

AHEAD OF WHAT'S NEXT.

## ACEP Emergency Care Poll

# Table of Contents

Background and Objectives	3
Methodology	4
Report Notes	5
Executive Summary	6
Detailed Findings	10
Demographics	24

# Background and Objectives

- To assess the general public's views regarding emergency room usage and proposed cutbacks in healthcare coverage for certain emergency room visits, the American College of Emergency Physicians (ACEP), commissioned Harris Interactive to conduct an online survey among U.S. adults age 18 years or older. The results are intended to be presented at the ACEP's leadership and advocacy meeting in May 2012.
- The study sought to:
  - Assess healthcare coverage and ER usage among the general public
  - Assess how confident the general public is in determining whether their medical issues are an emergency situation requiring an ER visit
  - Evaluate opinions on whether ER visits that result in a non-emergency diagnosis should be covered by Medicaid and/or private insurers, and measure the support of or opposition to policies regarding this
  - Address whether such policies would alter ER treatment-seeking behavior
  - Evaluate the general public's perceptions regarding the percentage of total health care costs in the US that are comprised by emergency room care

# Method

- This Emergency Care Survey was conducted online within the United States from April 16-17, 2012 by Harris Interactive on behalf of the American College of Emergency Physicians, among 1,026 adults aged 18 years and over.
- Figures for age, sex, race/ethnicity, education, region and household income were weighted where necessary to bring them into line with their actual proportions in the population. Propensity score weighting was also used to adjust for respondents' propensity to be online.
- All sample surveys and polls, whether or not they use probability sampling, are subject to multiple sources of error which are most often not possible to quantify or estimate, including sampling error, coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments. Therefore, Harris Interactive avoids the words "margin of error" as they are misleading. All that can be calculated are different possible sampling errors with different probabilities for pure, unweighted, random samples with 100% response rates. These are only theoretical because no published polls come close to this ideal.
- Respondents for this survey were selected from among those who have agreed to participate in Harris Interactive surveys. The data have been weighted to reflect the composition of the adult population. Because the sample is based on those who agreed to participate in the Harris Interactive panel, no estimates of theoretical sampling error can be calculated.
- On average, the survey took 8 minutes to complete.

## Report Notes

- Unless specified, data throughout the report are based on all qualified respondents, defined as U.S. respondents age 18 years or older.
- Values with a letter (e.g., **A**) indicate that result is greater than the corresponding comparison group at a statistically significant level (95% CI).
- An asterisk (\*) signifies a value of less than one-half percent. A dash (-) represents a value of zero.
- Percentages may not always add up to 100% because of computer rounding or the acceptance of multiple responses.



# Executive Summary

# Executive Summary

## *A sizeable amount of the population lacks health insurance coverage.*

- + While a large majority (86%) of the population has some sort of health plan or insurance – 62% have private healthcare coverage and 26% have Medicare or Medicaid – 14% report that they have no health care coverage at all. [Q703]
- + The percentage lacking health insurance coverage is higher among...
  - + Young adults: 24% of 18-34 year olds, compared to 16% of those age 35-44, 15% of those age 45-54, and 6% of those age 55+ have no health insurance coverage.
  - + The unemployed: 27% of those who are unemployed, compared with 13% who are full time/part time/self employed, and 3% of those who are retired have no health insurance coverage.
  - + Lower-income households: 30% of respondents with a household income of less than \$35K and 21% of those with household incomes of \$35K-\$49.9K have no health insurance, compared with just 4% of those with a household income of \$50K-\$74.9K and 2% earning \$75K or more. [Q703]
- + Although private insurance is commonly provided by employers, 13% of those who are full time, part time, or self employed report having no health insurance coverage at all. [Q703]

## *A large majority have ever been a patient in the emergency room and believe they could not have waited to see their regular medical provider first before going to the ER.*

- + Eighty-three percent of respondents have ever been to the emergency room as a patient, and 11% have been an ER patient within the past 6 months. [Q710]
- + Ninety-five percent of those who have ever been an emergency room patient had a regular medical provider at the time of their most recent ER visit. Of those, 85% believe that they definitely/probably could not have waited to see their regular medical provider first instead of going to the emergency room, while 62% believe they definitely could not have waited. [Q715]
- + Twenty-four percent of those who had a regular medical provider at the time of their most recent ER visit tried to get an appointment with them prior to going to the ER. Twelve percent were told by their provider to go to the ER instead, 8% tried but their provider's office was closed, and 5% report that their provider couldn't see them soon enough for their problem. [Q720]
  - + Those with Medicare/Medicaid coverage are significantly more likely than those with private insurance to have tried to get an appointment with their regular medical provider before going directly to the ER (35% vs. 24%). [Q720]

## Executive Summary (cont'd)

*For many Americans, policies restricting payments on ER visits would reduce their likelihood to seek ER care for serious symptoms.*

- + When asked to imagine that health insurance plans would not pay for emergency room care if the patient had symptoms that they *thought* were serious or life-threatening but actually were not, and the patient would be responsible for paying the medical costs in full, 72% would be at least somewhat less likely to seek ER care for symptoms they believed were serious. Fifty-one percent would be definitely/probably less likely to seek ER care if such a policy was in effect. [Q742] Since it can be extremely difficult for a prudent layperson to know what their diagnosis will be prior to seeking medical treatment, this potentially puts patients at risk by foregoing emergency treatment even when it is warranted.
- + The percentage who would be at least somewhat less likely to seek ER care if this type of policy was in effect include...
  - + Younger adults: 83% of 18-34 year olds, compared to 77% of those age 35-44, 74% of those age 45-54 and 63% of those age 55+ would be at least somewhat less likely to go to the ER with symptoms they believed were serious.
  - + Have children in household: 80% of those with children in the household would be at least somewhat less likely to seek ER care, compared with 69% of those without children in the household. Furthermore, 61% of those with children in the household would be definitely/probably less likely to seek ER care, compared with 47% of those without children in the household. [Q742]



## Executive Summary (cont'd)

### *A large number of Americans believe that health insurance should pay for every ER visit, and they disagree with proposed Medicaid policies restricting payments for emergency room care.*

