

Long-term physician costs associated with obesity

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Adiposity (measure of body fat)

- Body Mass Index (BMI)

- Convenient & widely used measure

$$BMI = \left(\frac{kg}{m^2} \right)$$

Normal weight : $18.5 \leq BMI < 25$

Overweight : $25 < BMI < 30$

Obese : $BMI \geq 30$

- Obesity, a risk factor for a number of serious health conditions

Data (1)

- Administrative data on physician costs
- Entire population of Ontario
- Long term longitudinal analysis

McMaster Pilot Project links:

- Canadian Community Health Survey (CCHS) 1.1 (2000/01)
with
- Ontario Health Insurance Plan (OHIP) 1999/00 to 2009/10

Data (2)

- CCHS: BMI, socio-demographic and socio-economic variables and self-reported health
 - Respondents who gave permission to be linked (~87%)
 - Excluded:
 - Age <18 & >65 (age at the time of the survey)
 - Pregnant and breastfeeding
 - BMI <1% or >99% of the distribution
- OHIP: Physician services, physician type, physician billing for each service received by patient

Setting:

- Observe socio-demographic variables at 2001 and look at their physician costs over a long-term that spans from 1999/00 to 2009/10

Literature: Overall Picture

- Cost of obesity frequently researched
- Compared to normal weight, obese have
 - Higher health care costs
 - More physician visits
- But, difference between normal weight and overweight is not statistically significant

Literature: Ontario Studies

■ **Finkelstein (2001)**

- NPHS (1995/96) with OHIP (1994/95)
- Physician costs are 2 to 3 times higher for obese
- Smoking doubles these costs

■ **Janssen, Lam, and Katzmarzyk (2009)**

- CCHS 1.1 (2000/01) with OHIP (2002/03)
- Physician cost of females higher
- Physician costs of obese higher & increasing with age

■ **Tarride et al. (2012)**

- CCHS 1.1 + OHIP, DAD IP & DP (1 yr around the survey)
- Overall women had higher costs
- Obese have higher annual hospitalization, physician and total costs

Research Question

“how do the physician costs differ for a person given that he or she had a certain BMI in 2000/01”

Descriptive Statistics

CCHS 1.1 (Ontario)		Male	Female
	N	9,492	10,512
	Age	39.6	40.5
	BMI	26.2	24.9

		% Obese		% Overweight	
		M	F	M	F
Age Group	Gender				
	18-29	11	09	30	20
	30-45	19	15	44	26
46-65		22	20	45	36

Methodology

■ Self-reported BMI

- Corrected for measurement error
(Gorber et al., 2008, Shields et al. 2011)

■ Nonparametric Regression

- Unconditional shape of BMI – long-term physician cost relationship

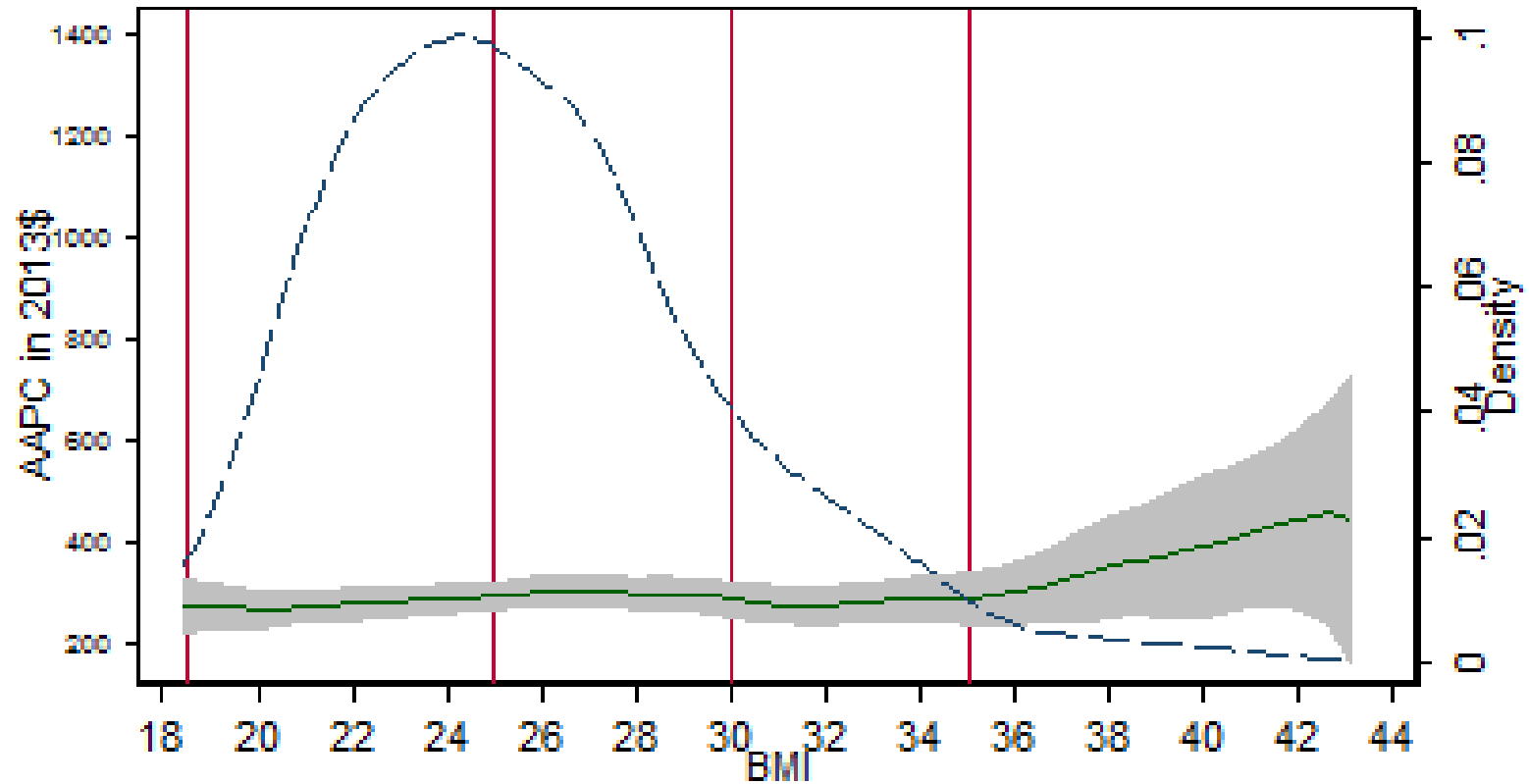
■ Semiparametric Regression

- Robinson's (1988) semiparametric regression
- Shape of BMI - MD cost relationship conditional on covariates

