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WHO SEEKS EMERGENCY CARE AND WHY?: DATA FROM MASSACHUSETTS

Survey shows users of emergency rooms have trouble accessing care in other settings, and frequent users of emergency rooms are a sicker, more disabled, and more chronically ill population than other adults in the state

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SEPTEMBER 24, 2009, BOSTON — While health reform in Massachusetts has succeeded in increasing health insurance coverage and access to care, use of emergency rooms by working-age residents remains high. Those seeking care in ERs may have trouble accessing care in other settings. They are less likely to use a doctor's office or private clinic as their usual source of care and they are somewhat less likely to report having a place they usually go to (other than the ER) when they are sick or need advice about their health. And frequent users of emergency rooms (those reporting more than three ER visits in a year) are a sicker, more disabled and chronically ill population than other adults in the state.

That's according to a new issue brief out today by researcher Sharon Long at the Urban Institute. The brief finds that a third of Massachusetts' population used the ER at some point between the fall of 2007 and 2008, with nearly half of those reporting a non-emergency visit, that is, a visit for a condition that could have been treated by a regular doctor if one had been available.

This new analysis, which uses survey data for 4,041 adults aged 18 to 64 collected in fall 2008 as a part of an ongoing analysis of health reform in Massachusetts, found that most respondents who used the ER for non-emergency care (75.7%) cited their need to get care after normal operating hours as one reason they chose to go to the emergency room. An inability to get an appointment with a doctor or other provider as soon as needed was also cited as a common reason for non-emergency ER visits (55.8%). Notably, nearly all (87.9%) of Massachusetts' most frequent emergency room visitors — those who use the emergency room three or more times per year — reported problems with their health or a disability. Large majorities of frequent emergency room visitors also reported being out of work and income less than 300% of the Federal Poverty Level.

The brief is the latest in a series funded by Blue Cross Blue Shield of Massachusetts Foundation, the Commonwealth Fund, and the Robert Wood Johnson Foundation on implementation of the Massachusetts reforms.

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More About the Blue Cross Blue Shield of Massachusetts Foundation

The mission of the Blue Cross Blue Shield of Massachusetts Foundation is to expand access to health care. Through grants and policy initiatives, the Foundation works with public and private

organizations to broaden health coverage and reduce barriers to care. It focuses on developing measurable and sustainable solutions that benefit uninsured, vulnerable and low-income individuals and families in the Commonwealth, and served as a catalyst for the pioneering Massachusetts health care reform law passed in 2006. The Foundation was founded in 2001 with an initial endowment of \$55 million from Blue Cross Blue Shield of Massachusetts. The Foundation operates separately from the company and is governed by its own 18-member Board of Directors. It is one of the largest private health philanthropies in New England and in 2007 was awarded the Paul Ylvisaker Award for Public Policy Engagement for its work on Massachusetts health care reform by the Council on Foundations.