

# Many hospital emergency department visits could be treated elsewhere, study finds

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About 17 percent of all visits to hospital emergency departments across the United States could be treated at retail medical clinics or urgent care centers, potentially saving \$4.4 billion annually in health care costs, according to a new RAND Corporation study.

Conditions that could be treated safely outside hospitals include minor infections, strains, fractures and lacerations, according to findings published in the September edition of the journal *Health Affairs*.

"Patient traffic to hospital emergency departments has been growing, but a significant proportion of patients could be safely treated in these alternative settings," said Robin Weinick, the study's lead author and a senior social scientist at RAND, a nonprofit research organization. "Diverting these patients to alternatives such as retail clinics and urgent care centers could shorten their [waiting times](#) and save money."

More Americans are using hospital emergency departments because they face long waits for appointments with their physician and limited after-hours options. Many studies have found the cost of treating of nonemergent conditions in the emergency department is significantly higher than in other settings, which can increase patients' out-of-pocket costs and add avoidable spending to the nation's [health care bill](#).

Alternative care settings for non-emergency care such as retail medical clinics and urgent care centers have increased over the past decade. Retail clinics, located in pharmacies or grocery stores, are typically

staffed by [nurse practitioners](#) and to treat a limited range of health conditions such as sore throats or [urinary tract infections](#). Urgent care centers are freestanding physician-staffed facilities that offer extended hours, onsite x-rays and laboratory testing, and which can treat a broader range of conditions, including minor fractures and serious cuts.

Both retail clinics and urgent care centers are open in the evenings and on weekends and allow for drop-in appointments. Prior work has shown they are substantially cheaper than an emergency department.

RAND researchers analyzed information about people who visited retail medical clinics and urgent care centers and compared it to profiles of patients who visited hospital emergency departments during 2006. They examined issues such as the severity of injuries and illnesses seen in emergency departments, as well as the volume and mix of cases seen when alternative care settings are open.

Based upon the comparisons, researchers estimated that 13.7 percent of all emergency department visits reviewed could have been treated in a retail medical clinic, although that proportion decreases to about 8 percent when the analysis is restricted to visits that occur when retail clinics typically are open.

An additional 13.4 percent of all hospital emergency department visits could be treated at an urgent care center, although that proportion decreases to about 9 percent when cases are restricted to those seen when the centers typically are open.

Overall, although the researchers estimated that 27.1 percent of all hospital emergency department visits could be managed at a retail clinic or urgent care center, only 16.8 percent could be managed during the hours the emergency department alternatives typically are open.

"We've known for a long time that many people go the [emergency department](#) with problems that could be addressed elsewhere, but this is the first time we have been able to quantify how many of those visits could be addressed at these alternative locations," said study co-author Dr. Ateev Mehrotra, a researcher at RAND and an assistant professor at the University of Pittsburgh School of Medicine.

While the study provides important evidence about the number of cases that could be managed outside emergency departments, the study did not evaluate whether retail clinics and urgent care centers currently have the capacity to handle substantially higher numbers of patients. Researchers note that there is only limited evidence about whether patients can safely decide when it is appropriate to use one of the lower-cost emergency treatment options.

There is some evidence that emergency departments, retail clinics and urgent care centers provide care that is similar in quality, but more research is needed before large numbers of patients can be encouraged to seek care in alternative settings, according to the researchers.

Provided by RAND Corporation

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