■ Annual Regressions

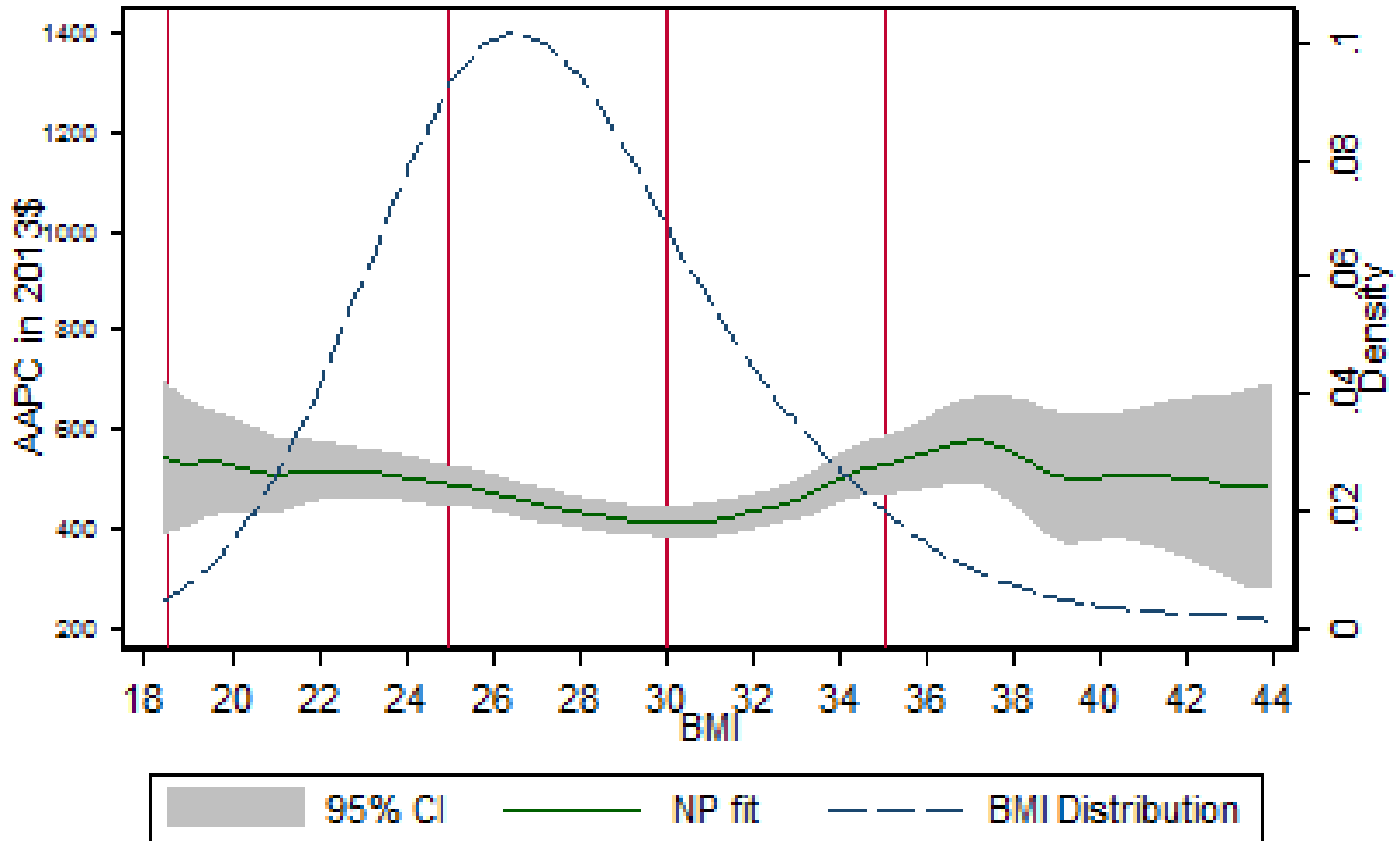
- TPM repeated for each year
- Power GLM used to evaluate priori assumptions

Physician Billing (Males: Ages 18-29)



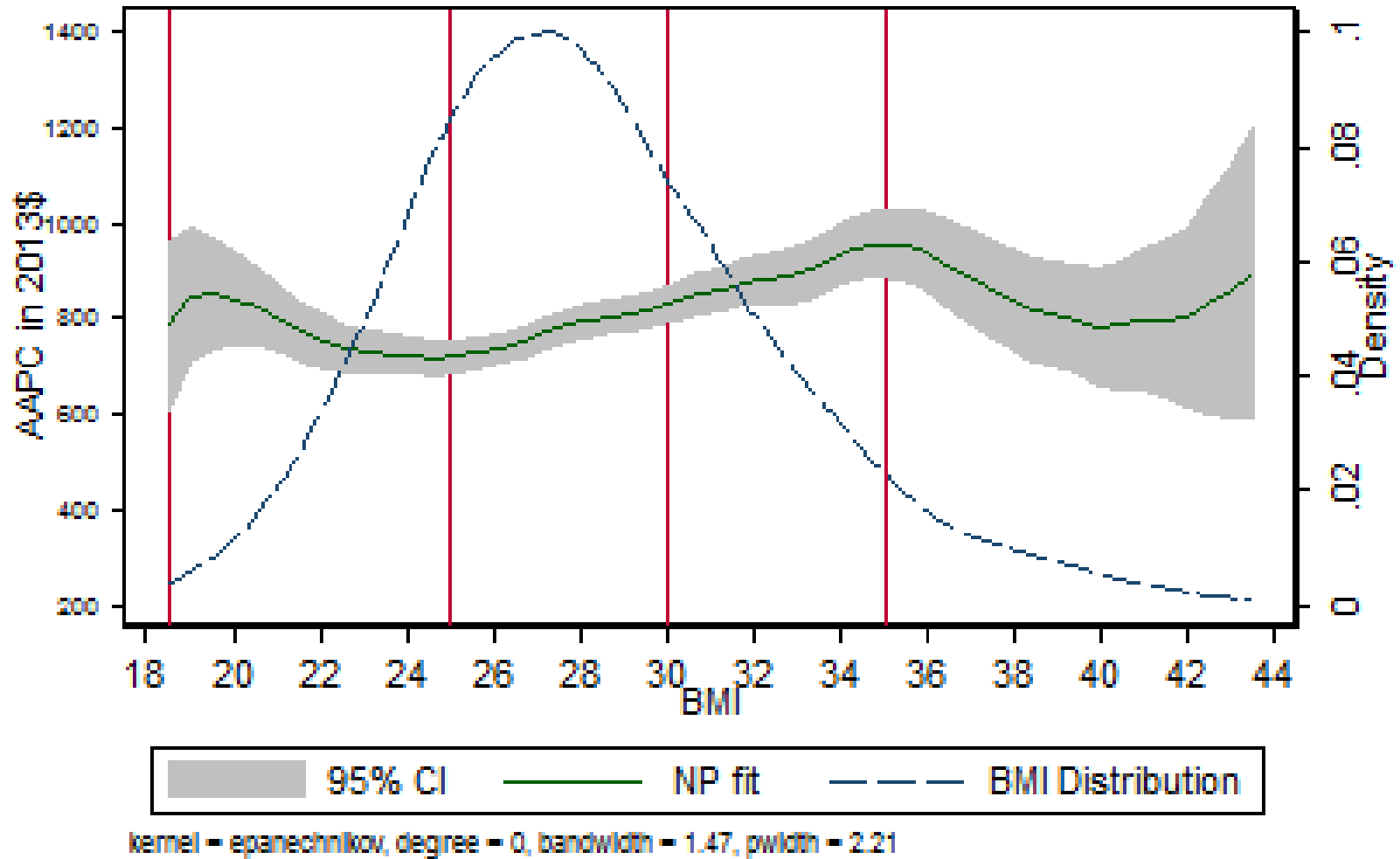
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Physician Billing (Males: Ages 30-45)

