University of New Mexico Hospitals' Urgent Care Task Force

Report Prepared by the House Memorial 33 Task Force

Convened by the New Mexico Department of Health



November 1, 2010

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Introduction

House Memorial 33 (HM33) requested that the Department of Health (DOH) convene a University of New Mexico hospitals' urgent care task force to analyze:

- 1) the current population of patients that UNM hospitals see in their emergency departments, including patients' geographic origins, income and insurance status and the reasons for seeking care;
- 2) the costs and benefits of opening some of the clinics in UNM hospitals' system for nonemergency, urgent care for walk-in cases; and
- 3) the potential health outcomes when comparing the existing situation, in which the University of New Mexico hospitals' system provides care to non-emergency, walk-in cases on evenings and weekends, with a potentially expanded urgent care system for seeing non-emergency cases in a timely manner and on a walk-in basis.

Based on this request, a task force was formed consisting of representatives from DOH; UNM; Community Coalition for Health Care Access; a Native American nation, tribe or pueblo; a Native American who lives in an off-reservation urban area; and two primary care physicians who are neither employed by nor under contract with UNM.

UNM Overview

According to UNM's Hospital Website¹, The UNM Health Sciences Center (HSC) is a national leader among health care institutions. UNM Hospital, the HSC's primary clinical component, has consistently ranked in the 100 top-performing hospitals in the United States, and ranks among the top 10 academic centers in the nation.

The hospital operates New Mexico's only Level I Trauma Center, treating nearly 90,000 emergency patients and more than 450,000 outpatients annually. The Barbara & Bill Richardson Pavilion, which opened in the spring of 2007, added nearly 500,000 square feet of emergency and clinical space uniquely configured for medical efficiency and patient safety, and fitted with cutting-edge imaging, laboratory and surgical technology.

UNM Hospital serves as the primary teaching hospital for the UNM School of Medicine and participates in hundreds of advanced clinical trials annually. It also is the home of the highly regarded UNM Children's Hospital and the National Cancer Institute-designated UNM Cancer Center. The UNM Hospital system includes Carrie Tingley Hospital, UNM Children's Psychiatric Center and UNM Psychiatric Center; and shares missions and resources with UNM's College of Nursing and College of Pharmacy as well as the New Mexico Poison Center.

In addition to the main hospital, the UNM system operates 43 off-site clinics throughout the state, including the UNM Cancer Center South in Las Cruces, NM. The hospital further expands into New Mexico's rural communities through a nationally recognized Telemedicine/Telehealth network, linking patients and physicians throughout the state to the most up-to-date research and medical information available.

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i http://hospitals.unm.edu/hospitals/unmh.shtml

The UNM Hospital system serves all New Mexicans' needs for routine medical procedures, chronic disease management and catastrophic health events. From central New Mexico to the four corners of the state, UNM Hospitals and all of its clinical components strive to identify and solve the most important questions of human health in our communities through education, scholarship and service.

UNM Emergency Room

Past: UNM Hospital's Emergency Room had an Urgent Care over 10 years ago. The Urgent Care was reclassified as part of the Emergency Room due to Medicare regulations related to billing when the Emergency Room and the Urgent Care Center are in the same physical location.

Present: Emergency Services has 82 beds in which to see patients. The Fast Track area of the Emergency Department still exists and has 8 beds. In FY09, the Fast Track saw 15,628 patients. The Fast Track treats a higher level of patients. The billing for that area is at emergency level billing.

In November 2009, the Emergency Department opened a separate Adult Urgent Care. The Adult Urgent Care currently resides in the old Cancer Center but UNMH is in the process of building a permanent location for the Adult Urgent Care that will have 12 exam rooms. UNMH has two Nurse Practitioners working in the Adult Urgent Care. UNMH has interviewed and offered positions to two more Nurse Practitioner. If both accept, this will bring us up to four providers and will allow us to increase the hours of operation.

The Adult Urgent Care currently is open Monday through Friday from 3:00 p.m. to 11:00 p.m. as these are the busiest times for this level of patient. As the Center experiences an increase in volume, the staffing will be increased. UNMH anticipates moving to a 7 day a week operation as we are able to hire providers. In the first three months of operation, the Adult Urgent Care has seen 682; the past three months of operation (April, May, June 2010), the Adult Urgent Care has seen 1,153 patients and the numbers increase each month. The Adult Urgent Care is currently at its own fee schedule and does not bill at emergency services charge rates.

UNMH currently has two primary care clinics that offer evening hours until 8:00 p.m. Monday – Thursday (1209 clinic and the Southeast Heights clinic [SHE]). The Hospital tried Saturday morning clinics, but these clinics were not well attended. Average Saturday arrivals were between six and eight patients per day. Currently, the 1209 evening clinic sees about 200 patients per month and the SEH evening clinic see about 300 per month. These patients are billed at the primary care rates.

