MEASURE SUMMARY
CHIPRA Core Set Candidate Measures

A. Control #: AC-10

B. Measure Name: ER Utilization - Average number of emergency room visits per member per reporting period

C. Measure Definition*
   
a. Numerator: Number of visits per member per reporting period
   
b. Denominator: All child and adolescent members during the reporting period

D. Measure Type: ___ Process   ✓ Outcome   ___ Structure   ___ Efficiency

E. Measure collected using: ___ EMR ___ CPOE ___ Other HIT ___ N/A ___ NR

VALIDITY

F. Evidence of measure validity submitted?   _____ Yes   ✓ No

G. Level of evidence supporting the measure (if submitted): (see Oxford University CEBM Levels of Evidence)
   Oxford CEBM = 2 (Outcome studies) Weinick et al. found that a large proportion of ED visits could be prevented or avoided with better access to primary health care, particularly for Medicaid and self-pay/uninsured patients, and that patterns of ACS-ED use differ considerably by age. Many condition-specific quality improvement projects have used reduction in ER visits as a study outcome, with variations in results.

H. USPSTF Grade if applicable:

FEASIBILITY

I. Measure Specifications Submitted?   _____ Yes   ✓ No   ___ Yes, but insufficient detail provided

J. Data Source:
   ✓ Admin   ___ MR   ___ Survey   ___ Other (specify):   ___ NR

K. Evidence of measure reliability submitted?   _____ Yes   ✓ No

L. List of entity types currently using measure:

IMPORTANCE

M. Addresses area of care mandated in legislation?

   x   Yes (specify): acute care   No

N. Documented variation in performance (by race/ethnicity, language spoken, insurance type, etc)?
   _____ Yes   No   x NR

Medicaid paid for 61.65% of all ED visits of chn < 1, and 41.87% of all ED visits of chn 1-17 yo in 2005. Information on r/e within Medicaid not available.

O. Measure used/data are collected in racial/ethnic populations other than non-Hispanic white?
   _____ Yes   No   x NR