

**Wisconsin Medicaid Emergency Room Report
Summary of “High Utilizers”
Calendar Year 2004**

Background Fee-for-service Recipients

- ≥ 1 ER visit – 221,445 ER Visits for 112,419 Recipients (avg = 1.97)
- ≥ 6 ER visits – 50,729 ER Visits for 4,968 Recipients (avg = 10.21)
 - 1463 Recipients from Milwaukee County (29.4%)
 - 3505 Recipients from other counties (70.6%)
 - ≥ 1 claim from Community Service Program – 242 Recipients
 - ≥ 1 claim from Targeted Case Management – 608 Recipients
 - ≥ 2 claims from a medical provider (MD, NP, PA) – 3639 Recipients
 - No apparent established relationship with any provider – 1105 Recipients
- Max number ER visits for any recipient = 151

Background Managed Care Enrollees

- ≥ 1 ER visit – 257,185 ER Visits for 137,914 Enrollees (avg = 1.86)
- ≥ 6 ER visits – 40,484 ER Visits for 4,605 Recipients (avg = 8.79)
- Max number ER visits for any enrollee = 116

Interventions Fee-for-service Recipients

- Educational letter to high utilizer recipients and their providers
 - Letter to recipient
 - Letter to established medical provider(s)
 - Letter to case manager(s)
 - Community Service Program/Targeted Case Management
- Secure web-based tool to share utilization with emergency rooms
 - Reports for recipients with ≥ 3 ER visits in past 12 months
 - FFS and Managed Care included
 - User name and password logons for facility personnel
 - Reports available
 - Enrollment and program information
 - Name and phone number for LI, CSP, TCM providers
 - ER profile
 - Medication profile
 - Inpatient admissions
 - Outpatient/Professional office visits
 - Claims lag
 - Disclaimer regarding how information is to be used
- Possible lock-in for abuse of emergency room services
- Possible case management for sub-populations of high utilizers