

VBC 101 CASE STUDY: EMERGENCY DEPARTMENT UTILIZATION

Reduction in ED Utilization

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GOAL: Reduce Emergency Department (ED) Utilization across all lines of business

OUTCOME: Earned max points for ED Utilization for 2019, 2020 and 2021 in True Performance

STEP 1: IDENTIFY AND ASSIGN ROLES AT THE PROVIDER OFFICE

- Champion to lead ED Utilization tracking
- Front desk team members to schedule appointments
- Providers to manage triage and escalation



STEP 2: MAKE CALLS AND CLEAR ED WORKLIST DAILY



- Perform three outreach attempts within a 7-day time frame
 - If ED visit is earlier in the week, do follow-up calls Thursday/Friday
 - Schedule patients for Annual Wellness Visit (AWV) and ED follow-up visits
 - Educate patients regarding ED use
- Mail letter to patient if unable to reach

STEP 3: UTILIZE KEY TOOLS FOR PATIENT OUTREACH AND EDUCATION

- Symptom coaching and education on same day appointments
- Develop patient facing posters regarding access for non-emergent care
- Provide pill holders, jar grips, chip clips with office hours and extended hours
- Create patient brochures regarding alternatives to the ED



STEP 4: ALERT PROVIDER OF PATIENTS WHO ARE MORE LIKELY TO HAVE REPEAT ED VISITS



- Identify drivers of ED visits by patients and track via Excel spreadsheet. Analyze notes and add to patient medical record.

Dunbar ED Utilization per 1000 (2018-2021)

Claims Incurred Through Date	Adults	Peds	Senior
12/31/2018	155	200	170
12/31/2019	144	203	132
12/31/2020	140	94	144
12/31/2021	121	141	163
% Decrease Over 4 Years	22%	29.5%	4.1%

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