Case Study Name: Database Saves the State of Washington Medicaid Dollars

- Investigate the business problem
  - 1. Some patients are admitted to the emergency room who are never seen by the physician before but needs ⊠to be diagnosed quickly. In such cases if the patient's medical history was known prior to the physicians it would lead to faster diagnosis, less expensive and precise.
  - 2. Some of the patients visits the hospital's emergency room more than 4 times in a every single year which compromises 20 percent of the emergency room visit paid for by Medicaid.
  - 3. The state announced that it would no longer provide reimbursement to hospitals for more than three non-emergency ER visits by a Medicaid recipient each year which in turn would increase the hospital's costs.
  - 4. The state's Medicaid created a list of 500 medical problems that it would no longer reimburse as emergency care which lead to a problem saying that the patients which were not treated in hospitals reduced the hospital's income.
- Examine the alternative solutions
  - Patients who went to the ER more than four times in a year compromised 20
    percent of ER visits paid by Medicaid, to address this problem, the State of
    Washington implemented the Emergency Department Information Exchange (EDIE),
    a database that contains the records of each patient treated in every hospital ER in
    the state. The database allows physicians to track patients' ER visits to multiple
    hospitals.
  - 2. Medicaid created EDIE database that meets federal health privacy laws which allowed only approved medical staff members to access data of patients under their care. When a patient registers at an ER anywhere in the state of Washington, the physician and nurses attending that patient receives a fax or email from the database. The report lists all of the patient's recent ER admissions, diagnoses and treatments, which helps the physicians to track the patients care when the leave the ER.
- Propose the most effective solution using supporting evidence
  - 1. The most effective solution is Medicaid created EDIE database that meets federal health privacy laws which allowed only approved medical staff members to access data of patients under their care. When a patient registers at an ER anywhere in the state of Washington, the physician and nurses attending that patient receives a fax or email from the database. The report lists all of the patient's recent ER admissions, diagnoses and treatments, which helps the physicians to track the patients care when the leave the ER.
  - 2. The supporting evidence to prove that the above solution is most effective is that it helped reduced the prescription of narcotics in the sate's ERs by 24 percent in its first year of use in large part because patients cannot visit multiple health facilities to obtain prescriptions.
  - 3. Data released in March 2014 indicate that ER visits by Medicaid patients dropped 10 percent in the 2013 fiscal year, and the rate of ER visits that resulted in a nonacute

diagnosis decreased more than 14 percent. The state credits the database for a substantial amount of the state's \$33.7 million reduction in 2013 Medicaid costs.

## Highlight relevant facts

- 1. In the state of Washington, patients who went to the ER more than four times in one year comprise some 20 percent of all ER visits paid for by Medicaid.
- 2. The database has helped reduce the prescription of narcotics in the sate's ERs by 24 percent in its first year of use in large part because patients cannot visit multiple health facilities to obtain prescriptions.
- 3. More than 400 primary care physicians have signed up to receive automatic notifications when one of their patients is admitted to the ER.
- 4. Data released in March 2014 indic⊠ate that ER visits by Medicaid patients dropped 10 percent in the 2013 fiscal year, and the rate of ER visits that resulted in a nonacute diagnosis decreased more than 14 percent.
- 5. The state credits the database for a substantial amount of the state's \$33.7 million reduction in 2013 Medicaid costs.

## • Underline key problems

- Patients visits the hospital's emergency room more than 4 times in a every single year which compromises 20 percent of the emergency room visit paid for by Medicaid.
- 2. The state's Medicaid programme produced a list of 500 medical conditions for which it would no longer compensate as emergency treatment, causing a dilemma because individuals who were not treated in hospitals reduced the hospital's revenue.
- 3. Patients are admitted to the emergency room who have never seen a doctor before and require prompt diagnosis. In such circumstances, knowing the patient's medical history before the doctors arrived would result in a speedier, less expensive, and more exact diagnosis.