In addition to the primary care clinics, UNMH offers after hours services in the Outpatient Treatment Center. The mission of the Outpatient Treatment Center is to provide specialized infusion based therapy. This Center allows patients with certain health conditions to receive time sensitive infusions eliminating the need for "emergency

department" based infusion care. Outpatient Treatment Center volume continues to grow to meet patient care demand. As of June 30, 2009, the Center saw on average 2,661 patient visits. Infusions provided in this area include, but are not limited to, hydration, blood and blood products, and antibiotic therapy. For patient convenience, the Center has extended its hours to include Saturday and Sunday from 8:00 am to 6:30 pm.

Primary Care Services		Total Monthly Volume (average)	After Hours Monthly Volume (average)
UNM Family Health- 1209 University	M-Th: 8am-8pm	2,200	180
1209 University Blvd. NE	Friday: 8am-5pm	2.000	200
Southeast Heights	M-Th: 8am-8pm	2,000	200
8200 Central Ave. SE	Friday: 8am-5pm	1.500	
Northeast Heights 7801 Academy Blvd. NE	M-F: 8am-5pm	1,530	
UNM Family Health: Westside	M-F: 8am-5pm	1,025	
4808 McMahon NW	III I I Omin Opin	1,020	
Family Practice Center	M-F: 8am-5pm	2,125	
2400 Tucker			
LoboCare/Senior Health	M-F: 8am-5pm	1,375	
1101-4 Medical Arts, Suite A			
Medicine Faculty	M-F: 8am-5pm	370	
UNM Hospital - 5ACC			
2211 Lomas Blvd. NE			
General Medicine	M-F: 8am-5pm	460	
UNM Hospital - 5ACC			
2211 Lomas Blvd. NE			
SW Mesa Clinic	Opening October 2010		
Unser and Central	Extended hours when		
	all providers in place		
Psychiatric Services			
Psychiatric Emergency Services (PES)	24 hours/7 days per week		
2600 Marble NE			
Pediatric Services		FY10 Total	
		Visits	
Young Children's Health Center	M-Th: 8am-7pm	10,415	
306 A San Pablo SE	Sat: 9am-2pm		
General Pediatric Clinic	M-F: 8am-7:30pm	17,434	
2211 Lomas Blvd NE	Sat: 9am-2pm		

The Pediatric area created same day access for sick children over thirteen years ago. This Pediatric model was developed to provide continuity for families seen in the Pediatric Clinic and the Young Children's Health Center. The purpose of the extended clinic functions was to encourage a primary care medical home for families with small children. The financial considerations were to treat pediatric patients in a clinic, which would cost the same as an office visit and significantly less than an emergency room visit.

The Pediatric clinic is currently open Monday through Friday until 7:30 p.m. and on Saturday's from 9:00 a.m. to 2:00 p.m. for walk-in patients. In FY10, the clinic saw approximately 17,434 acute care visits. In addition, the Young Children's Health Center also has evening and Saturday hours to see their acute patients and saw 10,415 visits in FY10.

Future: The Adult Urgent Care will continue to grow to meet patient needs as we hire providers.

Primary Care is in the process of building a clinic in Southwest Mesa. UNMH is planning for the clinic to be ready to see patients the fall of 2010. In that clinic we will have Family Medicine, Pediatrics, Behavioral Health, Social Work, Case Management, Radiology, Lab, Pharmacy, and Patient Financial Services. Depending on provider coverage, UNMH anticipates evening and Saturday hours. At this time UNMH does not anticipate walk in services, however if a patient does walk in, they will be triaged.

A new pediatric ambulatory care center is part of the UNMH strategic plan. The vision of this facility is to provide comprehensive and integrated ambulatory pediatric care for patients throughout the age & healthcare continuum. Care would encompass the concept of Patient Centered Medical Home and continue to fulfill the long standing missions of UNM Carrie Tingley Hospital, UNM Children's Hospital, and the UNM Health Sciences Center. The new pediatric ambulatory facility will bring together healthcare providers in a centralized location that facilitates the optimal delivery of family centered healthcare. The planned pediatric ambulatory center will continue to meet the acute care needs as well as address the specialty access needs of our community by continuing evening and weekend business hours.

UNM Emergency Room Statistics

A. The current population of patients that the University of New Mexico Hospitals see in their Emergency Departments by:

1. Geographic Origins

Bernalillo	85.96%	Top Zip Codes in Bernalillo
Valencia	4.13%	87105 14.76% 87107 5.22%
Sandoval	2.98%	87108 12.71% 87110 4.64%
Out of State	1.27%	87121 11.65% 87104 4.52%
Santa Fe	1.06%	87102 7.63% 87112 4.34%
McKinley	0.89%	87123 6.99% 87109 4.12%
Torrance	0.85%	87106 6.09% 87120 3.99%
Cibola	0.61%	
San Juan	0.44%	
Rio Arriba	0.27%	

2. Emergency Services YTD Rolling Census

Month	Adult ED	Pediatric ED	Urgent Care *	Comments
September-09	5,458	1,999	0	
October-09	5,868	2,500	0	
				UCC open November
November-09	5,042	1,652	240	1, 2009
December-09	4,999	1,407	265	
January-10	5,163	1,718	242	
February-10	4,927	2,014	267	
March-10	5,507	1,810	364	
April-10	5,424	1,682	366	
May-10	5,663	1,743	367	
June-10	5,660	1,560	402	
July-10	5,671	1,516	384	
August-10	5,694	1,578	439	
September-10	5,489	1,592	452	

Rolling YTD Total

70,565

22,771

3,788

Volume has reached a limit due to physical capacity as well as provider staffing.

