

## Ambulatory Care: Emergency Department Utilization (ED Utilization)

Performance Measure Set:  CCO Incentive Metric  Medicare Star Measure

Quality Measurement Type:  Structure  Process  Outcome  Patient Experience

Data Type:  Claims  Chart Documentation  eCQM  Survey  Other

Medicaid State Benchmark: 43.1/1000-member months or lower (2018 National Medicaid 90<sup>th</sup> Percentile)

**Who:** All patients enrolled in the CCO

**Why:** This measure aims to ensure that all patients are effectively engaged in primary care services, and have access to appropriate urgent care services when necessary to reduce costs associated with unnecessary or avoidable emergency department utilization.

**What:** The total number of all emergency department visits that do not result in an inpatient stay, as a factor of how many patients have been enrolled with the CCO during the year.

**How:** Some ideas to improve ED Utilization rates:

- Use PreManage to identify when patients visit the ED and follow up with each patient post visit to prevent future avoidable ED use.
- Ensure patients know clinic hours of operation and who to call or where to go when the clinic is closed.

**Exclusions:** ED visits for mental health and chemical dependency services are not included in the ED visit count. Members with hospice claims within the measurement year are excluded.

**Coding:** ED visits are identified by claims with at least one of the following claim codes:

CPT: 99281-99285, UB Revenue Codes: 0450, 0451, 0452, 0456, 0459, 0981 or

ED Procedure Code Value Set with place of service 23

## Ambulatory Care: Emergency Department Utilization (ED Utilization) FAQ

### Q: What do you mean by “ED visits that do not result in an inpatient stay?”

**A:** When an ED visit and an inpatient stay are billed on separate claims, the visit is considered to result in an inpatient stay when the admission date for the inpatient stay occurs on the ED date of service, or on the next calendar day. An ED or observation visit billed on the same claim as an inpatient stay is considered a visit that resulted in an inpatient stay.

### Q: How can I identify which of my patients had an ED visit?

**A:** PreManage! If you do not have access, contact your Primary Care Innovation Specialist.

### Q: What if a patient visited more than one ED on the same day?

**A:** Only one ED visit per day is counted for the metric.

### Q: What if the patient was seen at Unity Center for Behavioral Health’s Psychiatric Emergency Service?

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### Q: What if the patient was seen in the Emergency Department for a mental health or substance use related condition?

**A:** Only visits to the ED for physical health conditions count for the measure. However, sometimes mental health conditions present through physical symptoms. For example, anxiety can present as shortness of breath, and depression as pain. Exclusions for mental health or substance use diagnosis codes are applied at the claim line level; the diagnosis code does not have to be the primary for the visit to be excluded.