- + Seventy-six percent of all respondents agree with the statement “Health insurance should pay for every emergency room visit.” This percentage increases when asked about their own medical coverage – 86% of those who have health insurance agree with the statement “My health insurance should pay for every emergency room visit that I make.” [Q735]
- + Support is high for insurance company payment of ER visits regardless of the diagnosis, as 65% agree that health insurance should pay for an emergency room visit even if the condition is diagnosed as non-serious or non-life threatening. [Q740]
- + Seventy percent oppose insurance companies’ efforts to deny payment for ER visits if the diagnosis is a non-emergency condition, even if the patient believed they were having an emergency. [Q750]
- + Similarly, there is notable disagreement with proposed Medicaid policies to pay for emergency room visits only if the patient’s diagnosis was a true medical emergency, regardless of the patient’s symptoms or their belief that they required ER attention. Sixty-one percent disagree with this type of policy. [Q745]

### *A vast majority of Americans overestimate the percentage of total health care costs in the United States that is comprised of emergency room care.*

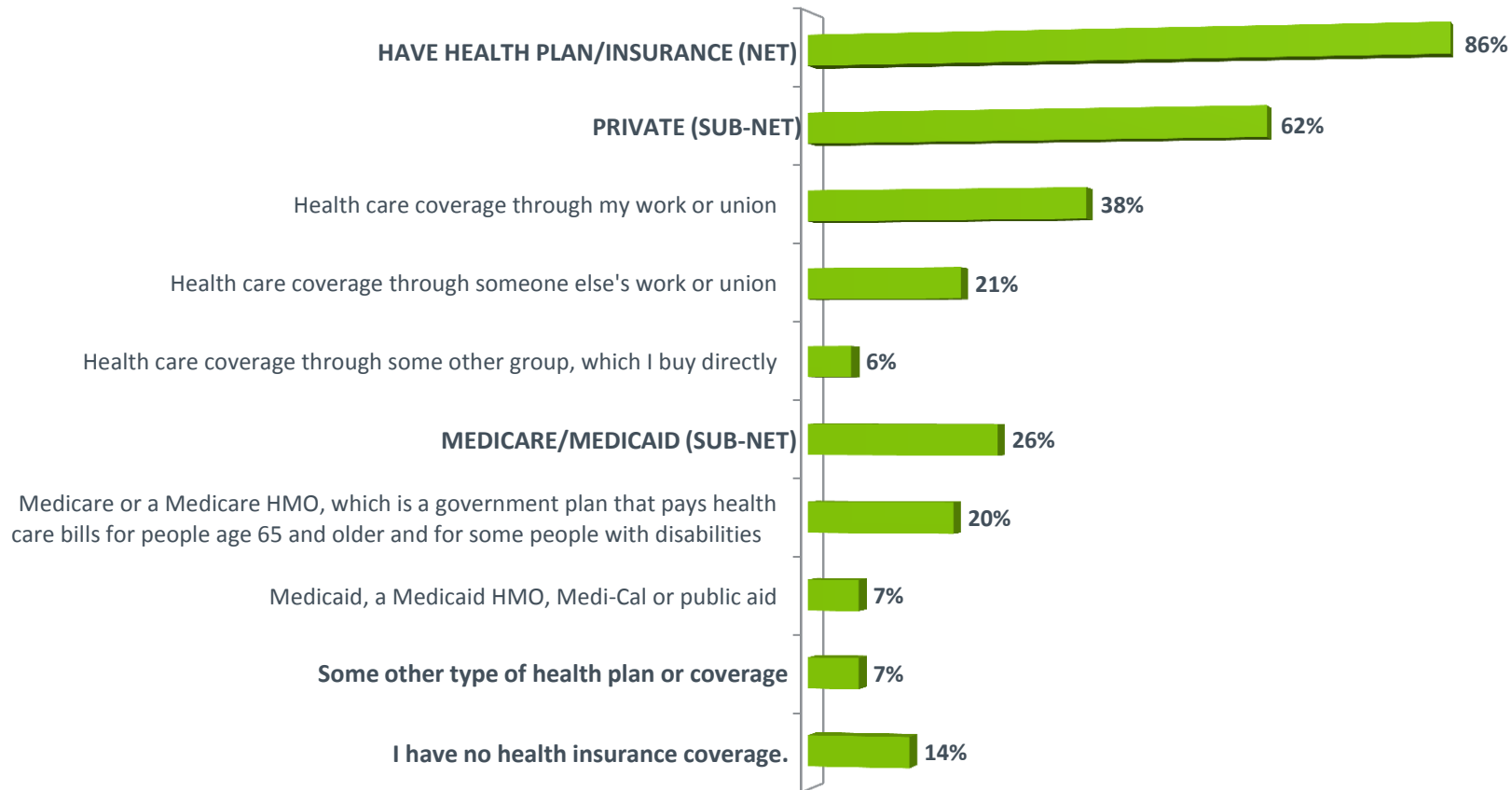
- + According to statistics, less than 2 percent of the total health care costs in the United States are made up by emergency room care. However, only 4% of respondents were able to identify the correct answer, “Less than 5 percent,” indicating that a full 96% overestimate the proportion of emergency room care as a part of the total healthcare costs in this nation. Most respondents believe this percentage to be much higher - a plurality estimate this figure at “26 to 50 percent” (40%), while another 23% estimate it to be “51 to 75 percent” of total healthcare costs. [Q755]
- + When informed that emergency room care accounts for less than 2 percent of healthcare costs in the United States, 90% of respondents consider themselves at least somewhat surprised by this estimate. Sixty-six percent are extremely/very surprised by this. [Q760]



# Detailed Findings

While a large majority of the population has healthcare coverage from either private or public sources, nearly 1 in 7 have no health insurance coverage at all.

Type of Health Plan or Health Insurance



Base: Qualified Respondents (n=1,026)

Q703 Which type of health plan or health insurance, if any, do you currently have for yourself? Please select all that apply.

The percentage with no health insurance coverage is higher among 18-34 year olds, the unemployed, and those with lower household incomes.

“I have no health insurance coverage.”