3. Income: No data available

4. Insurance Status:

	Medicare	Medicaid	Commercial/ Private	Government /VA Champus	Financial Assistance	Pending Medicaid	Self-Pay	Total
Visits	7,579	24,807	11,301	5,725	14,860	670	20,901	85,843
% of								
Visits	8.83%	28.90%	13.16%	6.67%	17.31%	0.78%	24.35%	100.00%

B. Reasons for Seeking Care:

Top Reason for Seeking Care (Chief Complaints):

- 1. Abdominal and Stomach Pain
- 2. Chest Pain and related symptoms
- 3. Fever
- 4. Headache, Head Pain
- 5. Cough
- 6. Back Pain
- 7. Shortness of Breath
- 8. Pain, non-specific
- 9. Vomiting
- 10. Throat Symptoms

Top Diagnoses:

- 1. Abdominal Pain
- 2. Chest Pain
- 3. Alcohol Abuse

^{*} Urgent Care operates Monday through Friday from 3:00 PM until 11:00 PM, planning is being done to expand hours.

Two midlevel providers are in the credentialing process at this time, and new space scheduled for completion in December 2010

- 4. Convulsions
- 5. Headache
- 6. Urinary Tract Infection
- 7. Pneumonia
- 8. Head Injury
- 9. Psychosis
- 10. Backache
- C. The costs and benefits of opening some of the clinics in the University of New Mexico system for non-emergency, urgent care for walk-in care:

Cost/Benefit:

Emergency Level Billing Fees:	Fast Track Level Billing Fees:	Adult Urgent Care Billing Fees:
ER Follow Up Visit = $$0.00$	ER Follow Up Visit = $$0.00$	UC Follow Up Visit = \$0.00
ER Level I Visit = $$77.00$	ER Level I Visit = $$77.00$	UC Level I Visit = \$62.00
ER Level III Visit = \$249.00	ER Level II Visit = \$163.00	UC Level III Visit = \$69.00
ER Level IV Visit = $$527.00$	ER Level III Visit = \$249.00	UC Level $V = 119.00
ER Critical Care Visit = \$661.00		
	ER Follow Up Visit = \$0.00 ER Level I Visit = \$77.00 ER Level III Visit = \$249.00 ER Level IV Visit = \$527.00	ER Follow Up Visit = \$0.00 ER Level I Visit = \$77.00 ER Level III Visit = \$249.00 ER Level IV Visit = \$527.00 ER Level III Visit = \$249.00 ER Level III Visit = \$249.00

Average Charge / Visit:

Emergency Department	\$1,	,423
Urgent Care	\$	178
Southeast Clinic	\$	302

Urgent Care Finances:

Urgent Care Model for FY 2010:

Facility Revenue: \$403,292.00 Net Revenue \$65,785.00

Costs*:

Direct Expenses \$186,577.00 Contribution Margin (\$120,792.00)

D. The potential health outcomes when comparing the existing situation, in which the University of New Mexico hospitals system provides care to non-emergency, walk-in cases on evenings and weekends, with a potentially expanded urgent care system for seeing non-emergency cases in a timely manner and on a walk-in bases:

No data available regarding potential health outcomes

Areas for Future Consideration

^{*}Physical plant, utilities and overhead costs not included.

The task force met twice over a two month period and developed a list of areas that may require future consideration to address the needs of urgent and primary care needs in Bernalillo County, including:

- Consider more joint ventures with other health organizations to develop urgent & primary care access.
- Investigate "best practice" models for provision of urgent & primary care by hospitals.
- Investigate "best practice" models for diverting non-emergencies away from the Emergency Department (ED).
- Expand public health approaches that prevent use of the Emergency Departments.
- Consider forums for receiving ideas from stakeholders.
- Evaluate providing after-hours care at the new West Side UNM Hospital.
- Consider expanding weekday after-hours and weekend hours for all UNMH clinics.
- Increase public awareness of existing urgent care services.
 - Utilize partners and stakeholders to promote awareness of existing services.
 - o Provide information on existing services to the Nurse Advice Line.
- Consider increasing the use of mid-level practitioners at UNMH and UNM medical clinics.
- Consider ways of using community health workers in health planning, prevention, case management, and public education.
- Maximize access to Suboxone therapy for patients with addiction.
- Reference recent reports for data and planning information for future recommendations, including the "2008 UNM Hospitals: A Community Perspective on Access and Spending" and the "Bernalillo Off-Reservation Native American Commission Final Report due in November 2010.
- Urge Indian Health Service to expand the hours of their services.
- Propose a continuation to the memorial during the 2011 Session to address recommendations identified by House Memorial 33 Task Force.