



**MIDWEST
HEALTH
INITIATIVE**

Provider Playbook:

Reducing Avoidable Emergency Department Visits

Provider Playbook Overview

A Guide for Primary Care Physicians

Dear Primary Care Physician,

Health care works better for patients and the community when each patient has an established relationship with a primary care physician (PCP). Patients benefit from care provided and coordinated by their PCP. However, research released last year by the University of Maryland found that EDs contributed to about 48% of the medical care in the United States. We are concerned because of the impact on the quality and cost of care to patients.

MHI and its partner organizations in the Collaboration to Improve Appropriate ED Visits provide you with this playbook to support you as our community partner in strengthening relationships with your patients, while sharing some concerning information on local emergency department use. St. Louisans visit the emergency department more frequently than patients nationally, and the visits are more likely to be avoidable. Avoidable ED visits exacerbate health care's affordability problem without improving health. Each of these visits also carries a missed opportunity. Even visits for minor conditions offer primary care teams an opportunity to build a stronger connection and check-in on a patient's overall well-being.

We ask you to join our effort by integrating the strategies below into your office workflows:

- Ask your patients routinely if they have used the ED and if so, why.
- Help patients using the ED inappropriately find better solutions. Create standardized "patient action plans" for one or more common avoidable ED diagnoses.
- Identify patients and families that may benefit most from these standardized "patient action plans."
- Enlist your office team in sharing the plans with patients, and in helping patients understand and follow your guidance.

Health care's challenges are too complex for any one stakeholder to solve. All who provide, pay for and receive health care have a responsibility to improve quality and affordability. Please contact us with ideas on how employers can support primary care physicians to strengthen their connections to patients.

As a nation, we believe primary care is underutilized. Thank you for your commitment to your patients and your profession of medicine. For any questions or concerns regarding information provided in the Provider Playbook, please contact us at 314.721.7800.



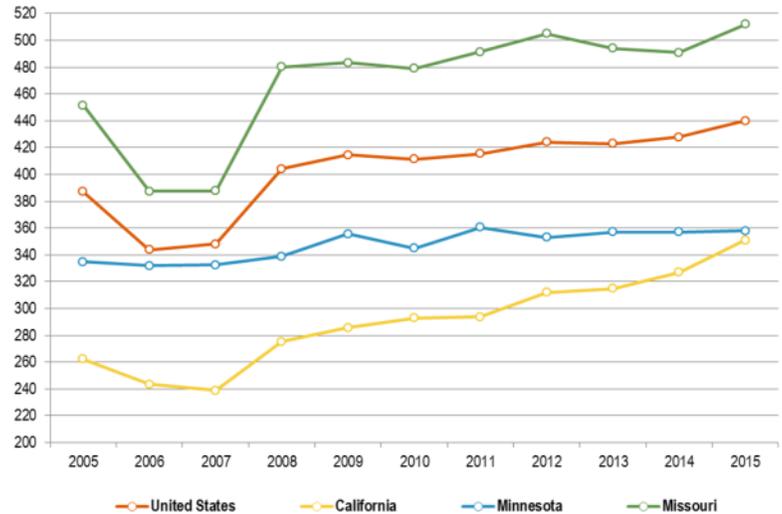
Table of Contents

THE PROBLEM.....	2
DRIVERS TO THE PROBLEM.....	2
THE OPPORTUNITY.....	2
EDUCATION SESSION FLYER.....	3
SAMPLE: AFTER HOURS TELEPHONE SCRIPT.....	4
SAMPLE: APPROPRIATE CARE SETTING PATIENT FLYER.....	5
SAMPLE: CONVERSATION GUIDE—TALKING POINTS WITH PATIENTS.....	6
SAMPLE: CONVERSATION GUIDE—TALKING POINTS WITH PARENTS.....	7
FEEDBACK AND CONTACT INFORMATION.....	8
THE MIDWEST HEALTH INITIATIVE AND PARTICIPATING PARTNERS.....	9

The Problem:

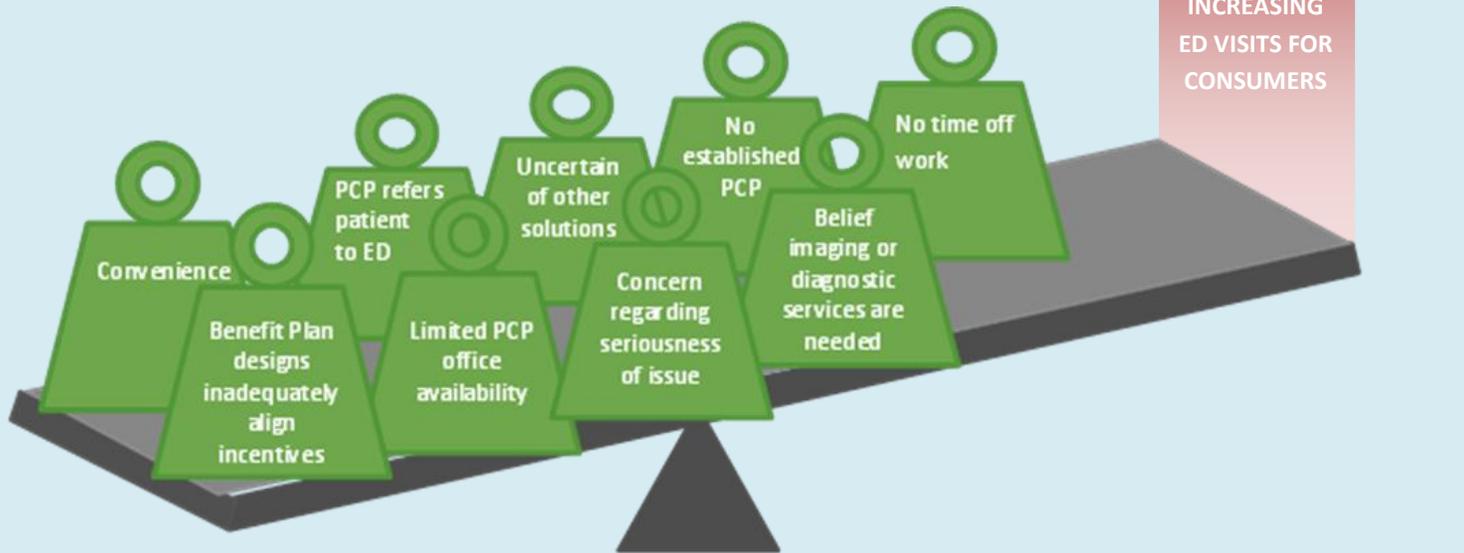
Kaiser Family Foundation’s (KFF) State Health Facts reports that ED utilizations grew in Missouri from 21st to 11th highest among states over ten years. From 2014 to 2016 Emergency Department (ED) utilization rates were 13% higher than national rates for commercially-insured patients in the St. Louis region. Approximately 15% of visits to St. Louis emergency departments were avoidable. The care in an ED can be three to five times the cost of care provided in an urgent care setting for the same diagnosis and even higher than care provided in a primary care or convenient care setting.

Hospital Emergency Room Visits per 1,000 Population by Ownership Type: Total, 2005 - 2015



Source: Kaiser Family Foundation’s State Health Facts

What’s Driving Emergency Department Utilization?



The Opportunity:

As a preventative step, consider asking your patients at least once a year if they have received care in an ED and the nature of their visit. Midwest Health Initiative (MHI) has found upper respiratory infections, ear infections in children, low back pain, urinary tract infections and severe headaches as some of the most common reasons for avoidable ED visits. For many patients, these are chronic conditions that become evident with repeated, minor occurrences. In your conversation, we ask that you share your recommended plan of action, noting their first action and outreach when they have an acute need. Through your support, patients can build confidence in managing their chronic conditions and reduce avoidable ED visits.

AVOIDABLE EMERGENCY DEPARTMENT VISITS

Learning and Sharing for Front Office Staff

*Are your patients utilizing
the Emergency Department when evaluation
in a primary care setting would be more
appropriate?*

The Midwest Health Initiative in St. Louis wants to offer your office staff the opportunity to participate in an educational session about this topic. In this session your office staff will learn about:

- ◆ *Strategies and communication methods to reduce avoidable ED visits for your patients*
- ◆ *Ways to build a stronger connection with your patients*

SESSIONS COMING SOON!

For more information and to sign up, please call us at **314.721.7800** or email Patti Wahl at pwahl@stlbhc.org.

Join us at our office located at **8888 Ladue Road, Suite 250** or have our staff come to you.

SAMPLE: After-Hours Voicemail Script

A patient's comfort is always important when calling an on-call doctor when they believe their situation is too urgent to wait until normal business hours. To help aid your patients you may consider using an after-hours dialogue similar to:

On-call nurse or doctor available

Thank you for calling **{Practice Name}**. Our office is now closed, however please listen to our following options. If this is an urgent medical need and cannot wait until normal business hours, there is a nurse/provider available to handle your call. Please hang up and call **{Phone Number}** for the on-call nurse/provider. For all non-urgent situations, please call us during normal business hours. Our regular hours are **{Days, Hours}**. If this is a life-threatening emergency, please hang up and dial 911.

On-call doctor with the Exchange

Thank you for calling **{Practice Name}**. Our office is now closed, however please listen to our following options. If this is an urgent medical need and cannot wait until normal business hours, there is a physician available to take your call. Please hang up and call the Emergency Exchange at **{Phone Number}** to speak with the on-call physician. For all non-urgent situations, please call us during normal business hours. Our regular hours are **{Days, Hours}**. If this is a life-threatening emergency, please hang up and dial 911.