LETTERS = Significantly higher at the 95% confidence level

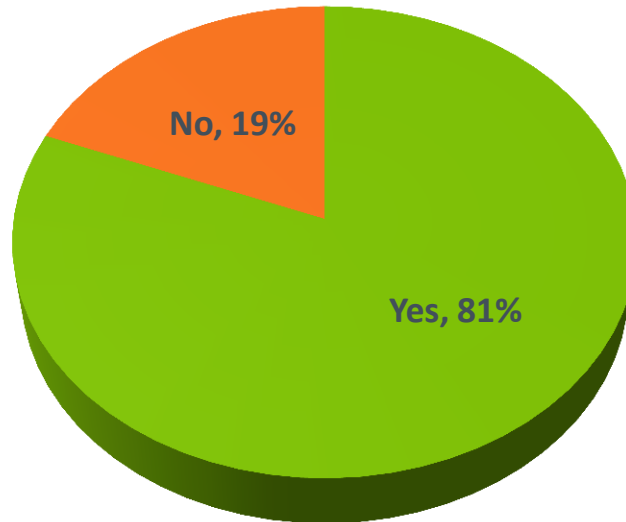
Base: Qualified Respondents (n=1,026); 18-34 Year Olds (n=199); 35-44 Year Olds (n=175); 45-54 Year Olds (n=165); 55+ Year Olds (n=487); FT/PT/Self Employed (n=562); Unemployed (n=126); Retired (n=233); Less than \$35K (n=211); \$35K-\$49.9K (n=136); \$50K-\$74.9K (n=183); \$75K+ (n=362)

Q703 Which type of health plan or health insurance, if any, do you currently have for yourself? Please select all that apply.

“I have no health insurance coverage” responses.

A large majority currently have a regular medical provider, although nearly 1 in 5 do not.

Currently Has A Regular Medical Provider

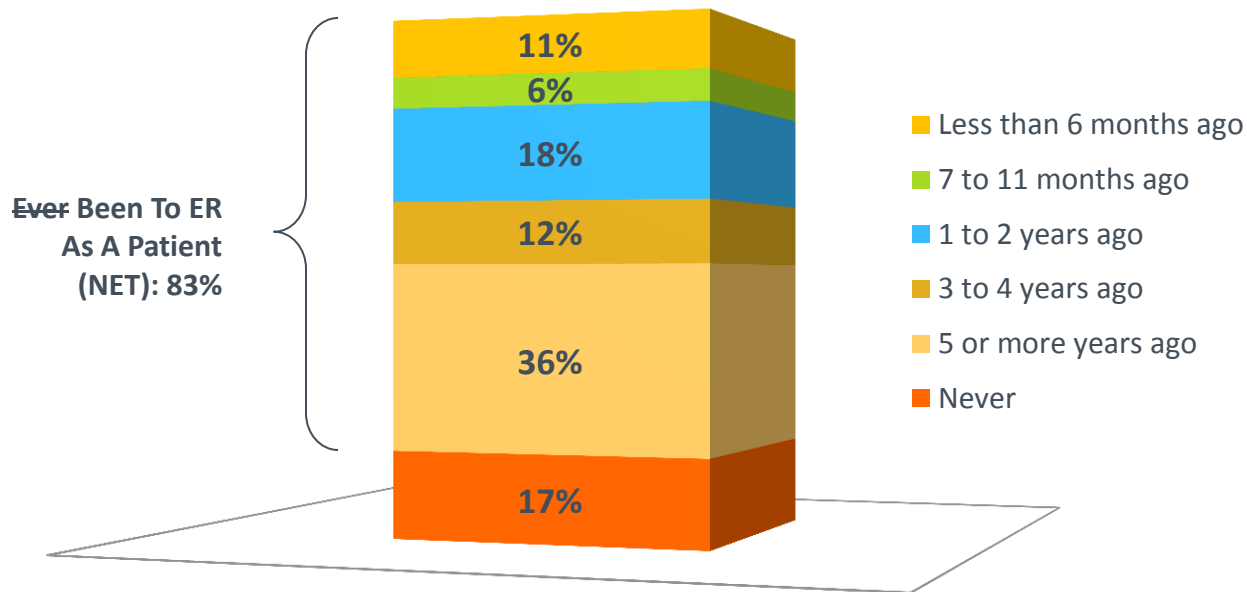


**Base: Qualified Respondents (n=1,026)**

**Q705** Do you have a regular medical provider, such as a family practitioner, internist, gynecologist, nurse practitioner, or physician assistant?

# More than 4 in 5 respondents have been to a hospital ER as a patient.

## Most Recent Time At ER As A Patient

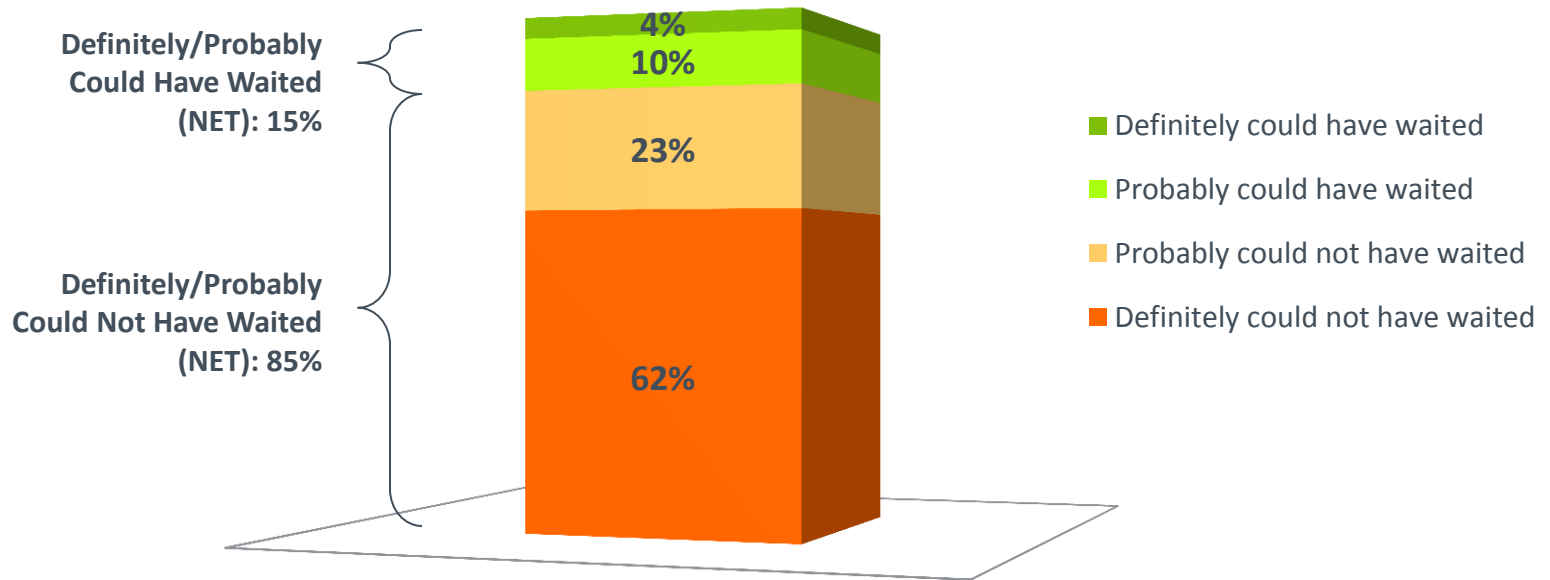


Base: Qualified Respondents (n=1,026)

Q710 When was the most recent time you have been to a hospital emergency room as a patient?

