

The Health Effects of Disasters on Children and Seniors: Evidence from Hurricane Katrina

Troy Quast Associate Professor of Health Economics <u>troyquast@health.usf.edu</u>

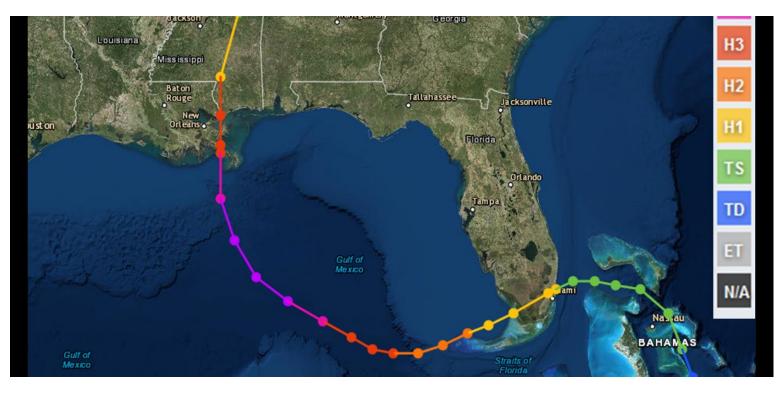
Acknowledgements

- Children analyses
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- Seniors analyses
 - Supported by the National Institute on Aging of the National Institutes of Health under award number R03AG050065. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.



Background - Katrina

- Summer 2015
- Over 1800 people killed (top 5)
- Property damage in excess of \$80b (costliest)



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Background - Rita

- ~4 weeks after Katrina
- Roughly 125 people killed
- Property damage ~\$18b





Background

- Previous research on health effects of Katrina & Rita
 - Emphasis on short-term effects
 - Much on access, some on outcomes
 - Vast majority survey-based
- General findings
 - Increased rates of acute & chronic conditions
 - Barriers to access



Background

- My projects
 - Children
 - Investigate children enrolled in emergency Medicaid waiver (TexKat)
 - Diabetes, asthma, mental health
 - Seniors
 - Those with diabetes
 - Maintenance screenings, ED visits & hospitalizations, mortality



Data

- Medicaid & Medicare data
 - Enrollment
 - Claims
 - Co-morbidities
 - Mortality

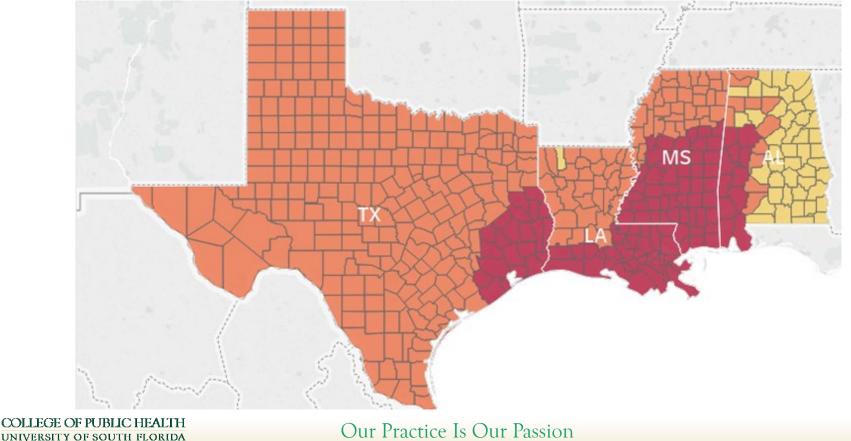


Data

Define affected & control subjects by

 County-level FEMA assistance level

- State of residence (2004)



