

UR in the ER

A New Frontier

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Business Plan to Support FTE's

How we sold it in Connecticut

- Conversion of ED treat and release with LOS > 8 hours to Observation for incremental revenue
- Conversion of Observation cases with LOS > 24 hours to inpatient for incremental revenue
- Reduction in status denials – both commercial and governmental
- Compliance with Conditions of Participation for Utilization Review

Present State of UR in the ER

- 2 FTE's approved and filled in January, 2014
- 2 additional FTE's approved in September, 2014 – not filled yet
- Present coverage is 10 am to 10 pm seven days/week

Successes

- ED observations increased resulting in revenue gain
- Decreased Code 44's
- Decreased commercial denials
- Continuous Physician Education
- Cinderella plan

Challenges/Next Steps

Fill open positions to reach 24/7 coverage

Clear definition of UR role (separate from Care
Coordination/Discharge planning)

Hand Offs from ED UR to In-house UR

Overuse of ED observation status

Consistent messages to physicians