SAN FRANCISCO WHOLE PERSON CARE

Frequent Emergency Department Users: Focusing Solely On Medical Utilization Misses The Whole Person

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Introduction
Background

• Frequent (4+ visits per year) and super-frequent (18+ visits per year) ED users make up a small proportion of patients but account for a disproportionately large percentage of ED visits and spending.

• Literature shows that these patients often experience:
  • High social needs (homelessness and unemployment)
  • Mental illness, substance use disorders, and poor physical health

• Most research has been focused on medical utilization by frequent users, not other domains
Objectives

• Use integrated data to better understand frequent ED users’ patterns of utilization beyond the ED

• Describe characteristics of frequent and super-frequent ED users across a range of medical, mental health, substance use treatment, and social services utilization
Methods
Integrated Data - CCMS

Coordinated Care Management System (CCMS)

- HEALTH: Medical, psych and substance use disorder services & diagnoses
- HOUSING: Shelters, navigation centers, permanent supportive housing, homeless case management services
- LEGAL: Jail (health), conservatorship, involuntary holds
- DEATH: State Death Registry records
Partnership with SFHP

• San Francisco Health Plan (SFHP) provides Medicaid coverage for ~84% of Medicaid beneficiaries in San Francisco County.

• Advantage of using Medicaid data from SFHP: identify frequent ED users based on service use across the entire country (not limited to county-funded facilities).
Study Population

- 32,994 patient-years of data (20,667 unique patients)

- Claims and encounter data for fiscal years 2013–2015 for beneficiaries of the San Francisco Health Plan

- Patients ages 18–64 with 12+ months of consecutive Medicaid eligibility

- Data linked to CCMS records for corresponding fiscal years
Results
Demographics

Comparison of Demographic Characteristics Between Non-Frequent, Frequent, and Super-Frequent ED Users

Non-frequent ED user (0-3 visits) | Frequent ED User (4-17 visits) | Super-frequent ED user (18+ visits)
Social Factors

A higher proportion of frequent and super-frequent ED users were homeless, had encounters with jail health services, or had ever been legally conserved.
Service Utilization

Frequent ED users had higher utilization than non-frequent users across all non-ED medical, behavioral health, and social services captured in the CCMS, including

- Urgent and primary care visits
- Inpatient medical and psychiatric stays
- Medical respite
- Mental health outpatient visits and residential treatment
- Substance use disorder outpatient visits and residential treatment
- Detoxification and sobering center visits
Annual Non-Medical Service Visits by Frequent Emergency Department Users

- Substance Use Disorder Visit:
  - Superfrequent ED User: 50%
  - Frequent ED User: 25%
  - Nonfrequent ED User: 0%

- Mental Health Visit:
  - Superfrequent ED User: 0%
  - Frequent ED User: 50%
  - Nonfrequent ED User: 25%
Diagnoses

- Compared to non-frequent ED users (0.4%), a higher proportion of frequent (4%) and super-frequent (21%) ED users were "trimorbid" (co-occurring medical, mental health and substance use disorder diagnoses).

- Compared to non-frequent ED users, higher proportion of frequent ED died during our study period (0.8% versus 0.1%).
Conclusions & Next Steps
Key Points

• Frequent ED users demonstrated significant use of medical, mental health, substance use, and social services.

• This population experienced stressors linked to health-related social needs and higher death rates.

• Recommendations:
  • Prioritize data sharing and care coordination across health domains and human service sectors.
  • Integrate social data into electronic health records.
Next steps

• Future research directions
  • Publication on HUMS methodology and profile of Top 100
  • Longitudinal analysis: what factors predict future frequent service utilization? What differentiates acute vs. chronic high users?

• Whole Person Care initiatives – building on what we know about high users of multiple systems
Thank you

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