped with staff and resources to respond to wildfire emergencies

ED Visit Rate/1,000 lives More than Double in Winter Months Above Ozone Threshold



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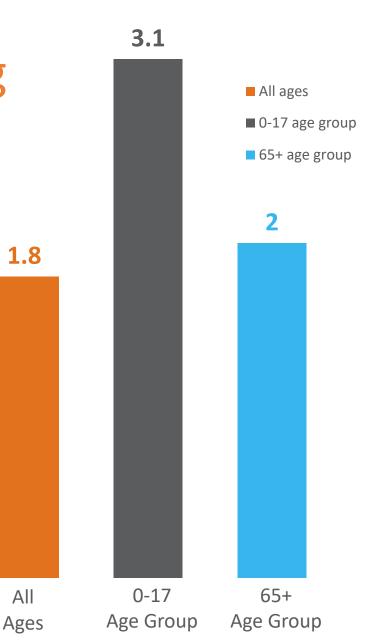
ED Visit Rates by Age Group During Ozone Spike Events

Average ED rate per 1,000 lives during spike events:

- All ages: ~ 1.8
- 0-17 age group: **3.1**
- 65+ age group: 2.0

Potential Policy/Public Health Implications

- Allocate resources to health care facilities in high-risk areas to handle increased ED visits.
- Educate vulnerable populations to prepare for spike ozone events



			Total cost	Cost per visit
2018	Commercial	Over \$1B Cost Impact of ED Visits	\$380,636,171	\$29,174
	Medicaid	(Respiratory and Cardiovascular Disease-Related)	\$132,235,846	\$2,044
	Medicare Advantage	Statewide cost by year and line of business	\$169,977,890	\$19,599
	Medicare FFS		\$353,913,622	\$17,974
	All Payers		\$1,036,763,529	\$9,784
			 Total cost	Cost per visit
2019	Commercial		\$417,464,568	\$31,787
	Medicaid		\$154,157,341	\$2,213
	Medicare Advantage		\$221,241,509	\$20,520
	Medicare FFS		\$347,652,156	\$18,705
	All Payers		\$1,140,515,574	\$10,177
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Next Steps

- This study was limited to ED visits for specific conditions
- Did not include extensive regression/correlation analysis
- Additional analyses could inform broader impact on health
 - Increases in primary care, urgent care, and telehealth visits
 - Evaluation of prescription drug fills for asthma and respiratory conditions

Additional CO APCD Environmental Studies

• Researchers at CU studied health impact of living near oil and gas sites:

"...found strong evidence that older adults and women with AFIb, atrial fibrillation, living near oil and natural gas wells may experience a worsening of their condition during development of those sites."

- Colorado Public Radio Coverage with link to study: <u>https://www.cpr.org/2024/06/27/living-near-colorado-oil-gas-sites-make-symptoms-worse/</u>
- Additional studies using CO APCD data:
 - Prevalence of asthma in 6-7 year old children in Denver county
 - Health impact of living near Rocky Flats



Accessing CO APCD Data and Research

- Contact us at <u>cfrank@civhc.org</u> to discuss potential projects
- Projects evaluated for feasibility from data and timeline perspective
- CO APCD Scholarship Fund available for Legislative requests
 - \$500,000 allocated by General Assembly annually
 - \$50,000 set aside for legislative projects, more potentially available
 - CIVHC works to scope projects, apply to scholarship and support public or nonpublic release of the data
 - CO APCD Scholarship Committee review with HCPF final approval



Questions and Feedback





Reach out to Cari Frank <u>cfrank@civhc.org</u>, or Clare Leather <u>cleather@civhc.org</u>



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