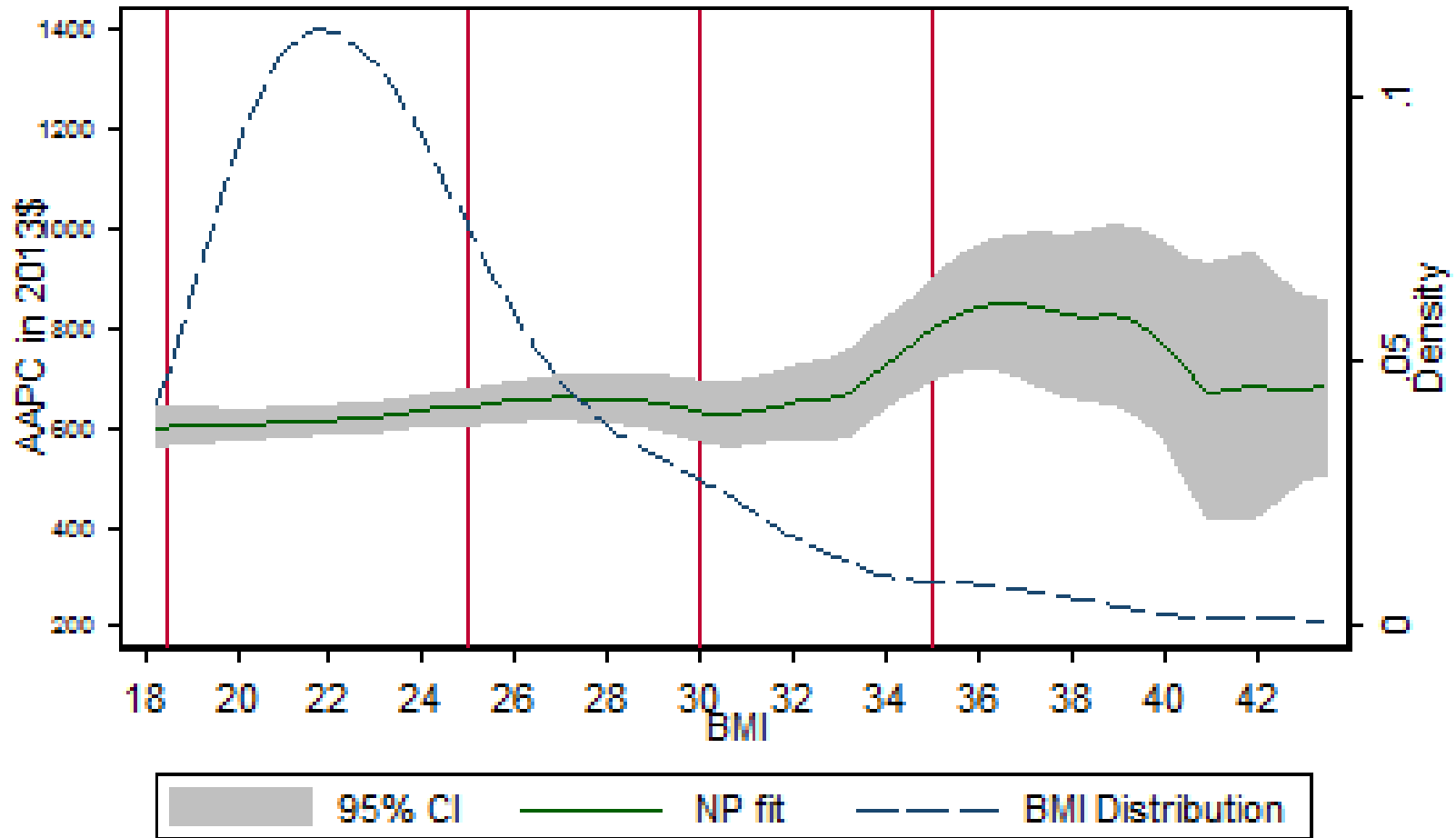


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Physician Billing (Males: Ages 46-65)

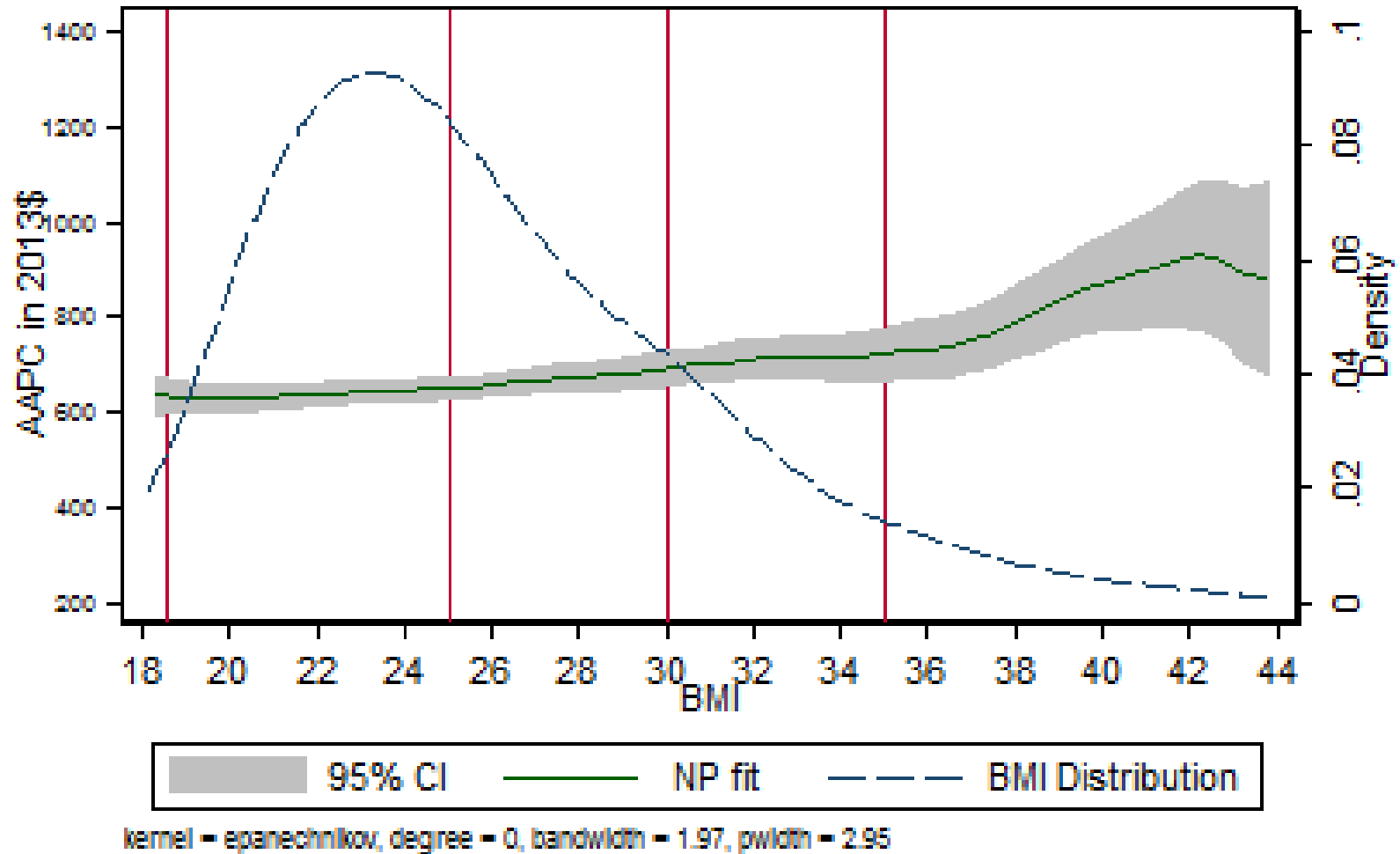


Phys. Billing (Females: Ages 18-29)

