

UCSD and Community Clinics Partner to Improve Care for Safety Net Patients

Grant Supports Innovative Technology to Alleviate ED Overcrowding, Improve Care for the Underserved

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The nationwide crisis of overcrowded emergency rooms and hospitals is partly due to the increasing number of uninsured patients who don't have a primary care physician and go to the emergency room for their care. Encouraging safety net patients to establish a "medical home" where they can receive primary and specialty care in an appropriate community-based setting is the goal of a newly expanded project between UCSD Medical Center and two San Diego community clinic systems.

UnitedHealth Group/PacifiCare has awarded a \$731,070 grant to UCSD Medical Center to develop the San Diego Safety Net Health Information Exchange (HIE), a real-time scheduling and medical information exchange system linking UCSD's emergency departments and hospitals, and the San Diego Family Care (SDFC) and Family Health Centers of San Diego (FHCS) community clinics. The project will enable UCSD physicians to make follow-up appointments at a participating community clinic for patients being treated in the hospital or emergency department who don't have a physician. The project will also allow sharing of the patient's current medical information among the providers.

"More adverse events happen at transition of care moments. Evidence shows that improved transmission of information from provider to provider enhances patient safety and enhances the care experience," noted Josh Lee, M.D., Associate Clinical Professor of Medicine and medical director of Information Systems at the UCSD Medical Center.

HIE builds on the success of a pilot program called IMPACT-ED (Improving Medical home and Primary care Access through the Emergency Department), launched at UCSD Medical Center in 2007 in partnership with SDFC and funded by Alliance Healthcare Foundation.

Patients who don't have a primary care physician often turn to the ED for care, even when they don't have a true emergency. IMPACT-ED allows UCSD ED staff to go online and make a follow-up appointment for these patients in one of SDFC's three community clinics, selected for proximity to the patient's residence. The patient is given an appointment time and directions to the clinic before leaving the hospital.

"We are delighted to continue our successful relationship with UCSD," said Roberta Feinberg, M.S., Chief Executive Officer, SDFC. "In this changing healthcare environment, it is essential to link uninsured patients with a medical home. We want people to think of community clinics as their primary care source. It's a win-win-win, for the patient, the community clinics and the emergency room."

Results from the pilot program have been promising. Over 200 UCSD emergency department patients were scheduled for follow-up appointments in one of SDFC's clinics prior to leaving the ED. Data shows that these patients were ten times more likely to go to their clinic appointment than a patient simply referred to the clinic, with no appointment.

"HIE will allow us to add a health information exchange component," said Theodore Chan, M.D., medical director of UCSD's emergency department. "We will be able to communicate electronically with the clinic about medications which have been prescribed in the ED when we make the appointment. That way, the patient's medical record is always kept current."

HIE will also expand the project to include patients who have been hospitalized, allowing UCSD staff to set up appointments with participating clinics when the patient is discharged, and to provide current medical records. The expansion of the project to include select clinics in the FHCS system will increase access to geographically convenient sites for patients who live in different parts of the city.

Larry Friedman, M.D., medical director of ambulatory services and UCSD Medical Group quality and safety, explained, "The goal is to improve our patient care and hand-offs for patients who do not have a medical home, and also to develop an effective scheduling and information exchange system that can be easily transported to other healthcare systems."

SDFC and FHCS community clinic networks provide affordable primary and specialty care for nearly 400,000 patient visits annually in the Linda Vista, Mid-City, Downtown and Southeast sections of San Diego. These neighborhoods are ethnically diverse with large Hispanic and new immigrant populations, particularly from Asia, Latin America and East Africa. The communities served by these clinic networks are of middle- and lower- income socioeconomic strata.

UCSD Medical Center provides emergency care to over 60,000 patients annually and hospitalization for over 20,000 patients every year. Approximately 45% of hospital discharges are patients who are uninsured or covered by public programs such as Medi-Cal.

The grant is part of a \$25 million commitment to California nonprofits by UnitedHealth/ PacifiCare, for enhanced technology, medical education, disease prevention and coordinated care. UnitedHealth Group is a diversified health and well-being company dedicated to making health care work better. Headquartered in Minneapolis, Minn., UnitedHealth Group offers a broad spectrum of products and services through seven operating businesses: UnitedHealthcare, Ovation, AmeriChoice, Uniprise, OptumHealth, Ingenix, and Prescription Solutions. Through its family of businesses, UnitedHealth Group serves approximately 70 million individuals nationwide.

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