Raising Awareness: Emergency Care v. Urgent Care
Albuquerque, NM

In 2011, the New Mexico Coalition for Healthcare Quality (NMC4HQ) launched a campaign to educate patients about whether medical situations warrant a visit to an emergency department (ED) or an outpatient care facility as part of its work leading the Aligning Forces for Quality initiative (AF4Q) in New Mexico.

The campaign, which was originally created for a New Mexico health system, included:
- Newspaper advertisements;
- Radio public service announcements;
- Posters in English and Spanish for hospitals and private employers to post at their facilities; and
- Customizable newsletter articles and website text about the effort.

In addition to local hospital systems’ individual efforts, three systems partnered with NMC4HQ by lending their brands to be featured on posters, ads, and other materials.

From September 2011 through February 2012, NMC4HQ distributed more than 500 posters to hospitals, businesses, senior centers, community centers, libraries, schools, county and city offices, and food banks. It also purchased 715 radio spots for public service announcements, and received an additional 1,700 spots at no additional cost—more than $150,000 in free radio advertising.

After the campaign, four local hospitals shared data and reported that non-emergency visits had dropped between 6 and 16 percent depending on the hospital, compared with the previous year—an average of 1,573 fewer non-emergency ED visits per hospital.

Due to the campaign’s success, NMC4HQ re-launched the campaign in 2012 and 2013.

Results:

- Non-emergency visits dropped by 6–16 percent in participating hospitals
- 1,573 fewer non-emergency ED visits per hospital, per year
The Wisconsin Collaborative for Healthcare Quality (WCHQ) is advancing care coordination for patients who are at high risk for overusing emergency departments (EDs) as part of its work leading the Aligning Forces for Quality initiative (AF4Q) across Wisconsin.

By partnering with the Milwaukee Health Care Partnership, WCHQ is leading an ED Care Coordination Initiative to connect high-risk patients in Milwaukee County with medical homes so they can receive timely, well-coordinated primary care. The program works with patients who are uninsured or on Medicaid and who do not have a medical home, are pregnant, are frequent ED users, or have a chronic condition, such as asthma, chronic obstructive pulmonary disease, diabetes, hypertension, or HIV/AIDS. Case managers at the county’s eight EDs identify patients in the target population and provide printed educational materials and in-person patient education. They also refer patients to a medical home and schedule follow-up appointments.

The program is beginning to see positive results. In 2012, the initiative scheduled more than 7,000 follow-up appointments for targeted patients. Forty-seven percent of patients kept these appointments, and roughly 46 percent returned for a second appointment within six months. For the patients who went through with their scheduled appointment, there was a 44 percent decrease in ED use when the six months pre-appointments were compared to the six months post-appointments. The Milwaukee Health Care Partnership is now testing ways to use health information technology to compare patients’ ED and inpatient utilization before and after their referral to a medical home.

Results:

47% of patients kept follow-up appointments

46% of patients who went through with their scheduled appointment returned for a second visit within six months
Using Primary Care Practices to Decrease Emergency Department Overuse
Detroit, MI

The Greater Detroit Area Health Council (GDAHC) leads a program in primary care practices (PCPs) to decrease emergency department (ED) use for primary care-treatable conditions as part of its work leading the Aligning Forces for Quality initiative (AF4Q) in Detroit.

The initiative began as a collaboration between GDAHC; Blue Care Network of Michigan, a statewide health maintenance organization; and Oakland Southfield Physicians (OSP), an independent practice association of 300 primary care physicians. The initiative engages OSP practices to reduce their patients’ avoidable ED use by implementing straightforward, “low-tech” interventions.

The program has developed an easy-to-use toolkit to guide practices’ efforts, including:

- Guidelines for helping patients over the phone and scripts for recorded messages to direct patients to the appropriate care provider;
- A welcome letter to patients with instructions for when they are confronted with an acute, but minor, illness or injury and their PCP is not available;
- A follow-up letter to patients who recently visited the ED; and
- Office scheduling protocols to allow same-day appointments, including during evenings and weekends.

The toolkit provides easy-to-implement ideas, such as a suggested message for after-hours answering service recordings. If the recording instructs patients to call 911 or go to the nearest emergency room, the toolkit recommends making this the last piece of information in the message, instead of the first.

Before the initiative, participating practices had increasing rates of ED use for PCP-treatable conditions, which peaked at 49 visits per 1,000 practice-affiliated Blue Care Network members in 2009. After the initiative began in 2010, rates decreased to 7.3 visits per 1,000.

ED Use for PCP-Treatable Conditions

<table>
<thead>
<tr>
<th>BEFORE:</th>
<th>AFTER:</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>2010</td>
</tr>
<tr>
<td>49</td>
<td>7.3</td>
</tr>
<tr>
<td>VISITS</td>
<td>VISITS</td>
</tr>
<tr>
<td>PATIENTS</td>
<td>PATIENTS</td>
</tr>
<tr>
<td>1000</td>
<td>1000</td>
</tr>
</tbody>
</table>