Among those who had a regular medical provider at the time of their most recent ER visit, more than 4 in 5 believe they could not have waited to see their provider first before going to the ER.

Degree To Which Emergency Could Have Waited  
For Regular Medical Provider

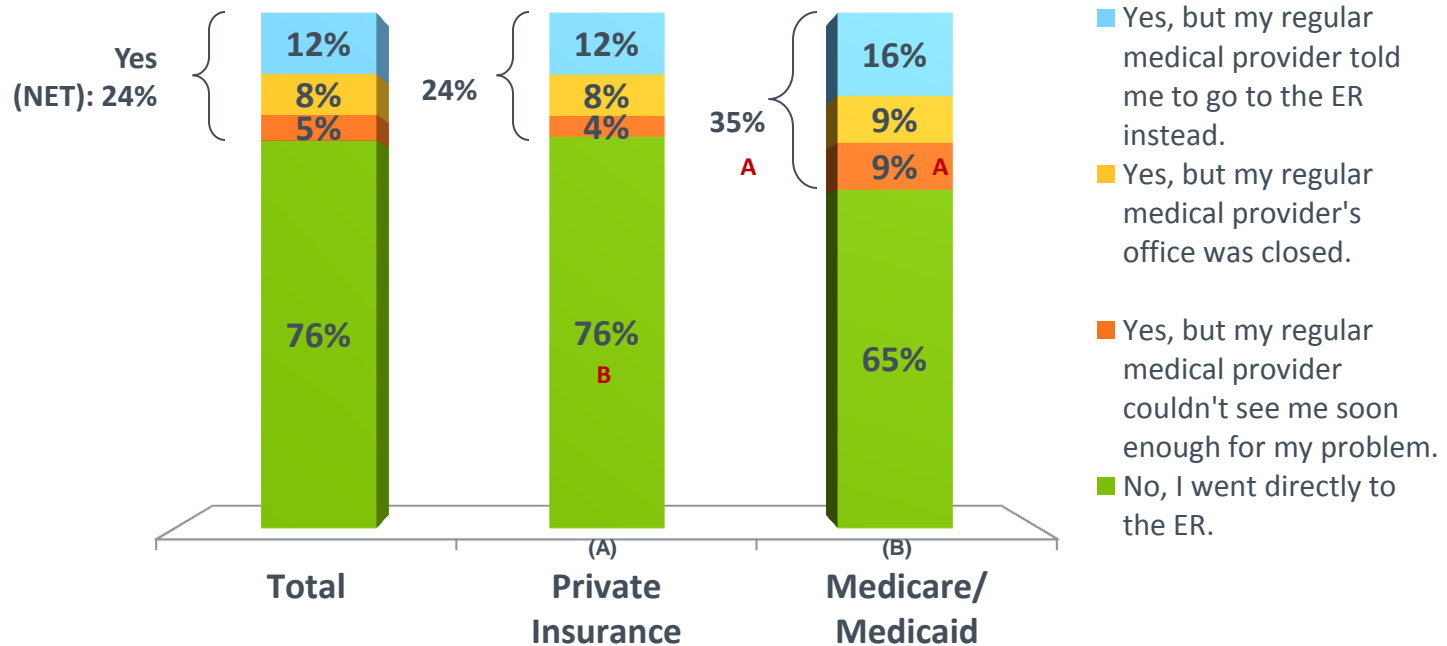


**Base: Ever Been To Emergency Room As A Patient And Had A Regular Medical Provider At That Time (n=827)**

**Q715** Thinking back to your last emergency room visit when you were a patient, could you have waited to see your regular medical provider first, instead of going to the emergency room?

Overall, a quarter of those who had a regular medical provider at the time of their last ER visit tried to get an appointment with them prior going to the ER. Medicaid/Medicare patients were significantly more likely to have done this than those with private insurance.

**Tried To Get Appointment With Regular Medical Provider  
Before Going Directly To The ER**



LETTERS = Significantly higher at the 95% confidence level

**Base: Ever Been To Emergency Room As A Patient And Had A Regular Medical Provider At That Time (n=827);  
Private Insurance (n=543); Medicare/Medicaid (n=244)**

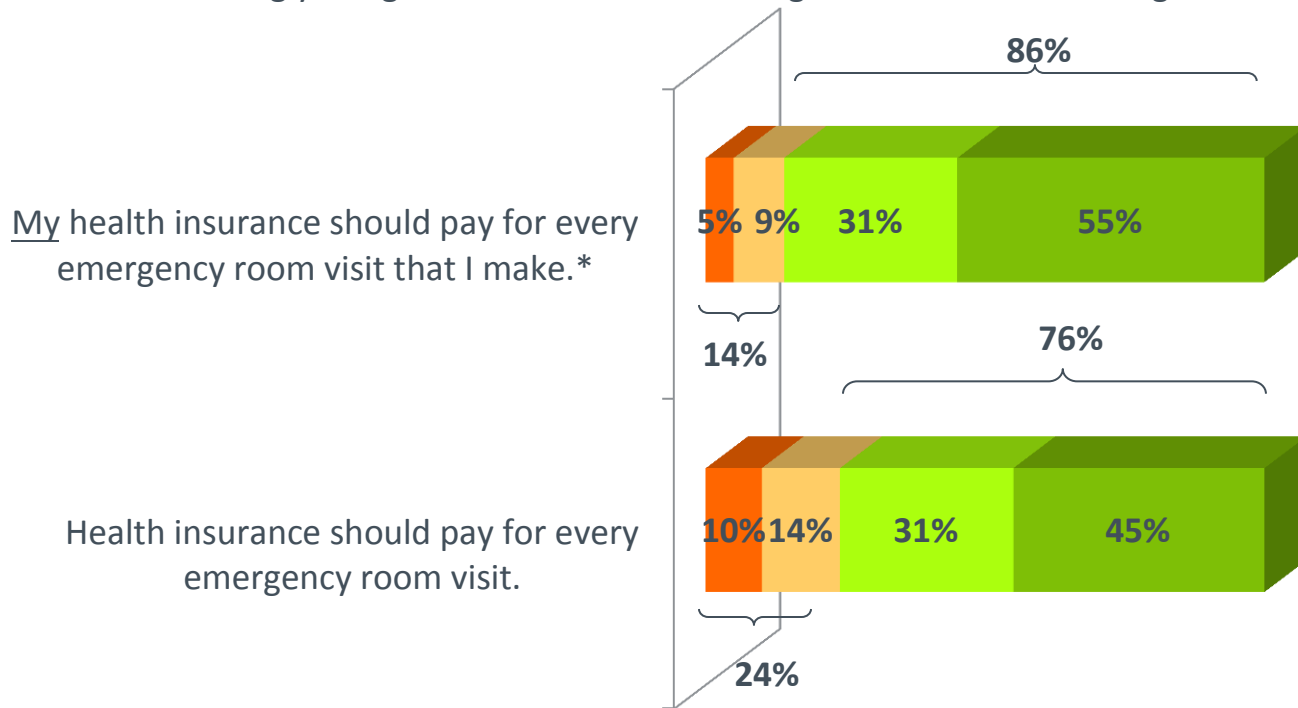
**Q720** Thinking back to your last emergency room (ER) visit, did you try to get an appointment with your regular medical provider before going to the ER?



