

Market factors affect closures of emergency departments nationwide

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Despite a rise in the number of emergency room patients, the number of hospital-based emergency departments in the U.S. is in decline, according to a study led by Renee Hsia, MD, MSc, an emergency physician at San Francisco General Hospital, and featured in the May 18 issue of the *Journal of the American Medical Association*.

During the last two decades, nearly one third of urban and suburban emergency rooms have closed, with little known about related hospital, community, and market factors. In particular, federal law requiring <a href="https://emergency.org/hospital.no.phi.o

"One of the reasons we did this study was to examine the overall trends in the supply of ERs," said Hsia, an assistant professor in the Department of Emergency Medicine, UCSF School of Medicine. "Now we have good data to show that we have fewer ERs with increased demand, which inevitably means more crowding. While we do our best in the ER to triage and spend the time on the most critical patients, there is a point when demands outpace the availability of resources."

The study concludes that from 1990 to 2009, the number of hospital emergency rooms in non-rural areas declined by 27 percent, from 2,446 to 1,779. An analysis of 2,814 urban acute-care hospitals found that hospitals in more competitive markets, for-profit hospitals, hospitals with a low profit margin, safety-net hospitals and those serving a higher share of populations in poverty have a significantly higher risk of closing



their emergency departments.

Hsia's research focuses on barriers to access to emergency care for vulnerable populations, as well as reimbursement and financing within health care systems. She is also a recipient of the KL2 Scholar career development award, supported by the Clinical and Translational Science Institute (CTSI) at UCSF.

Read the full text of the article in *JAMA* here <u>Factors Associated with</u> <u>Closures of Emergency Departments in the United States</u>.

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