



Wisconsin Hospital Association Information Center

Potentially Avoidable Emergency Department (ED) Visits:
Volumes and Average Charges

August 2023

About WHAIC

The Wisconsin Hospital Association Information Center (WHAIC) has a strong heritage of meeting the ever-changing, broad-based needs of health care stakeholders statewide. From helping hospitals and ambulatory surgery centers submit data in compliance with state mandates – to providing data sets, tools, reports and analytic services to health care providers and patients – WHAIC remains committed to serving our customers and maximizing the value that can be realized from Wisconsin's health care data.

Since 2003, our vision has been to help health care stakeholders in Wisconsin turn data into actionable insights that enable timely and reliable decision-making.

As a wholly owned subsidiary of the Wisconsin Hospital Association. The WHAIC team is dedicated, innovative and has the passion and expertise that a committed health care data program demands. WHAIC has years of experience helping health care stakeholders throughout Wisconsin meet their data and analytics challenges and continue to develop products and services to meet the changing needs of their customers.

The WHA Information Center is dedicated to collecting, analyzing, and disseminating complete, accurate and timely data and reports about charges, utilization, quality, and efficiency provided by Wisconsin hospitals, ambulatory surgery centers and other health care providers.

WHAIC has the capability to answer questions and support business decisions through data mining, and independent review of methods, analyses, and present quickly and efficiently - providing users with a set of actionable data that has been tailored specifically for an organization's needs and for the area of interest.

WHAIC helps its customers...

- Quickly turn data into actionable insights for timely and reliable decision-making with our several visualization tools, dashboards, reports, and custom analytics
- Leverage organization-owned data platforms and analytics investment by providing WHAIC raw data sets in easy-to-use formats.
- Realize the benefits of a dedicated data program with tools and services that supplement the customer's existing resources and infrastructure.
- Analyze data to evaluate health care services, patient populations, utilization, staffing, financial and market performance and much more!

The Qualified Entity Program

To further our purpose and mission WHAIC became a “qualified entity” in the Medicare Data Sharing for Performance Measure Program (QE Program). Being selected by the Centers for Medicare & Medicaid Services (CMS) as a QE allows WHAIC to receive standardized extracts of Medicare Claims data under parts A, B and D. As a QE WHAIC can combine that claims data with other claims data sources and clinical data to generate reports that give insights to the how our regions providers and health systems are performing.

What is Measured?

Potentially Avoidable Emergency Department Visits measurement was completed following the Oregon Health Authority’s (OHA) methodology on avoidable emergency department visits, derived from the Medi-Cal potentially avoidable ED visits methodology. Category assignments for measure description will contain the following: back problem, ear infection, headache, respiratory infection, and urinary tract infection.

“Avoidable visit” is defined as one that could be treated in a primary care setting not an actual emergency. Some of the conditions seen in EDs that we have included in our methodology that could be handled by a primary care physician include back pain, urinary tract infection, respiratory infection, ear infection and headache.

Why does this information Matter?

Emergency departments (ED) are an important part of our health care system. For people suffering from a serious, acute problem, EDs help patients get the immediate care that they need. However, not all care that happens in the ED should be happening there. Too many people are using EDs for health problems that can be safely and effectively treated in a primary care provider’s office or in an urgent care clinic for a fraction of the cost. Using the ED for non-emergency conditions contributes to the high cost of health care. ED visits can cost up to ten times more than the same treatment in an outpatient setting.

