



## **7 Keys to Reducing Preventable Emergency Room Visits**

After a long battle, the WSMA, state hospital association (WSHA), and the Washington Chapter of the American College of Emergency Physicians (WA-ACEP) were successful in getting the state to abandon its “zero tolerance” policy that would have denied Medicaid emergency visits and cut hospital and physician payments. The coalition, with input from the Washington Academy of Family Physicians (WAFP), and the Washington State Chapters of both the American Academy of Pediatrics (AAP) and American College of Physicians (ACP), instead proposed a plan of best practices that addresses the root of the inappropriate use problem—access to primary care, chronic medical conditions, and substance abuse issues. And the plan protects patient safety.

Reducing preventable emergency room visits benefits everyone—patients, physicians, hospitals, and the state budget.

Now physicians and hospitals must show our alternative plan will be successful in reducing the number of preventable emergency room visits by Medicaid patients— with adoption of the best practices by July 1 and real savings demonstrated by January 15, 2013. The plan is intended to save millions of dollars, reduce low acuity and possibly preventable emergency room use, and protect patients by implementing these best practices:

1. Tracking emergency room visits to reduce “ER shopping.”
2. Implementing patient education efforts to re-direct care to the most appropriate setting.
3. Instituting an extensive case management program to reduce inappropriate emergency room utilization by frequent users.
4. Reducing inappropriate ER visits by collaborative use of prompt (72-96 hour) visits to primary care physicians and improving access to care.
5. Implementing narcotic guidelines that will discourage narcotic-seeking behavior.
6. Tracking data on patients prescribed controlled substances by widespread participation in the state’s Prescription Monitoring Program (PMP).
7. Tracking progress of the plan to make sure steps are working.

This isn't just a problem only to be solved by hospitals and emergency room physicians. It will require further collaboration with our primary care physician partners as we work to improve coordination of care and access issues for these Medicaid patients.

The WSMA has posted information on how to educate your patients on choosing the appropriate place to receive care—the physician's office, urgent care center, or emergency room. Look for this information and additional resources at [www.wsma.org](http://www.wsma.org) under the *ER is for Emergencies* banner. More information can also be found at [www.wsha.org](http://www.wsha.org) and [www.washingtonacep.org](http://www.washingtonacep.org). Working together we can reduce preventable emergency room visits while protecting patient safety.