Children: Diabetes

• Citation

- "Diabetes Care Provided to Children Displaced by Hurricane Katrina" (w Karoline Mortensen). *Disaster Medicine and Public Health Preparedness*. 2015;9(5):480–483.
- Screenings analyzed
 HbA1C, Microalbumin, Thyroid
- Complication analyzed
 DKA diagnosis
- Time periods
 - Pre-Katrina: Jan 2004 Aug 2005
 - TexKat: Sep 2005 Jun 2006
 - Post-TexKat: Jul 2006 Dec 2006



Children: Diabetes

-	TexKat (n=43)	Control (n=742)	Diff		TexKat (n=43)	Control (n=742)	Diff
HBA1C test				<u>Thyroid test</u>			
Prior to Katrina	0.31	0.31	0.00	Prior to Katrina	0.22	0.24	-0.01
During TexKat	0.45	0.45	0.00	During TexKat	0.31	0.26	0.05
Post TexKat	0.42	0.61	-0.19	Post TexKat	0.28	0.32	-0.04
<u>Microalbumin te</u>	<u>st</u>			<u>DKA diagnosis</u>			
Prior to Katrina	0.11	0.09	0.03	Prior to Katrina	0.07	0.07	0.00
During TexKat	0.14	0.10	0.04	During TexKat	0.11	0.09	0.02
Post TexKat	0.09	0.13	-0.04	Post TexKat	0.14	0.09	0.05





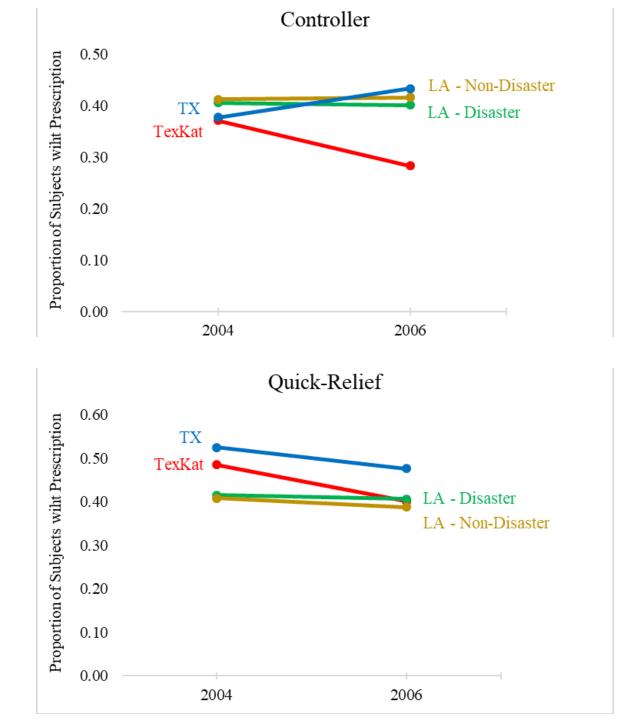
Children: Asthma

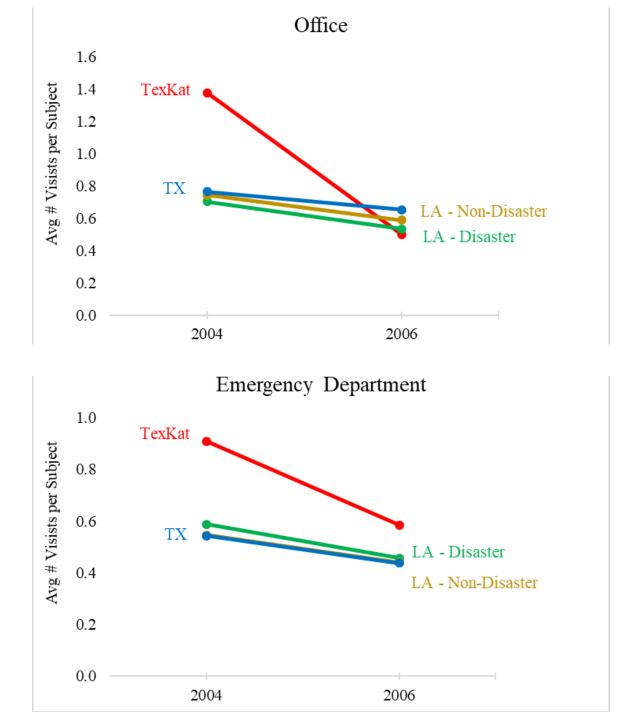
• Citation

 "Healthcare utilization by children with asthma displaced by Hurricane Katrina". *Journal of Asthma*. 2018;55(4):416–423.

