

# Massachusetts Survey: ED Visits Still a Problem

BY TERRY RUDD

BOSTON — In the wake of Massachusetts' ground-breaking move in 2006 to universal health coverage, nearly two-thirds of surveyed emergency physicians said more patients are seeking emergency care—and nearly two-thirds of surveyed state residents said waiting times in emergency departments have remained the same or risen.

The results are proof that “providing universal health care, while a great feat, is not going to solve the major problems facing emergency department patients, such as prolonged wait times, boarding, and overcrowding,” cautioned Dr. Peter Smulowitz, an emergency physician at Beth Israel Deaconess Hospital in Boston and chair of the governmental affairs committee for Massachusetts ACEP.

At a press conference, Dr. Smulowitz presented the results of two polls commissioned by the American College of Emergency Physicians and released during its Scientific Assembly. Researchers

surveyed 1,002 state residents and 138 emergency physicians in September 2009 to assess the impact of Massachusetts' requirement that residents must purchase health insurance.

Three years after the state's mandate took effect, almost 98% of Massachusetts residents now have health insurance coverage, Dr. Smulowitz said.

“The problem is that, contrary to popular belief and the policy makers and politicians, we've seen clearly that emergency department visits have not dropped,” Dr. Smulowitz said. “So, just providing access to health insurance is not going to result all of a sudden on a national level in a dramatic decrease in visits to our nation's emergency departments.”

In the survey of state residents, 47% of respondents said they had visited an ED in the past year, either for themselves or for a family member. Nearly three-quarters of respondents (72%) said their frequency of ED visits either had remained the same (68%) or increased (4%).



Dr. Peter Smulowitz and Dr. Angela F. Gardner discussed the impact of reforms on Massachusetts' emergency departments.

ally is the emergency department,” he explained. He also cited a lack of access to primary care, socioeconomic and cultural factors, and the convenience and efficiency of emergency departments that are open 24 hours a day and provide complete care.

Myths about emergency medicine

are coloring the debate about emergency departments' role in health reform, noted Dr. Angela F. Gardner, ACEP president and an emergency physician at Parkland Hospital in Dallas.

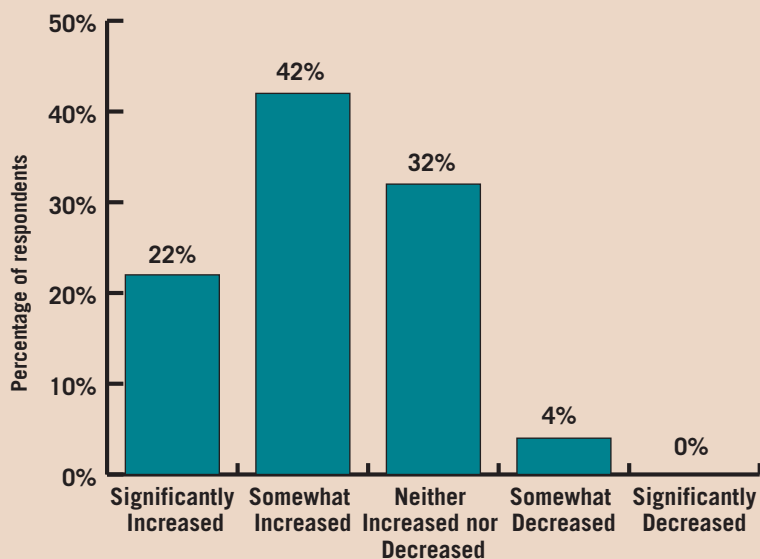
The first myth is that EDs are crowded with people who don't need to be there, Dr. Gardner said. But only 12% of patients in emergency departments are nonurgent, she countered, according to data from the Centers for Disease Control and Prevention.

Other myths are that emergency care is expensive and inefficient. “I would contend that emergency care actually is very inexpensive,” she said. “We actually are open five times longer than most doctors' offices. The cost of maintaining staff and equipment during that time is the reason we are ‘expensive.’” In addition, “I would say that we are very efficient—we actually have everything that we need to take care of our patients.”

“Every person in America needs affordable and appropriate health insurance coverage,” Dr. Gardner said. “Universal health coverage is a vital first step in reforming our nation's health care system, but it will not solve the severe problems facing emergency department patients right now. There are more steps—and if we don't take them, there will be more severe consequences.” ■

## Emergency Department Visits Have Increased After Massachusetts Health Reforms

(From a survey of 138 Massachusetts emergency physicians)



Source: ACEP Massachusetts Emergency Physicians Survey

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