Decision-support program helps keep seniors out of the emergency room

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An Emergency Room Decision-Support (ERDS) program can significantly reduce ER visits and hospital admissions among older adults on Medicare. This could have important economic implications, helping to reduce the nearly 33% of avoidable ER visits that contribute to about $18 billion in unnecessary healthcare costs each year. Details of a successful ERDS program that had a positive return on investment are published in an article in *Population Health Management*.

Jessica Navratil-Strawn and colleagues from Optum (Golden Valley, MN; Ann Arbor, MI; and Phoenix, AZ), Richard Migliori MD, UnitedHealth Group (Minnetonka, MN), and Charlotte Yeh, MD, AARP Services (Washington, DC), show that participation in an ERDS program by Medicare users who previously had three or more visits to the ER within a 12-month period could improve care coordination, decrease ER visits and [hospital admissions](#), and increase office visits compared to similar individuals not involved in ERDS. In the article "[An Emergency Room Decision-Support Program That Increased Physician Office Visits, Decreased Emergency Room Visits, and Saved Money](#)," the authors report that for every dollar invested in the ERDS program, $1.24 in healthcare costs was saved.

"While visits to the ER are climbing around the nation, we need solid research like this study to help us make important policy decisions and to better allocate healthcare resources," says Editor-in-Chief David B. Nash, MD, MBA, Dean and Dr. Raymond C. and Doris N. Grandon Professor, Jefferson School of Population Health, Philadelphia, PA.

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