- Prescription types
 Controller, quick-relief
- Encounter types
 - Inpatient, emergency dept, outpatient, inpatient
- Subject groups
 - Texkat, LA-Disaster, LA-Nondisaster, TX







Children: Mental Health

• Citations

- "Utilization of Mental Health Services by Children Displaced by Hurricane Katrina" (w/ Sean Gregory & Eric Storch). *Psychiatric Services*. 2019;69(5):580–586.
- Prescription types
 - Stimulants, antidepressants, mood stabilizers, antipsychotics
- Encounter types
 - Psychiatric service, physician office, emergency dept, inpatient



Children: Mental Health

Proportion of children with 1+ filled prescriptions for psychotropic medications (2005H1 vs 2006H1)

	TexKat	LA-Disaster		LA-Nondisaster		TX	
Medication class	Change	Change	p ^c	Change	p ^d	Change	p ^e
All	194	123	<.001	 095	.001	 058	<.001
Stimulants	132	094	.050	073	.001	052	<.001
Anitdepressants	093	037	<.001	027	<.001	025	<.001
Mood stabilizers	034	008	.020	004	.004	003	.015
Antipsychotics	032	011	.027	008	.019	.006	.004
Sedatives and hypnotics	017	006	.367	006	.374	009	.580
Anxiolytics	004	001	.631	001	.678	.003	.393
Miscellaneous	004	008	.714	004	.974	003	.982

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Children: Mental Health

Proportion of children with 1+ encounters by encounter type (2005H1 vs 2006H1)

	TexKat	LA-Disaster		LA-Nondisaster		TX	
Encounter type	Change	Change	р	Change	р	Change	р
Psychiatric services	039	050	.533	057	.319	004	.103
Physician office	194	077	<.001	075	<.001	019	<.001
Emergency department	.002	001	.710	002	.666	.000	.796
Inpatient	011	001	.222	.000	.203	.000	.284



Seniors: Diabetes Screenings

• Citation

- "Long-Term Effects of Disasters on Health Care Utilization: Hurricane Katrina and Older Individuals with Diabetes" (w Lijuan Feng), *Disaster Medicine & Public Health Preparedness*, Forthcoming.
- Screenings analyzed
 - Cholesterol
 - HbA1C
 - Microalbumin
 - Retinal
- Time periods
 - Pre: 2002-2004
 - Post: 2006-2008



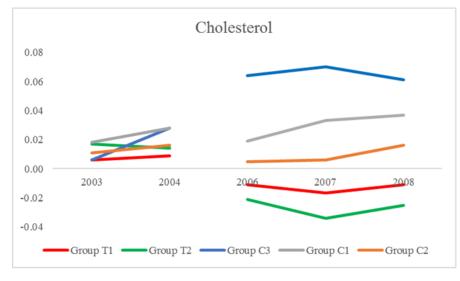
Seniors: Diabetes Screenings

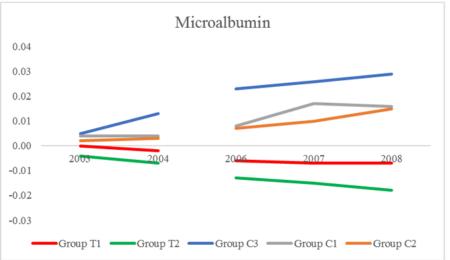
- Assignment based on
 - Pre-Katrina state
 - FEMA declaration for pre-Katina county of residence
 - Hurricane Katrina vs Hurricane Rita
 - Level (individual assistance, public assistance, none)