**While 76% of all respondents agree that health insurance should pay for every emergency room visit, 86% of those who have health insurance agree with this sentiment when the statement refers to them personally.**

**Agreement With Statement About ER Visit Coverage**

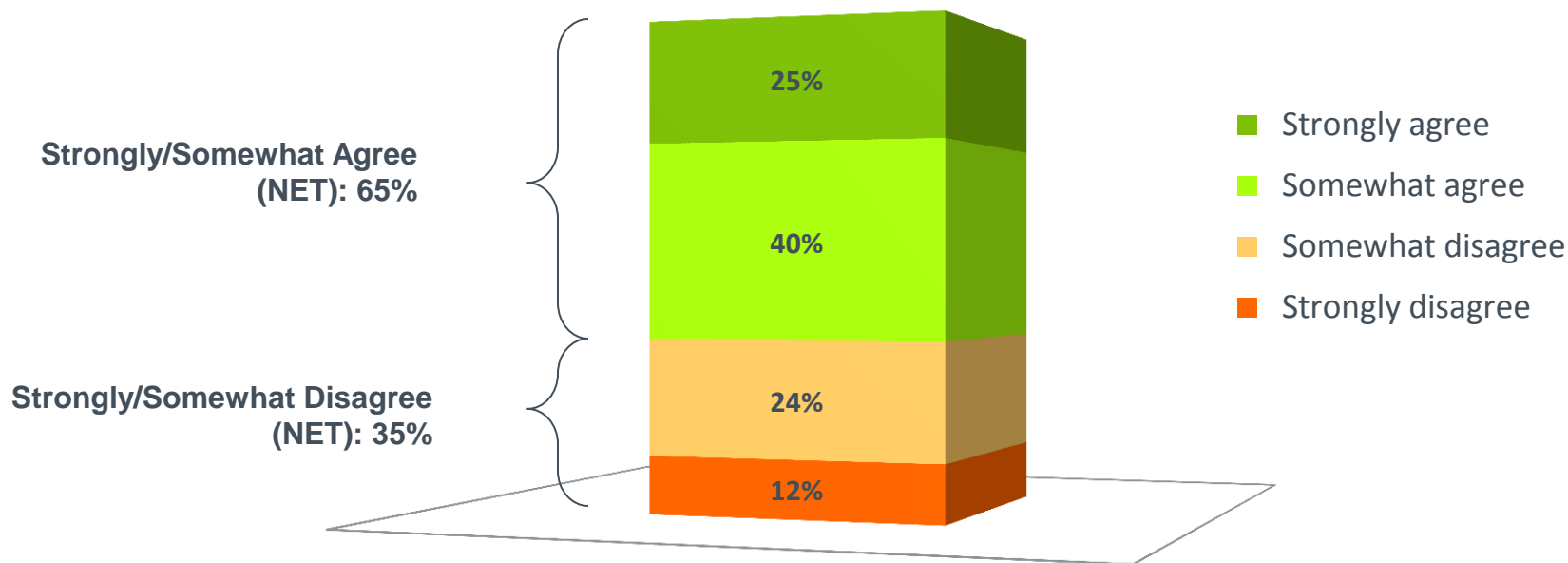
■ Strongly disagree   
 ■ Somewhat disagree   
 ■ Somewhat agree   
 ■ Strongly agree



Base: Qualified Respondents (n=1,026); \*Reduced Base: Qualified Respondents Who Have Health Insurance (n=920)  
 Q735 How much do you agree or disagree with each of the following statements?

# Nearly two-thirds agree that health insurance should pay for an ER visit even if the condition is diagnosed as non-serious or non-life threatening.