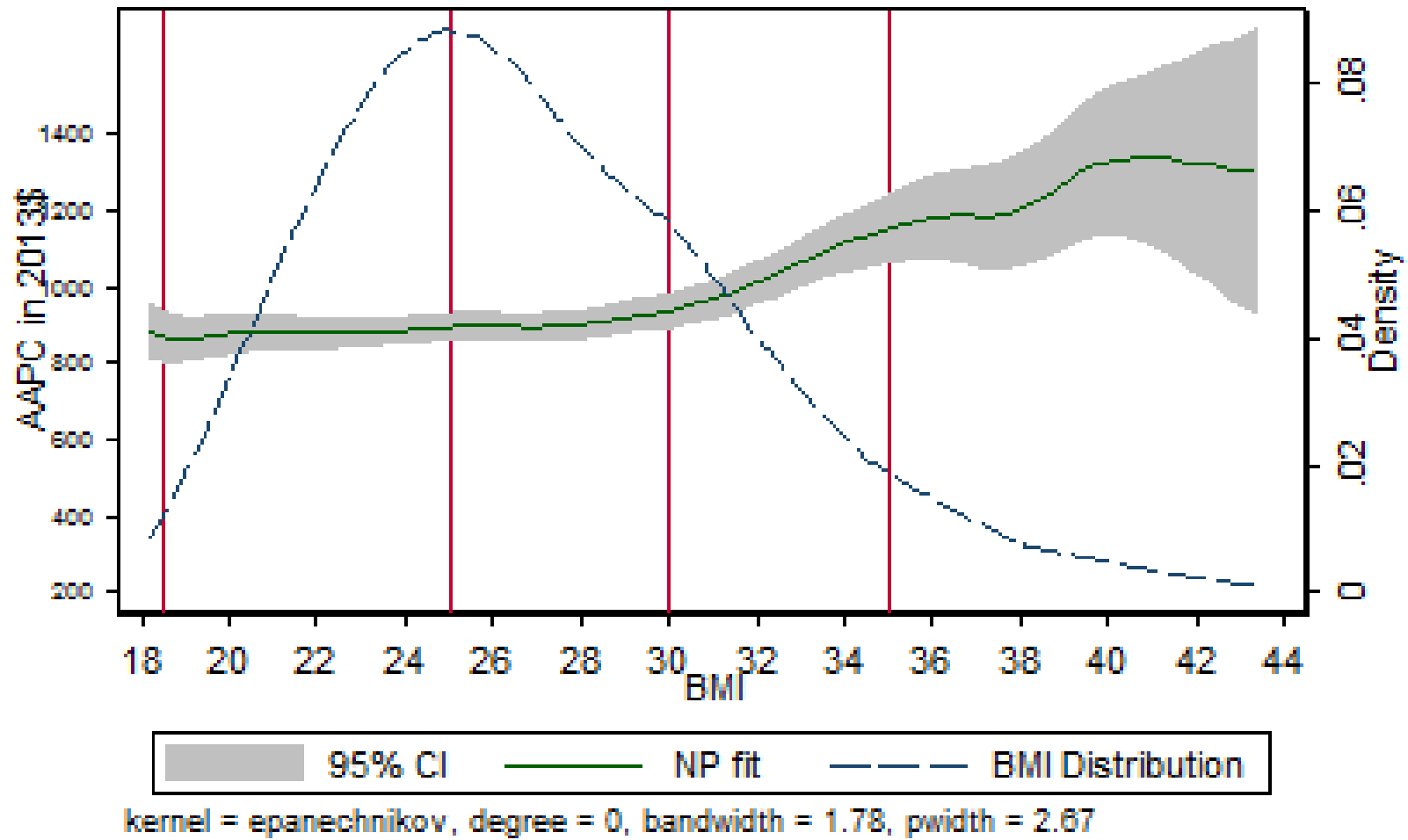


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Phys. Billing (Females: Ages 30-45)



Phys. Billing (Females: Ages 46-65)



Semiparametric Results

NP equivalent: $\text{Log}(AAPC_i) = \gamma_0 + \beta_{Ai}Age_i + f(BMI_i) + \varepsilon_i$

Ctrl for X_i : $\text{Log}(AAPC_i) = \gamma_0 + \beta_{Ai}Age_i + \delta_i S_i + \theta_i H_i + f(BMI_i) + \varepsilon_i$

- Controlling for covariates doesn't affect the shape of the relationship, but lowers its magnitude

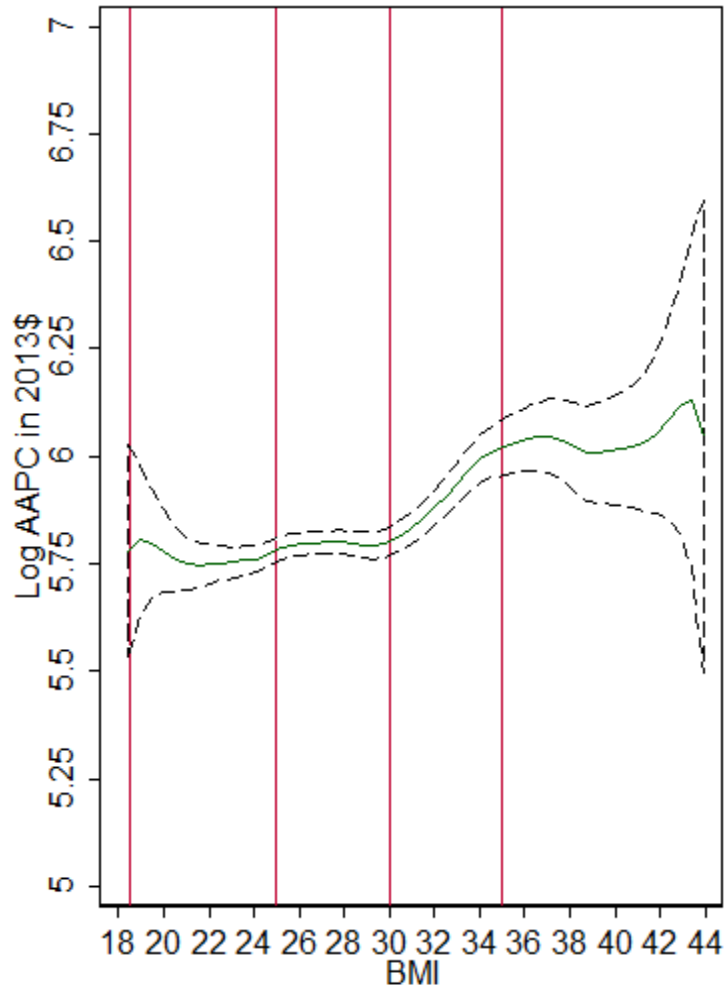
Physician Billing (Males)