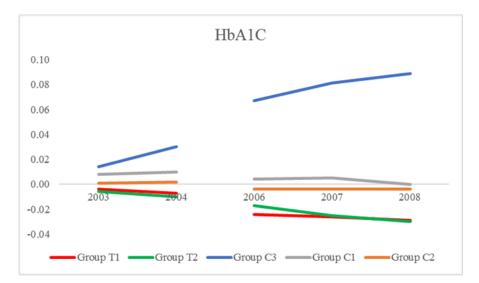
Group	Pre-Katrina State	FEMA Decl: Storm	FEMA Decl: Level
Treatment T1	Any	Katrina	Individual
Treatment T2	LA	Either	Individual
Control C1	MS	Either	Public
Control C2	TX	Either	Public
Control C3	AL	Either	None

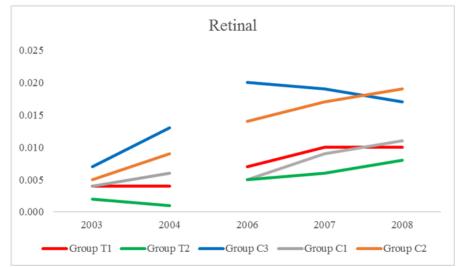


Seniors: Diabetes Screenings









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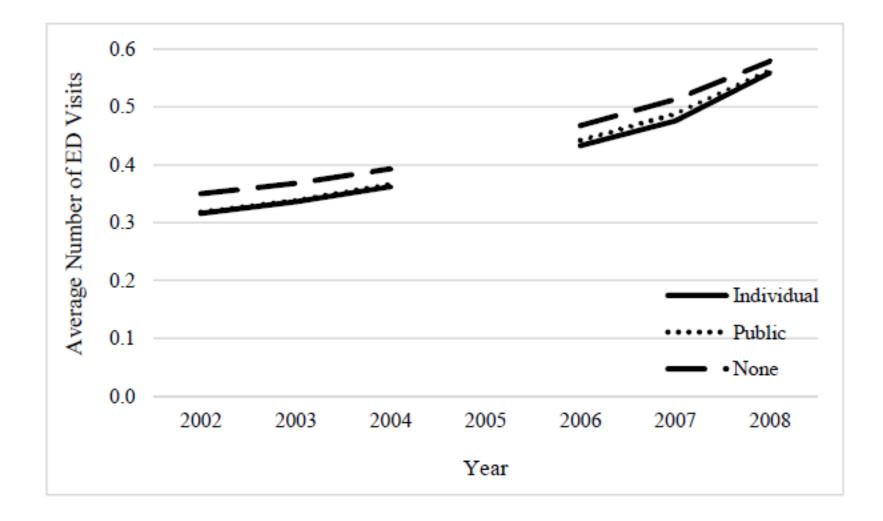
Seniors: ED Visits & Hospitalizations

• Citation

- "Emergency Department Visits by and Hospitalizations of Senior Diabetics in the Three Years Following Hurricanes Katrina and Rita", [looking for a home].
- Outcomes analyzed
 - Emergency department visits– Hospitalizations
- Groups
 - Individual assistance
 - Public assistance
 - No assistance