## Agreement With Coverage For ER Visits Diagnosed As Non-Serious



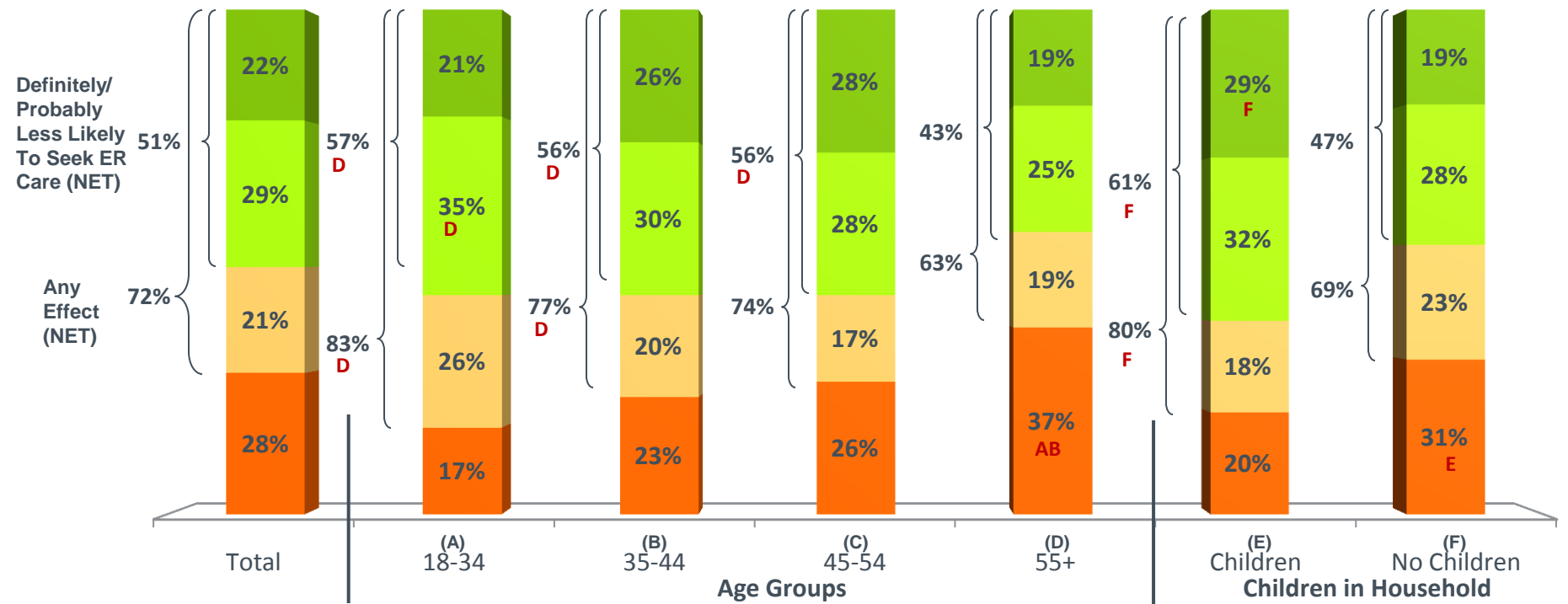
Base: Qualified Respondents (n=1,026)

Q740 How much do you agree or disagree that health insurance should pay for an emergency room visit *even if* the condition is diagnosed as non-serious or non-life threatening?

Over 7 in 10 would be less likely, and 1 in 2 definitely/probably less likely, to seek ER care if their health insurance would not pay for visits that resulted in a non-emergency diagnosis. Younger adults and those with children in the household are significantly more likely to answer this way.

### Effect of Non-Emergency Policy on ER Visits

■ Definitely less likely to seek ER care 
 ■ Probably less likely to seek ER care 
 ■ Somewhat less likely to seek ER care 
 ■ No effect at all

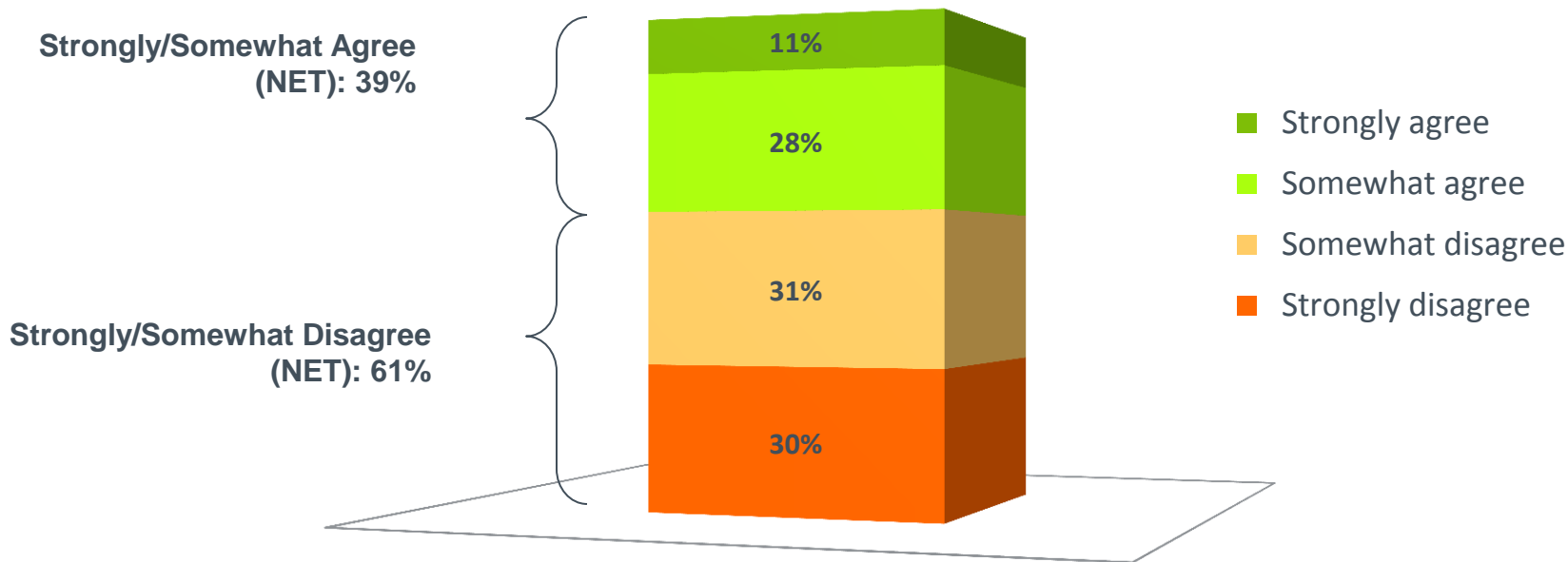


Base: Qualified Respondents (n=1,026); 18-34 Year Olds (n=199); 35-44 Year Olds (n=175); 45-54 Year Olds (n=175); 55+ Year Olds (n=487); FT/PT/Self Employed (n=562); Children in HH (n= 274); No Children in HH (n=748)

Q742 Now please imagine that you were told that health insurance plans would not pay for emergency room care if the patient had symptoms that they *thought* were serious or life-threatening but actually were not, and that the patient would be responsible for paying the medical costs in full. What effect would this type of policy have on your likelihood to seek emergency room care for symptoms you believe are serious?

Over 6 in 10 *disagree* with proposed Medicaid policies that would pay for ER visits only if the patient's diagnosis was a true medical emergency, regardless of the patient's symptoms or belief that it was an emergency.