Only Statistically Significant Estimates

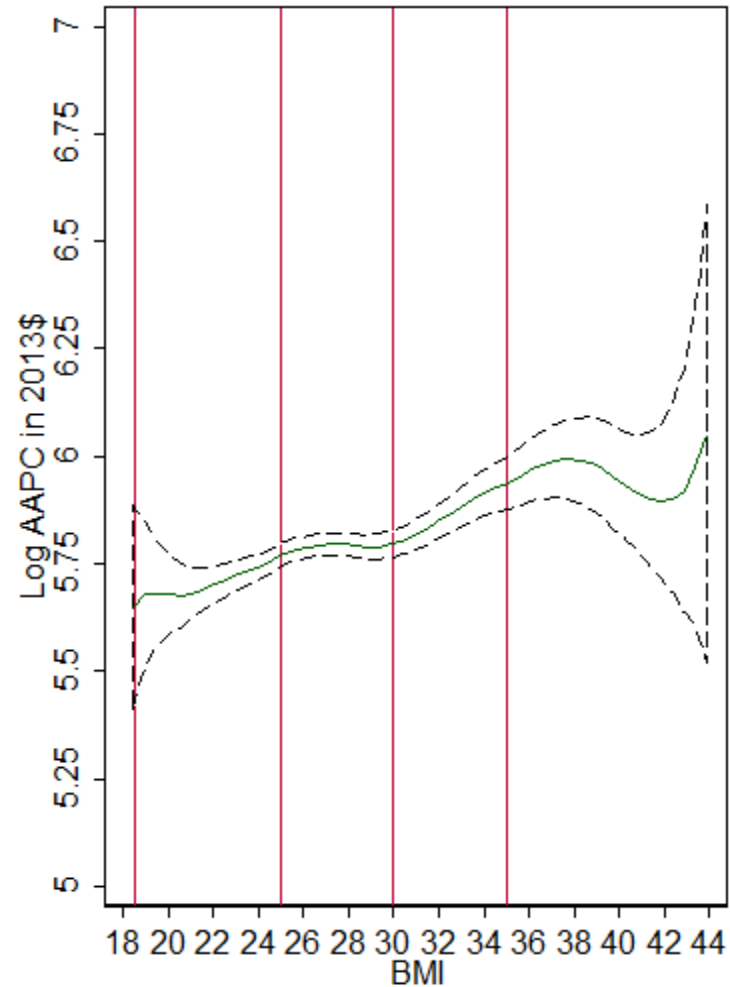
Diabetes	.310*** (-0.053)
Heart Disease	.329*** (-0.06)
Cancer	.466*** (-0.117)
Chronic Disease	.390*** (-0.032)
Born in Canada	-.219*** (-0.037)
Urban	.1699*** (-0.031)
Self-perceived Health (Poor)	.475*** (-0.048)
Adj_R2	0.263

Physician Billing (Males)

Controlling for only age



Ctrl. for health conditions

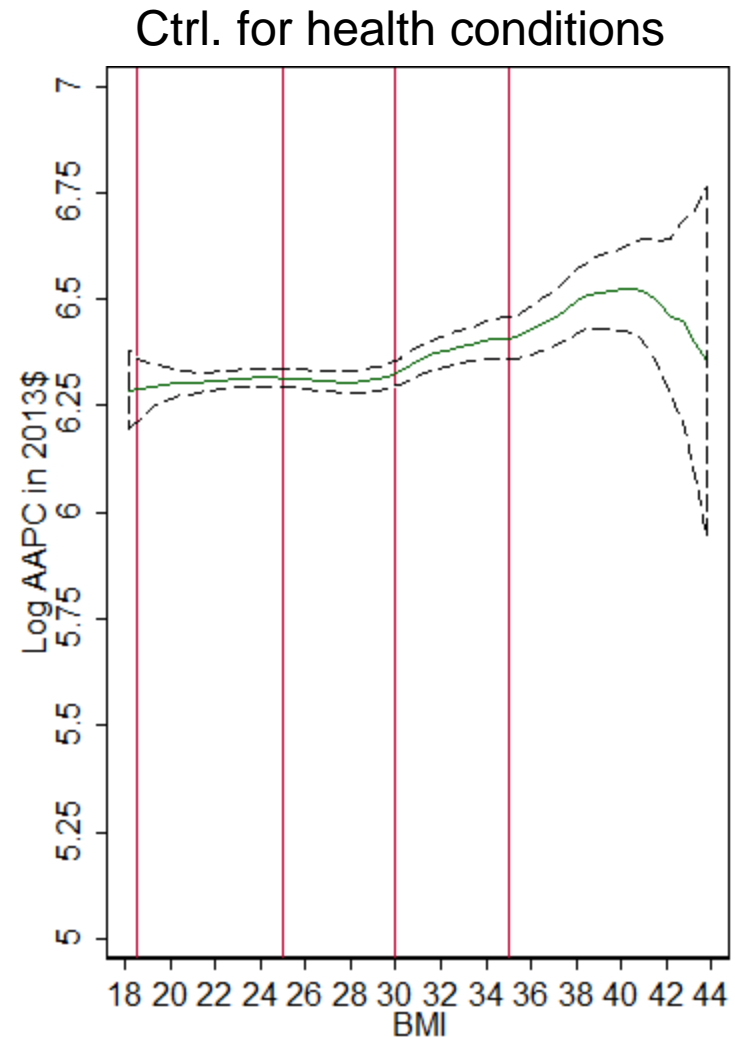
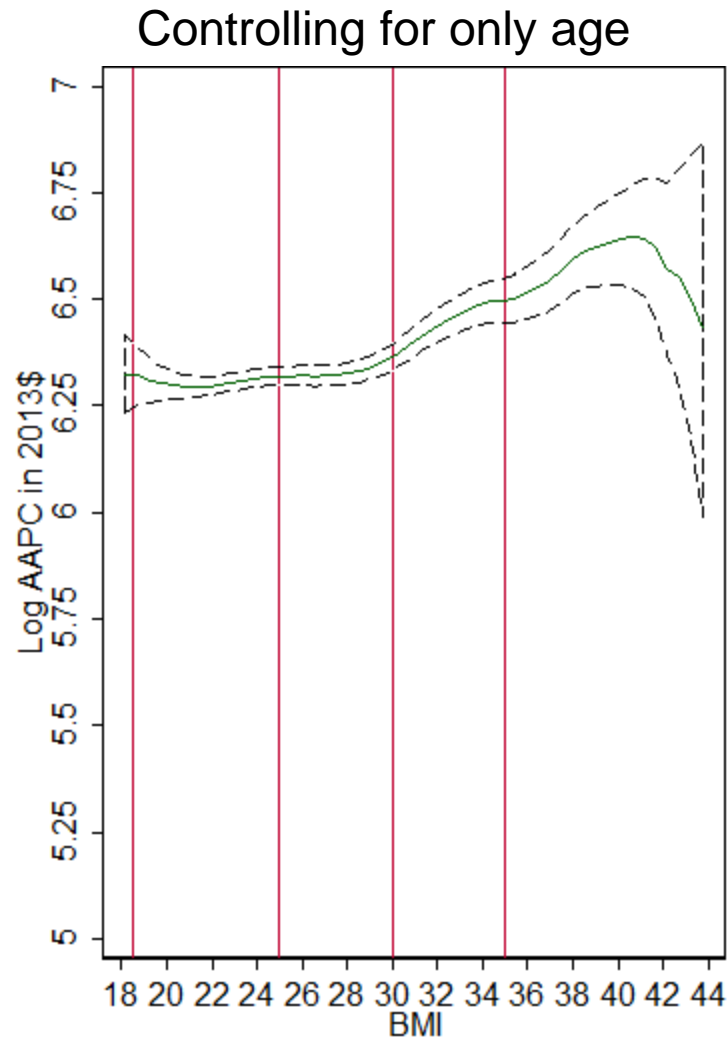