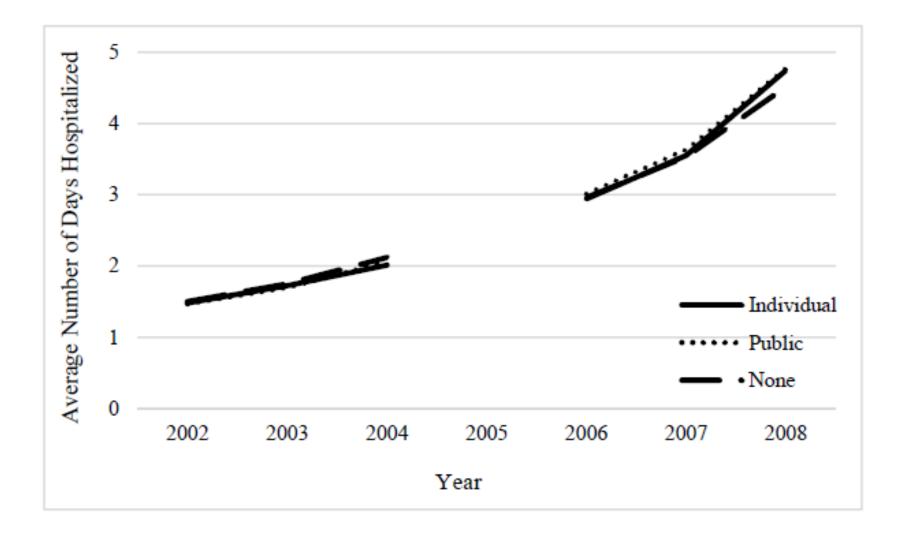


Seniors: ED Visits & Hospitalizations





Seniors: ED Visits & Hospitalizations





Seniors: Mortality

• Citation

- "The Long-Term Effects of Disasters on Seniors with Diabetes: Evidence from Hurricanes Katrina and Rita" (w/ Ross Andel & Archana Sudha), *Diabetes Care*, Conditional acceptance.
- Affected & unaffected one-to-one propensitymatched
 - Demographic characteristics
 - Coverage
 - Chronic conditions (27)



Seniors: Mortality

- Types of mortality
 - All-cause
 - By-cause
 - Diabetes mellitus
 - Major cardiovascular disease
 - Nephritis
- Affected subjects also differentiated by whether &, if so, where the individual moved after hurricanes



	One month	One year	Three years	Full period
All				
(n = 170, 328)				
All-cause	1.395 (1.298; 1.155)	1.132 (1.107; 1.158)	1.087 (1.070; 1.104)	1.100 (1.083; 1.116)
Diabetes mellitus	1.077 (0.837; 1.386)	0.911 (0.845; 0.983)	N/A	N/A
Heart disease	1.348 (1.206; 1.508)	1.146 (1.107; 1.186)	N/A	N/A
Nephritis†	1.574 (1.091; 2.273)	1.258 (1.124; 1.409)	N/A	N/A
Did not move to different				
county				
(n = 161,729)				
All-cause	1.401 (1.303; 1.508)	1.119 (1.094; 1.146)	1.073 (1.055; 1.090)	1.083 (1.066; 1.099)
Moved to different county $(n = 8,599)$				
All-cause	0.951 (0.695; 1.300)	1.242 (1.129; 1.366)	1.262 (1.180; 1.349)	1.405 (1.312; 1.503)
Moved to affected county $(n = 4,312)$, , , ,	· · · ·		<i>、 , , ,</i>
All-cause	1.095 (0.719; 1.668)	1.298 (1.137; 1.482)	1.361 (1.239; 1.496)	1.570 (1.423; 1.732)
Moved to unaffected county $(n = 4,287)$				
All-cause	0.886 (0.544; 1.442)	1.257 (1.094; 1.444)	1.183 (1.075; 1.303)	1.315 (1.195; 1.446)

Limitations of Analyses

- Don't know location at precise time of storm
- Concern re data immediately after storms
- Coding imperfections
- Medicaid churn
- Don't have data for Medicare Advantage enrollees
- Confounding of effects of Katrina & Rita
- Historic extremity of Katrina



That being said... possible takeaways

- Transition / extended assistance to emergency waiver enrollee
- Despite reductions in preventive or maintenance care, didn't always observe negative repercussions
- Differences may emerge years after disaster
- Yet, no evidence of mortality differences after initial shock
- \rightarrow More research needed