Agreement with Medicaid Nonpayment Policy For ER Visits  
Resulting In A Non-Emergency Diagnosis



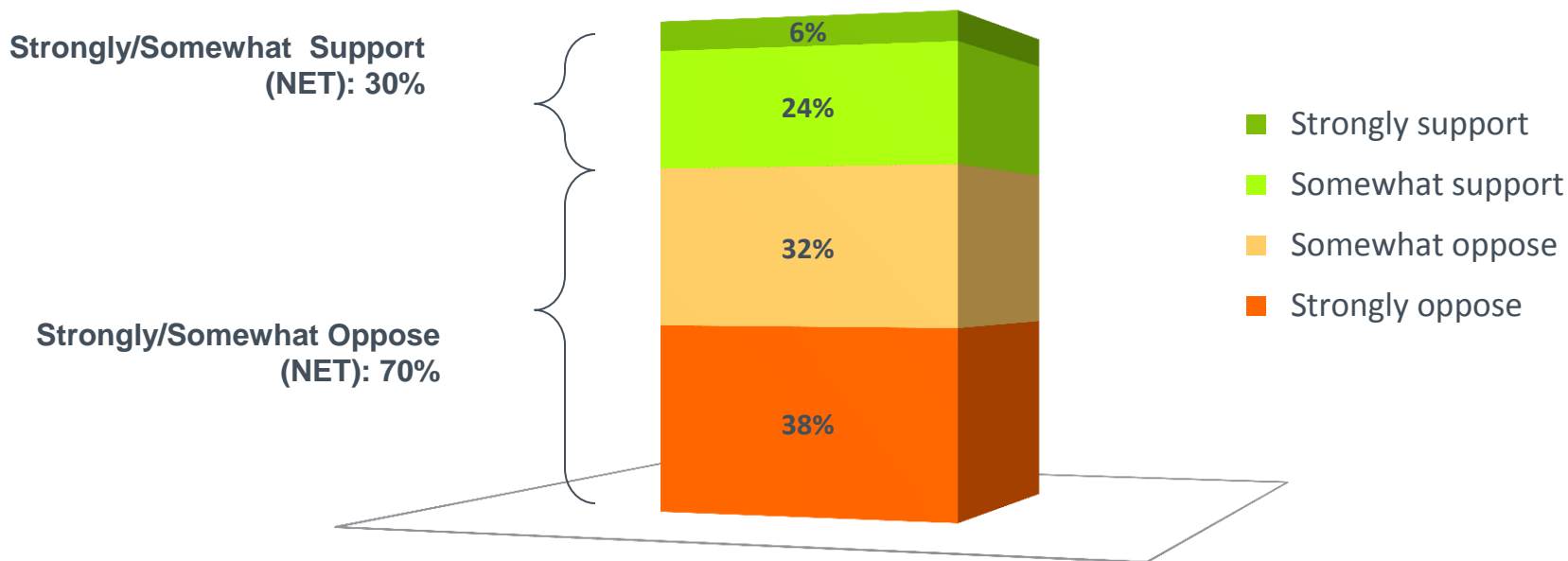
Base: Qualified Respondents (n=1,026)

Q745 A state Medicaid office has been seeking to cut costs by restricting payments for emergency room visits. They have proposed to pay only if the patient's diagnosis was a true medical emergency, regardless of the patient's symptoms or the patient's belief that they required emergency room attention.

How much do you agree or disagree with this type of policy?

Seven in ten *oppose* insurance companies' efforts to deny payments for ER visits if the diagnosis is a non-emergency condition, even if the patient believed they were having an emergency.

**Support Of Insurance Company Nonpayment Policy For ER Visits  
Resulting In A Non-Emergency Diagnosis**

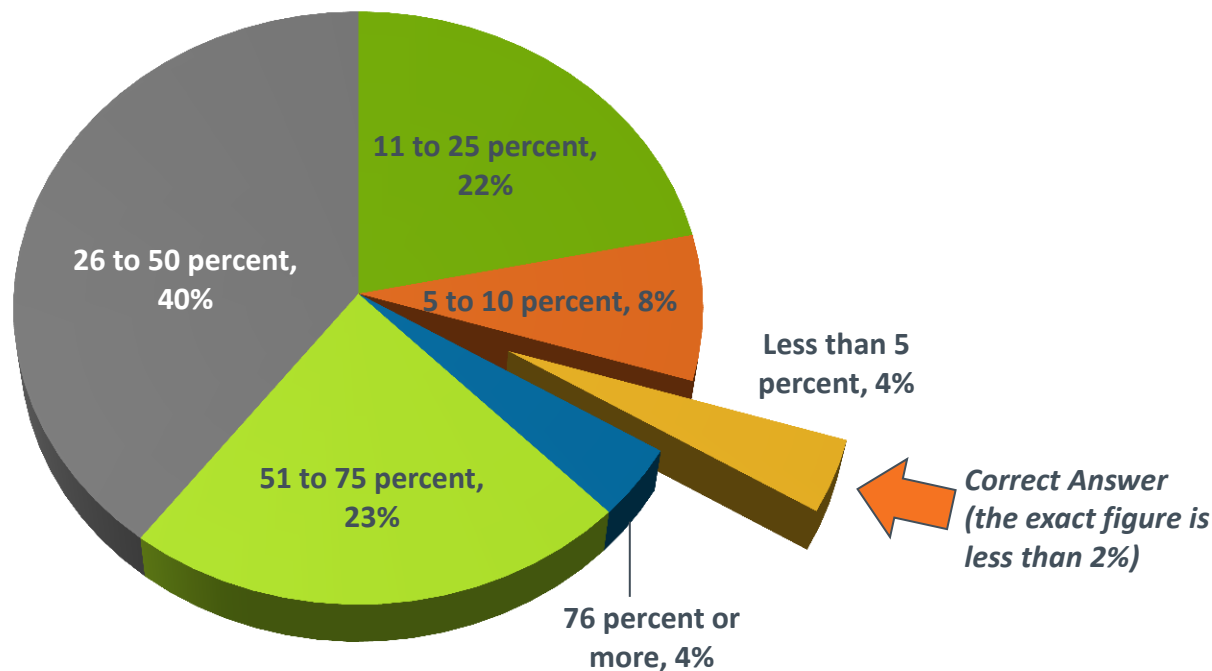


**Base: Qualified Respondents (n=1,026)**

**Q750** How much do you support or oppose insurance companies' efforts to deny payment for emergency room visits if the diagnosis is a non-emergency condition, even if the patient believed they were having an emergency?