Physician Billing (Females)

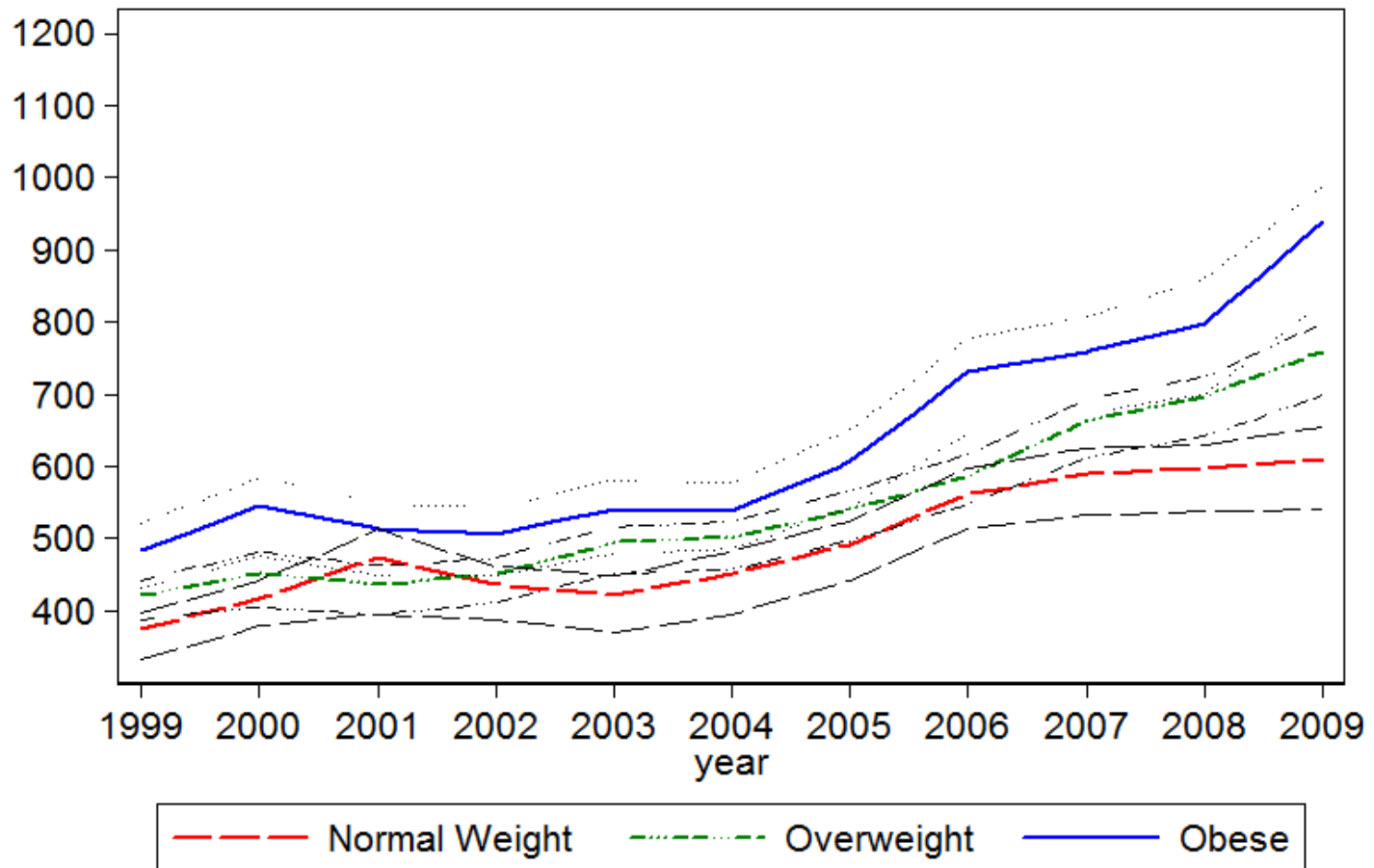
Only Statistically Significant Estimates

Diabetes	.254*** (-0.054)
Heart Disease	.262*** (-0.057)
Cancer	.307*** (-0.072)
Chronic Disease	.399*** (-0.028)
Born in Canada	-.124*** (-0.027)
Urban	.203*** (-0.027)
Self-perceived Health (Poor)	.427*** (-0.035)
Adj_R2	0.162

