Health Care Authority says Emergency Department partnership is improving care and saving Medicaid funds

OLYMPIA – In a report summing up more than a year of experience in reforming the state’s hospital emergency departments, the Health Care Authority says a partnership of doctors, hospitals and state Medicaid representatives is making a big difference in utilization, quality of care and savings.

The report also concludes the initiative reached its targeted savings goal in Medicaid fee-for-service emergency care costs. The report – “Emergency Department Utilization: Update on Assumed Savings from Best Practices Implementation” – is available on the Health Care Authority website.

The Emergency Department partnership, which was known as “ER is for Emergencies,” includes the Washington State Hospital Association, the Washington State Medical Association, and the Washington Chapter of the American College of Emergency Physicians as well as the Health Care Authority.

Medicaid’s Chief Medical Officer Daniel Lessler, M.D., noted that the latest data supported initial estimates that the changes would mean millions in annual savings for Washington Apple Health (Medicaid). However, he stressed the partnership was not just concerned with savings. The effort primarily targeted access to appropriate and improved care under a system that began with seven “best practices” proposed by the partnership.

“What’s best for patients is our top concern, and that includes providing care in the most appropriate and cost-effective setting — whether it’s a primary care office, urgent care center, or the emergency department,” said Dale Reisner, M.D., president of the Washington State Medical Association (WSMA). “This improves access to care for everyone.”

The report acknowledges that savings cannot be definitively attributed to the best practices alone, since other factors also affected health care — among them the transition to managed care over the same period or improved new data linkages and electronic information systems.

But the changes certainly played a role in lowering state expenditures, with a number of indicators all bending the cost curve for emergency departments.
Health Care Authority releases ER is for Emergencies report

The report showed that during Fiscal Year 2013:

- The rate of emergency department visits declined by 9.9 percent.
- The rate of “frequent visitors” (five or more visits annually) dropped by 10.7 percent.
- The rate of visits resulting in a scheduled drug prescription fell by 24 percent.
- The rate of visits with a low-acuity (less serious) diagnosis decreased by 14.2 percent.

“Although the Medicaid program and Washington taxpayers are clearly a key beneficiary of these improvements, this approach is also improving the overall care system’s capacity for quality improvement, better coordination and more detailed planning in emergency departments,” said Dr. Lessler.

“The ER is for Emergencies campaign demonstrates how public-private partnerships can benefit everyone,” said Scott Bond, president and CEO of the Washington State Hospital Association. “Hospitals are dedicated to working with our partners to do the right thing for patients, and sometimes that means seeking care that is not delivered in a hospital.”

“This effort shows that a collective of government, hospitals and physicians can be challenged to be fiscally responsible stewards of the health care dollar, crafting a program that saves millions of dollars, while fundamentally staying focused on improving access to care and patients' overall health,” said Stephen Anderson, MD, the past president of Washington’s American College of Emergency Physicians (WA-ACEP).

“This program demonstrates the power of public-private partnerships to improve care, control costs, and develop a better health care system for all,” said Nathan Schlicher, M.D., J.D., and a board member of both WA-ACEP and WSMA. “The future is bright for the ER is for Emergencies program, which continues to improve the health care quality in Washington state.”

The seven best practices were:

- An electronic system to exchange patient information between emergency departments. Currently 98 hospitals in the state are sharing this information system, accessing and sharing critical patient information much faster than before.
- Patient education to help clients understand the difference between emergencies and non-emergencies.
- Establishing emergency department awareness of patients who are frequent visitors.
- Implementing systems that effectively refer non-emergency patients to primary care providers within three or four days.
- Adoption of stricter guidelines for prescribing of narcotics in emergency departments.
- Enrolling at least 90 percent of ER prescribers in the state’s Prescription Monitoring Program.
- Making sure hospital ER staff get regular feedback reports and take appropriate action when those reports show utilization problems.
The ER is for Emergencies coalition is committed to continuing its efforts, since there are still many challenges and much more work to be done, including improving the coordination and communication of care plans between the ER physicians, primary care, and payers, and widening the conversations to address the roles of community health clinics.

Additional background

The **Washington State Health Care Authority** operates the two largest health care purchasers in state government – the Washington Apple Health (Medicaid) program for low-income state residents and the Public Employees Benefits Board (PEBB) system, which provides health care benefits to state employees and retirees and their dependents.

The **Washington State Hospital Association** represents all of Washington’s 98 community hospitals. The association takes a major leadership role in issues that affect delivery, quality, accessibility, affordability, and continuity of health care. It works to serve its members, increase access to health care, and improve health care quality.

The **Washington Chapter of the American College of Emergency Physicians** exists to support quality emergency medical care. The organization is widely recognized as the voice of emergency medicine and engages in frequent communications with the general public, key interest groups, and the media about the role and value of emergency medicine in the health care delivery system. WA/ACEP is a unifying force for emergency medicine physicians facing new challenges in a rapidly changing health care environment.

The **Washington State Medical Association**’s vision is to make Washington the best place to practice medicine and to receive care. The WSMA represents physicians and physician assistants throughout Washington state. For more information about the WSMA, please visit [www.wsma.org](http://www.wsma.org).

The “ER is for Emergencies” report is posted on the HCA website at [www.hca.wa.gov/Documents/EmergencyDeptUtilization.pdf](http://www.hca.wa.gov/Documents/EmergencyDeptUtilization.pdf)


A recording of the March 20 virtual news conference is at [https://wsha.webex.com/wsha/lsr.php?RCID=a5b234f2b94a7696c9de44ad4b956bad](https://wsha.webex.com/wsha/lsr.php?RCID=a5b234f2b94a7696c9de44ad4b956bad)