



PENNSYLVANIA CHAPTER  
AMERICAN COLLEGE OF  
EMERGENCY PHYSICIANS

# FastTrack

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## PENNSYLVANIA RECEIVES C+ FOR ITS SUPPORT OF EMERGENCY PATIENTS IN NATIONAL REPORT CARD ON STATE OF EMERGENCY MEDICINE

### A POOR MEDICAL LIABILITY ENVIRONMENT, WORKFORCE SHORTAGES THREATEN PENNSYLVANIA'S HIGHLY RANKED EMERGENCY MEDICAL CARE SYSTEM

Pennsylvania received an overall grade of C+ and tied for 8th in the nation, according to a new Report Card released December 9 by the American College of Emergency Physicians (ACEP). The Report Card comes at a time when the national picture looks bleak: job and insurance losses, a rapidly growing senior population and a recent survey forecasting critical shortages of primary care doctors all point to escalating emergency patient populations.

Despite its above-average grade, the Report Card shows a need for Pennsylvania to recruit and retain an adequate medical workforce and make serious medical liability reforms. The low point of Pennsylvania's Report Card was in the category of Medical Liability Environment where it received a grade of D and a national ranking of 38th. Pennsylvania had established a program called Mcare, which provided physicians with half of their required liability insurance coverage and discounted premiums. Authorization for the Mcare fund was allowed to lapse in 2008, and although the future of the program remains unclear at the time of this report, failure to revive it or to responsibly phase it out could lead to more physicians leaving the state.

"As mandated, the state should ensure that the pace of the phase-out of the MCARE program is conducted in a way that won't further increase the excessively high liability premiums paid by the state's physicians," says John Joseph Kelly, DO, president of the Pennsylvania Chapter of ACEP. "The state should also consider additional reforms such as enacting special liability protections for federally mandated emergency care."

The state's grade of C- and ranking of 23rd in Access to Emergency Care was due specifically to the state's need for primary care and mental health providers, high hospital occupancy rates, and low Medicaid reimbursement rates for office visits. Medicaid reimbursement for office visits are only 54.5 percent of the national average, despite a 38.1 percent increase between 2004 and 2007. On a positive note, slightly more than seven percent of children and fewer than 11 percent of adults in Pennsylvania are uninsured compared with averages of 11.7 and 17.2 percent nationwide.

Pennsylvania fared well in the category of Public Health and Injury Prevention with a grade of B- and a national ranking of 17<sup>th</sup>. However, negative indicators such as our infant mortality rate, high smoking and binge drinking rates, lack of mandatory motorcycle helmet law, and a lower than average score on child safety seat/seat belt legislation prevented the state from receiving a higher grade and ranking.

Disaster Preparedness in Pennsylvania received an A and a national ranking of 4<sup>th</sup>. The state leads the nation with the numbers of disaster drills and exercises conducted involving hospital personnel, equipment, or facilities. Pennsylvania has also made a number of noteworthy accomplishments with regard to the state's Quality & Patient Safety Environment and received an A and a ranking of 4<sup>th</sup> in the nation.

The nation's failure to support emergency patients resulted in a C- for the country overall. Massachusetts earned the highest overall grade of a B and Arkansas ranked last (51<sup>st</sup>) with a D-.

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