Only 4% of respondents selected the correct answer, “Less than 5 percent,” when asked what percentage of US healthcare costs are made up by ER care. 2 in 5 estimate it to be 26-50 percent of total costs, while nearly a quarter place that figure at 51-75 percent.

Estimated Percent of US Health Care Costs Attributed To ER Care

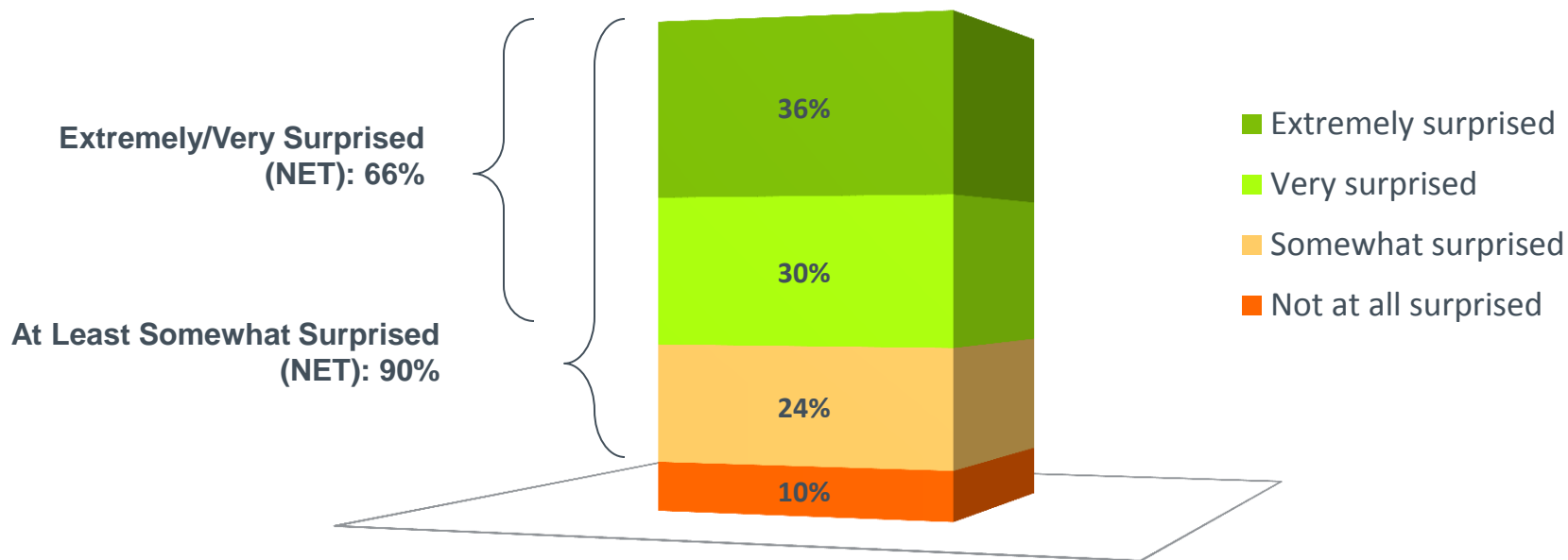


Base: Qualified Respondents (n=1,026)

Q755 Thinking about the total costs of health care in the United States, what percentage of these costs do you think is made up by emergency room care? If you are not sure, please give your best guess.

When told that ER care accounts for less than 2 percent of healthcare costs in the US, 9 in 10 are at least somewhat surprised, and two-thirds describe themselves as extremely/very surprised.

Level of Surprise At Reported ER Costs As a Percent of US Health Care Costs



**Base: Qualified Respondents (n=1,026)**

**Q760** According to reputable sources, emergency room care accounts for less than 2 percent of health care costs in the United States. How surprised are you by this estimate?



# Demographics



# Demographics

## Parent Gender, Age, Ethnicity, Marital Status, Region, Employment

<b>Gender</b>	
Male	47%
Female	53%
<b>Age</b>	
18-34	28%
35-44	19%
45-54	13%
55+	40%
<i>Mean</i>	47.1
<b>Ethnicity</b>	
White	73%
Hispanic	12%
Black/African American	10%
Asian or Pacific Islander	2%
Native American or Alaskan native	*
Mixed racial background	1%
Decline to answer	2%
<b>Marital Status</b>	
Never married	22%
Married or Civil union	55%
Divorced	9%
Widow/Widower	4%
Separated	1%
Living with Partner	9%

An asterisk (\*) signifies a value of less than one-half percent.

<b>Region</b>	
East	22%
Midwest	23%
South	31%
West	24%
<b>Employment Status</b>	
Employed full time	40%
Employed part time	7%
Self-employed	8%
Not employed, but looking for work	5%
Not employed and not looking for work	1%
Not employed, unable to work due to a disability or illness	20%
Retired	6%
Student	4%
Stay-at-home spouse or partner/housewife/husband	8%

**Base: Qualified Respondents (n=1,026)**

**Q268** Gender

**Q280** Age

**Q485** Race/Ethnicity

**Q364** What is your marital status?

**Q320** U.S. Region-Harris Interactive Definition

**Q406** What is your employment status?

# Demographics

## Education and Income

Education	
<b>High School or Less (Net)</b>	<b>41%</b>
Less than high school	1%
Completed some high school	4%
Completed high school	29%
Job-specific training program(s) after high school	6%
<b>College (Net)</b>	<b>30%</b>
Completed some college	20%
Associate Degree	10%
Completed College	29%
<b>Grad (Net)</b>	<b>19%</b>
Completed some graduate school	3%
Completed graduate school	8%

Income	
<b>&lt; \$35,000 (Net)</b>	<b>24%</b>
Less than \$15,000	7%
\$15,000 to \$24,999	9%
\$25,000 to \$34,999	8%
<b>\$35,000 - &lt; \$75,000 (Net)</b>	<b>29%</b>
\$35,000 to \$49,999	12%
\$50,000 to \$74,999	17%
<b>\$75,000 Or More (Net)</b>	<b>34%</b>
\$75,000 to \$99,999	12%
\$100,000 to \$124,999	8%
\$125,000 to \$149,999	6%
\$150,000 to \$199,999	5%
\$200,000 to \$249,999	1%
\$250,000 or more	2%
<b>Decline to answer</b>	<b>13%</b>

Base: Qualified Respondents (n=1,026)

Q437 What is the highest level of education you have completed or the highest degree you have received?

Q462 Which of the following income categories best describes your total 2011 household income before taxes?