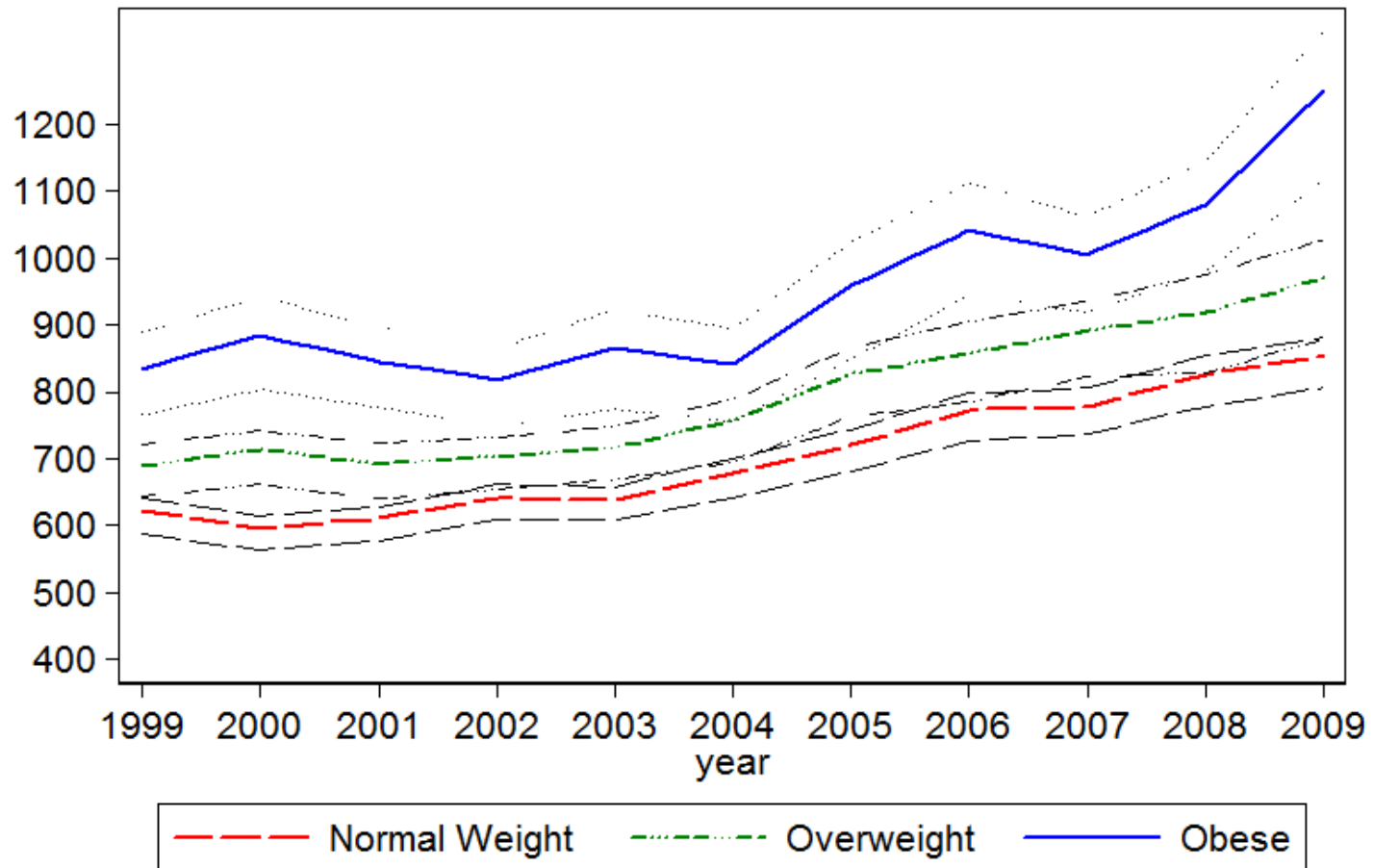
Physician Billing (Females)



Annual Regressions (Males)



Annual Regressions (Females)



Conclusion

- Morbid obesity is associated with higher physician costs in both genders
- Higher BMI is associated with higher physician costs
 - only at older ages in males
 - at all ages in females
- These are confirmed in annual regressions as well
- Controlling for existing health conditions does not alter the shape of the relationship between BMI and physician costs

Thank you

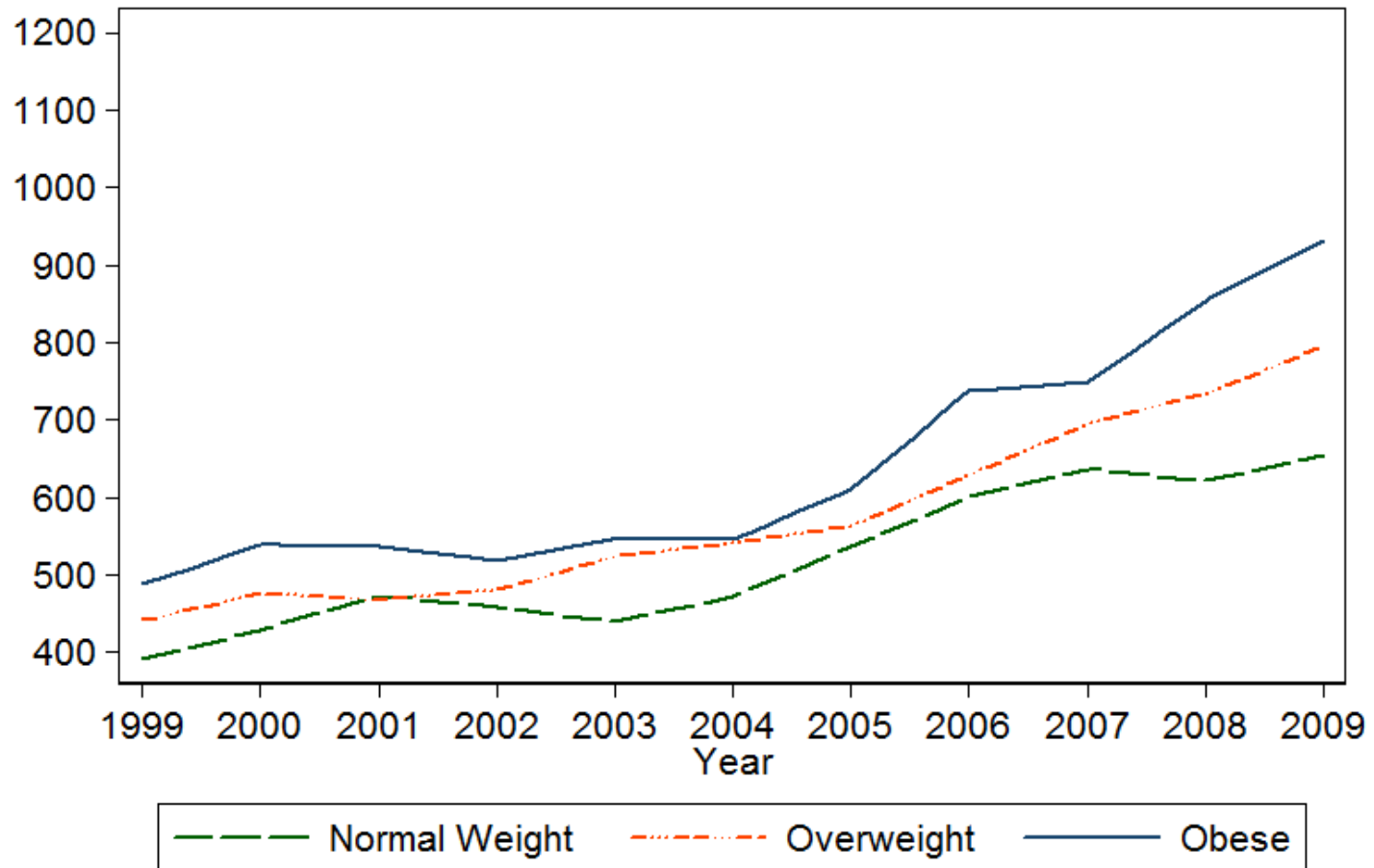
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References

