

Where Do Americans Get Acute Care? Not at Their Doctor's Office

Historically, Americans looked to their primary care physician for acute care—that is, treatment for a new or worrisome condition or a flare-up of a chronic health problem, such as asthma or diabetes. Today, however, the picture has changed: Less than half of acute care visits in the United States involve the patient's personal physician. Instead, according to a study published in *Health Affairs*, a large and growing number of Americans are seeking care in hospital emergency rooms and other non-primary care settings.

Using merged data from three major federal surveys of ambulatory care delivery in the United States, the study examined where and why Americans receive acute care. Results showed that between 2001 and 2007 (the latest data available):

- Americans made an average of 354 million acute care visits per year, accounting for more than one-third of all medical encounters.
- Of these, 45 percent involved the patients' personal physicians.
- The other 55 percent were to emergency departments (28 percent), office-based specialists (20 percent), and outpatient departments (7 percent).

The results indicate that a relatively small proportion of doctors—emergency department (ER) physicians, who comprise only 4 percent of doctors—handle more than one-fourth of all acute care encounters and nearly all after-hours and weekend care. ER physicians also provide more acute care to the uninsured than all other doctors combined.

The main barriers to getting acute care in primary care settings are timeliness and complexity. Because the schedules of many primary care physicians are packed with 15-minute office visits, they have little or no time to see unscheduled patients, particularly those who have complicated problems. And primary care physicians have few incentives to offer extended hours of practice (only 40 percent do) or see patients on weekends.

The recently enacted health reform law contains several provisions intended to boost access to primary care, but it does not require practices to offer same-day appointments or extended office hours. As various provisions of the health reform law come into effect, one way to evaluate their impact will be to monitor where Americans get care for acute health problems.

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Headquarters Campus
 1776 Main Street
 P.O. Box 2138
 Santa Monica, California
 90407-2138
 TEL 310.393.0411
 FAX 310.393.4818

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