No on-call nurse or doctor available.

Thank you for calling **{Practice Name}**. Our office is currently closed. Our normal business hours are **{Days, Hours}**. If your call is in regards to a non-urgent medical need, please call us back during normal business hours. If this is a life-threatening emergency, please hang up and dial 911.

Where To Go For Care?



Primary Care Physician

Start by contacting your primary care physician. He/She knows you and your health history.

- * Runny nose
- * Fever/cold/sore throat
- * Sore throat
- * Allergies
- * Earaches
- * Rashes and insect bites
- * Urinary discomfort
- * Checkups/vaccinations
- * Preventative care



Convenient Care

Convenient care is there for you when you can't get in to see your PCP. Can usually be found in drug stores, such as Walgreens or CVS.

- * Runny nose
- * Fever/flu/cold
- * Sore throat
- * Allergies
- * Earaches
- * Rashes and insect bites
- * Urinary discomfort
- * Minor cuts and wounds



Urgent Care

Urgent cares are prepared to handle conditions seen at convenient care centers and more.

- * Allergic reactions
- * Sprains and strains
- * Minor bone breakages (no bone penetration)
- * Minor burns
- * Mild skin conditions
- * Minor head trauma
- * X-rays



Emergency Department

The Emergency Department is available for serious or life-threatening health situations.

- * Trouble breathing
- * Severe allergic reactions
- * Uncontrolled bleeding
- * Chest pains
- * Poisoning or drug overdose
- * Severe burns
- * Broken bones (bone is visible)
- * Severe pain
- * Serious injury
- * Sudden vision impairment

To find more information and examples of these facilities, visit the links below:

Mercy- https://www.mercy.net/content/dam/mercy/en/pdf/MRC_32638_When-to-go-Where_Urgent-Convenient-ER_Guide.pdf

UnitedHealthcare - <https://www.uhc.com/checkchoosego>

WHEN SHOULD I CALL 911?



Do not operate a vehicle if you are experiencing severe bleeding, chest pains, vision impairment or stroke like symptoms. Wait for an ambulance and emergency responders.

Conversation Guide – Talking Points with Patients on ED, Urgent Care and Convenient Care Use

Getting the Conversation Started:

- When you choose one of our primary care physicians, your health care becomes our responsibility and we work as hard for your health as you do.
- Part of our commitment is making sure you receive the care you need when you're sick – even if our office is closed.
- You can help by calling us when you think you may need care.
- **ELICIT FEEDBACK ON BARRIERS:** Have you ever had trouble reaching someone here or making an appointment when you needed one?

Understanding Patients' Current Habits:

- Have you used an emergency department, urgent care or convenient care in the past year?
 - ⇒ **YES:** What was going on? Tell me about your experience.
 - ⇒ **NO:** I'm glad you haven't had the need.

Reasons to Only Use Emergency Rooms and Urgent Care When Necessary:

- Emergency rooms are setup to care for serious or life-threatening situations. Urgent care centers are prepared to handle conditions seen at convenient care centers and more. Generally, they are not familiar with you or your medical history. There is also a chance you may receive more care than you need.
- There are sick and contagious people in these settings. During cold and flu season, there's an even greater chance you may pick up an illness from another patient.
- **TALK BACK:** Does this make sense to you? Have you had any of these experiences happen to you?

What to Do When You Need Care:

- If you're not feeling well, we can quickly set you on the path to recovery. Our office has your medical history and my staff can easily consult me about your care.
- Seeing us when you're sick, even if it's not serious, helps us manage your health.
- When we're closed, we still want to make sure you receive the right care. We recommend (**INSERT SOLUTION – NURSE LINE, ANSWERING SERVICE, TRUSTED PARTNER**).
- Before you leave, I'll give you a (**POSTCARD, FLYER, LETTER**) with this information. If your phone has a camera, it may help to take a picture of it.
- It also has examples of when you may need an emergency room, urgent care or convenient care.
- I know you have (**INSERT CHRONIC CONDITION**). If you start to feel (**INSERT SYMPTOMS**) then (**INSERT YOUR PROTOCOL**). We have this information written down too.
- **TALK BACK:** Is there anything you have questions about? Can you tell me what you might do the next time you feel sick?

Conversation Guide – Talking with Parents About Emergency Department, Urgent Care and Convenient Care Use

Getting the Conversation Started:

- When kids get sick, especially babies, it's tough to know if they need care and, if so, how quickly. Part of our commitment to your family is making sure your children receive the care they need.
- Call our office as soon as you think your child may need to be seen. We offer same-day visits every day and will do our best to find a time that works well for you. We don't schedule well visits during these times. We set them aside for kids who need to be seen quickly—whether it's a minor illness like a sore throat, fever or ear infection or a more serious condition like asthma acting up.
- **(INSERT AS APPLICABLE)** - We also open for a few hours on weekday evenings and Saturdays. You also can schedule an "e-visit" through our patient portal. And, of course, we have a 24-hour call line.
- **GAIN FEEDBACK ON BARRIERS:** Have you ever had trouble making an appointment?