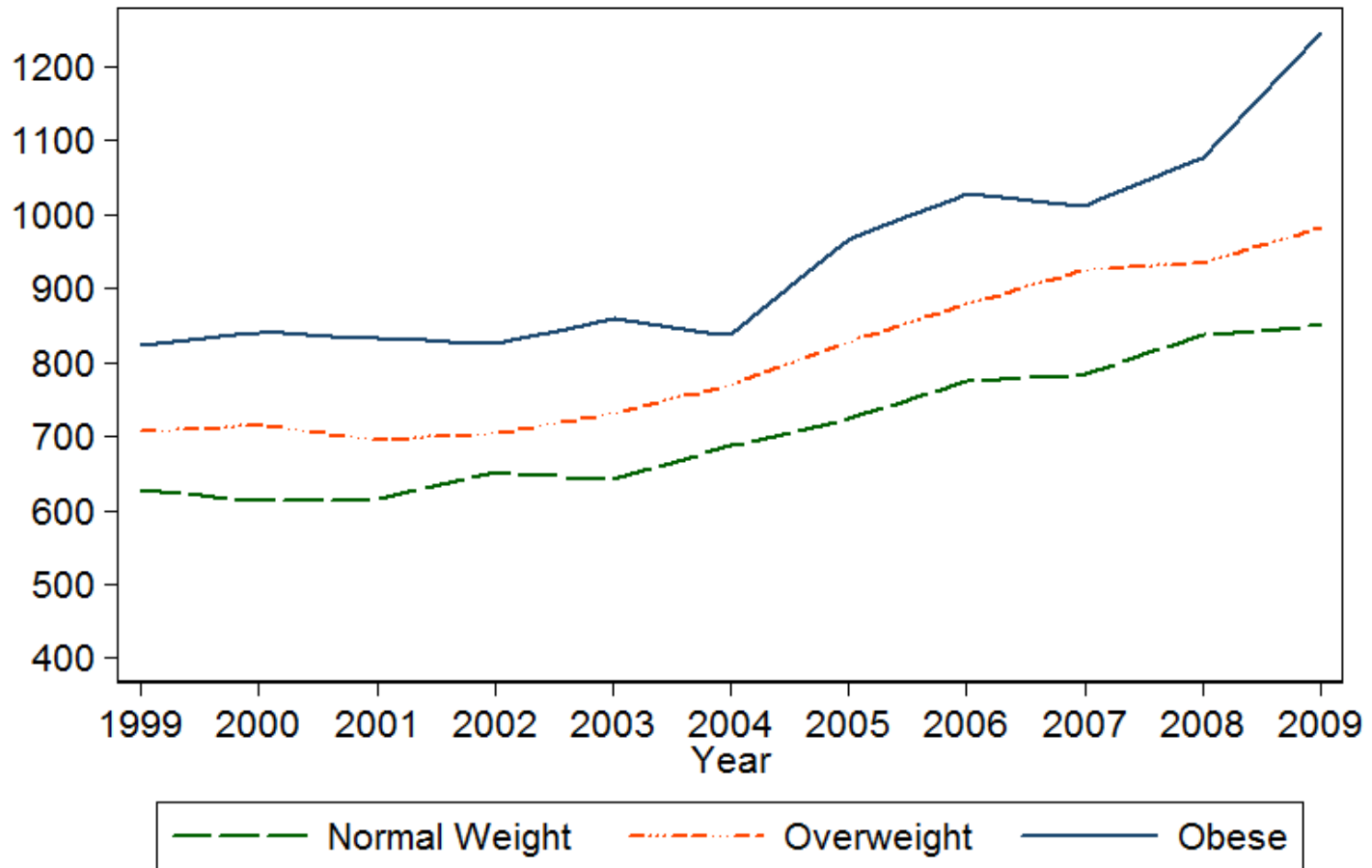
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Appendix Section

TPM with PGLM (Males)



TPM with PGLM (Females)



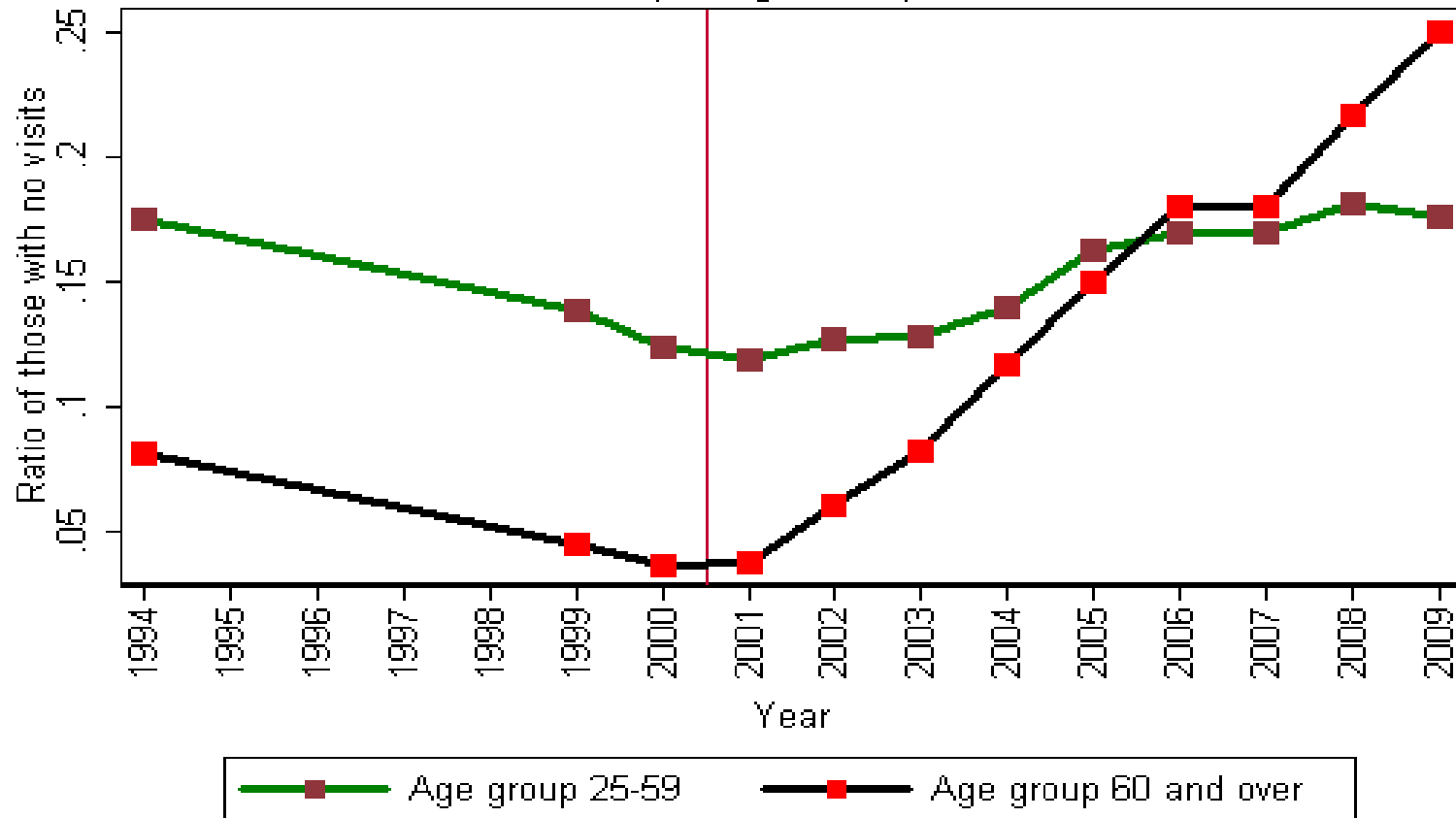
Attrition Issue – Age censored at 85

Attrition - CCHS 1.1



Attrition per age group

Attrition - CCHS 1.1
per Age Group



After our solution