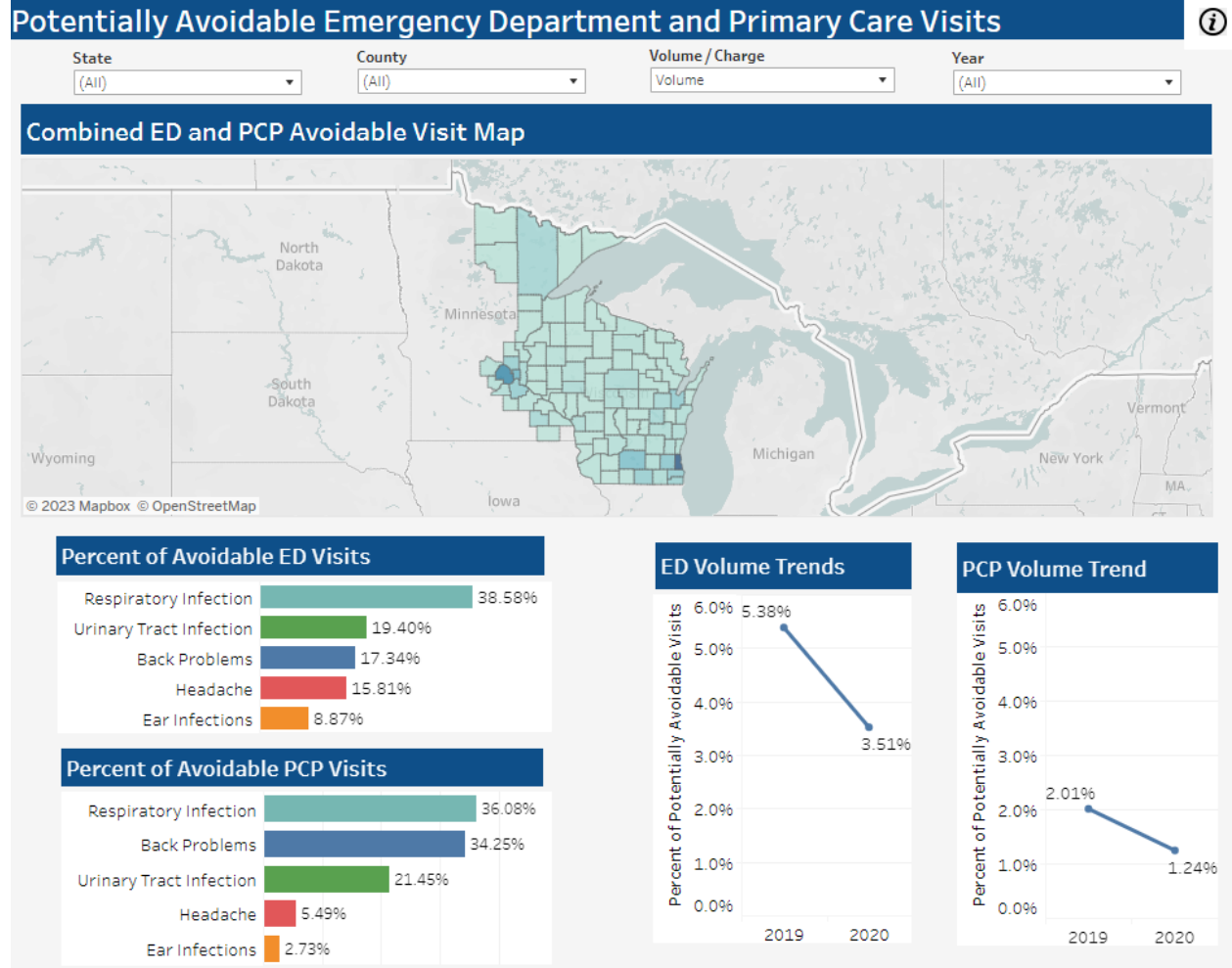
Report Overview

In this report, the numerator of the potentially avoidable ED visits rate represents the volume of ED visits in 2019-2020 containing a primary ICD-10 diagnosis code categorized as being potentially avoidable. The numerator was defined using the Oregon Health Authority’s (OHA) methodology on avoidable emergency department visits, derived from the Medi-Cal potentially avoidable ED visits methodology. Category assignments for measure description will contain the following: back problem, ear infection, headache, respiratory infection, and urinary tract infection. The denominator of the potentially avoidable ED visits rate represents the volume of ED visits not resulting in an admission. This data will be further broken down by Wisconsin/Minnesota County. Primary care services are delivered by hospital emergency departments (EDs) to millions of privately insured individuals each year at substantially higher prices than in

primary care settings. These patients can be treated safely and effectively in high-quality, low-cost primary care settings.

Additionally, an interactive map, by Wisconsin county, will display the average charge for avoidable ED visits for the five conditions outlined above. The map will be shaded accordingly to reflect higher and lower charges.

Please Note: WHAIC will only report volume/average charge rates with at least 30 observations. If <30 observations the number will be 0%.



For more information about WHAIC or this report, please contact us at whainfocenter@wha.org or visit our website <https://www.whainfocenter.com/>

