Economic woes and a failing health care system mean more people than ever are relying on emergency care. But emergency physicians give the country a C- for its support for emergency resources.

“Emergency medical care is the most overlooked part of our health care system, and the one everyone depends on in their hours of need,” said Nicholas Jouriles, MD, the president of the American College of Emergency Physicians (ACEP), announcing the 2008 report card in December.

He called on policymakers to make strengthening emergency departments a national priority.

The report card measures state support for emergency care on 116 indicators. Massachusetts received the highest grade of B, followed by the District of Columbia, Rhode Island, and Maryland, all earning a B-. The lowest score went to Arkansas. Oklahoma, New Mexico, Oregon, and Idaho were also near the bottom.

“The emergency care system is a ticking time bomb, accelerated by the financial crisis plus physician shortages that won’t be solved for at least a decade,” said ACEP’s president-elect, Angela Gardner, MD. She said emergency rooms are already crowded to the point where there are “life-threatening delays of care.”

Many hospitals are piling up unpaid medical bills. For example, the public health system Denver Health had a 19% increase in emergency visits by uninsured patients in November, the New York Times reported.

Denver Health expected its uncompensated care to rise to $300 million in 2008 compared to $276 million in 2007.

What should be done?
The emergency physicians’ report card has 8 national recommendations plus recommendations for each state:
1. Create stronger emergency departments through national health care reform.
2. Alleviate boarding in emergency departments and hospital crowding.
3. Pass the Access to Emergency Services Act, which would appoint a commission to address ways to improve the emergency system.
4. Enact federal and state medical liability reforms.
5. Target more federal funding into disaster preparedness.
6. Increase support for the nation’s health care safety net.
7. Develop greater coordination of emergency services.
8. Increase use of systems, standards, and information technology to track and improve quality and patient safety.

The report card addresses 5 categories of measures: access to emergency care, quality and patient safety, medical liability, public health and injury prevention, and disaster preparedness. The new category of disaster preparedness was added in 2008. The report card was introduced in 2006.

To read more about the report card and see how your state ranks, go to www.emreportcard.org.

Nation’s emergency care a ‘ticking time bomb’