## **POSTS MADE IN JANUARY 2013**

## HOW TO PROVIDE EMERGENCY MEDICAL CARE FOR EVERYONE Leave a reply

NBC News reported on Tuesday, Jan 8 that the 2013 flu season is bringing so many people to the emergency departments of hospitals throughout the country that many hospitals are setting up tents to handle the overflow. The ED has been a critical part of the hospital since the late 1950s, when emergency departments were poorly equipped, understaffed small rooms that treated walk-in sick patients and those brought in by ambulance.

Over the past five decades hospital emergency departments have transformed into critical care centers, equipped with the latest in technology, staffed by skilled trauma specialists, and populated by patients seeking urgent and lifesaving care, as well as patients who use the ED as a refuge for ambulatory care that they cannot get elsewhere.

Data released from the National Health Interview surveys, conducted by the CDC (released 5/2012) indicate that approximately 20% of U.S. adults use the ED each year. Among these individuals, 79.9% come there because they lack access to other providers, and 66% who come have a serious medical problem. Uninsured adults (61.6%) are more likely to visit the ED because they have no other place to go, compared with adults with private insurance (38.9%) or those with public health plan coverage (48.5%).

http://www.cdc.gov/nchs/data/nhis/earlyrelease/emergency\_room\_use \_\_january-june\_2011.pdf Among hospitals, competition for ED patients is fierce. Hospitals advertise their emergency services, because one of their key profit centers are the patients admitted through the ED for cardiac care, various surgeries and other serious medical issues. This would make you think there should be an overabundance of EDs in the U.S. Quite the opposite is true. Overcrowding and long wait times continue to plague EDs despite serious efforts to triage and move people around more efficiently.

Meanwhile nearly one-quarter of EDs in urban and suburban areas of the United States are closing, even as the demand for their services increases. In 1990 there were 2,446 hospitals with emergency departments in non-rural areas. That number dropped to 1,779 by 2007 and continues to drop to this day. The total visits nationwide, however, increased by nearly 35 percent over the same period.

## http://www.nytimes.com/2011/05/18/health/18hospital.html? r=0

While it is true that poor and uninsured patients, many of whom are chronically ill, turn to the ED as their main health care provider, it is also true that Federal law requires that the ED evaluate and stabilize all patients regardless of their ability to pay. The catch 22 is how to provide this care, particularly with so many hospitals opting to eliminate their emergency departments, a trend that will increase with new regulations mandated by the Affordable Care Act which cuts emergency care reimbursements to hospitals and defers those costs to the state exchanges.

This is an issue that everyone needs to be concerned with because sooner or later you or someone in your family will need emergency care. You want to make sure it is available. Among the solutions to this problem are:

- 1. As a nation we need to vastly increase the number of urgent care clinics and community health centers that are available to help people with basic health care needs and non-critical medical issues.
- 2. We need more private health retail clinics nationwide that are staffed by trained nurse practitioners., are open on off-hours, and are covered by health insurance. Payers need to step up and agree to pay in part for these retail clinic visits that cost them considerably less than a visit to the ED. This is a real opportunity for the private sector to fill a vital need.

Addressing this problem is going to require a collaborative effort among payers, providers, public agencies, and private companies. There are a great number of consumers out there who need services; there's money to be made and a health crisis to avert.