Have you used an emergency department, urgent care or convenient care for your child in the past year?

- Have you used an emergency department, urgent care or convenient care in the past year?
 - ⇒ **YES:** What was going on? Did you choose a place for children? Tell me about your experience.
 - ⇒ **NO:** I'm glad you haven't had the need.

Reasons to Only Use Emergency Department and Urgent Care When Necessary:

- There's sick people there. During cold and flu season, there's an even greater chance your child may pick up an illness from another patient. This is a real and serious risk, particularly for young children.
- These facilities often have long wait times. It's no fun to be waiting around with a sick child.
- The cost is typically much more than an office visit.
- Emergency departments and urgent care don't know your child's medical history and they don't always share information back with us. This makes it more difficult for all of us to know when a minor illness like an ear infection or cough may benefit from a different approach or the opinion of a specialist.
- And, your child may receive more care than needed. We find some urgent care centers prescribe antibiotics even when they are not helpful. This puts kids at risk for allergic reactions and serious conditions including infections like c-diff. Though these complications don't happen often, they happen. Far more frequently, kids get upset stomachs and diarrhea—all for no benefit.
- **TALK BACK:** Do these make sense? Have you had any of these experiences?

What to Do When You Need Care:

- We can almost always see your child the same day. Our office has your child's medical history and my colleagues can easily consult me about your child's care.
- Here's a **(INSERT SOLUTION—POSTCARD, OVERVIEW, WEBSITE)** with tips for when your child is not feeling well and when we DEFINITELY want you to call the office. Note the tips are different for infants. This guide is just to help. Always call with questions or if your child may need to be seen.
- When we're closed, we recommend **(INSERT SOLUTION—NURSE LINE, ANSWERING SERVICE, TRUSTED PARTNER)** Before you leave, I'll give you a **(INSERT SOLUTION—POSTCARD, LETTER)** with this information. If your phone has a camera, it may help to take a picture of it.
- I know your child has **(INSERT CHRONIC CONDITION)**. If your child starts to feel **(INSERT SYMPTOMS)** then **(INSERT SOLUTION)**. We have this information written down too.
- **TALK BACK:** Can you tell me what you might do the next time your child feels sick?



Feedback

Thank you for taking the time to review this provider playbook. We appreciate your commitment to your patients. We hope you find the playbook useful and welcome your feedback. If you need to reach us or have any ideas to share, please contact us through the following options below.

By phone: 314.721.7800

By email: pwahl@midwesthealthinitiative.org

By website: www.midwesthealthinitiative.org



**MIDWEST
HEALTH
INITIATIVE**

Who is MHI?

Collaboration to Improve Appropriateness of Emergency Department Utilization

Purchasers:

Ameren Corporation
Bi-State Development/Metro
The Boeing Company
Caleres
Carpenters' Benefit Trust Funds of St. Louis
Charter Communications
Drury Hotels Company
Francis Howell School District
Monsanto Company
Parkway School District
Spire
UFCW Local 655

Providers:

BJC Healthcare
Blue Fish Pediatrics
Mercy
Saint Louis University
Signature Healthcare Foundation
St. Louis Physician Alliance
St. Luke's Hospital
Total Access Urgent Care
Washington University

Health Plan and Other Suppliers:

Aetna
Anthem
Cigna
Express Scripts
Lilly USA, LLC
UnitedHealthcare

Community Organizations:

For the Sake of All
Missouri Foundation for Health

Consultants:

Aon Hewitt

Overview:

Founded in 2010 by the St. Louis Area Business Health Coalition and local health plan leaders, the Midwest Health Initiative is St. Louis' regional health improvement collaborative. It brings together health care providers, purchasers and consumers to identify and share commitment toward priorities in our region related to improving health and creating a high-quality, high-value health care system. MHI stewards the region's largest multi-payer, commercial claims dataset housing more than 1.6 million lives. MHI data is used to support physicians' and hospitals' quality improvement efforts, assist in research to improve the health of our citizens and provide the St. Louis community an unprecedented view of how we spend our collective health care resources.

Mission:

To provide a forum where trusted information and shared responsibility are used to improve health and the quality and affordability of health care.

Vision:

A transparent health care community that leads our nation in health, care quality and affordability.

Values:

-  Our community's interest comes first.
-  Progress cannot be achieved without active engagement and collaboration.
-  Transparency is the foundation of accountability.
-  Learning from others is the basis of all advancement.
-  Resources are limited.

