

Georgetown Emergency Services Expansion

Improving Access for Central Sussex County

Goals of Project

- Improve timely access to diagnosis and treatment for those experiencing medical emergencies.
- Improve access to needed healthcare services for residents in central Sussex County.
- Provide safety net health services for a low income and high need population.



Large and Growing Population

- 12.7% growth in Sussex County since 2010
- 15.8% growth in eastern Sussex County since 2010
- 8% projected growth in next 7 years
- 25.2% projected growth by 2023 of 65+ population
- 65+ population will make up 30% of Beebe's Primary Service Area; use ED services 25% more than general population

Georgetown Service Area (2018) Route 113 Corridor		
Town	Zip Code	Population
Georgetown	19947	25,056
Millsboro	19966	33,635
Ellendale	19941	3,547
Harbeson	19951	2,123

- Full-time population estimated at 64,300
- Daily commuter-adjusted daytime population: 4,200-5,000

Need of the Population

- Access to timely care is a critical factor for the successful treatment of medical emergencies
- Presently there are no emergency medicine departments located in the center of the county
- Roadway improvements have not kept pace with population growth in Sussex County, especially east west routes
- Travel time from Georgetown to existing EDs can range from 20 to 30 minutes, up to 50 minutes during peak travel times.

Utilization Projections

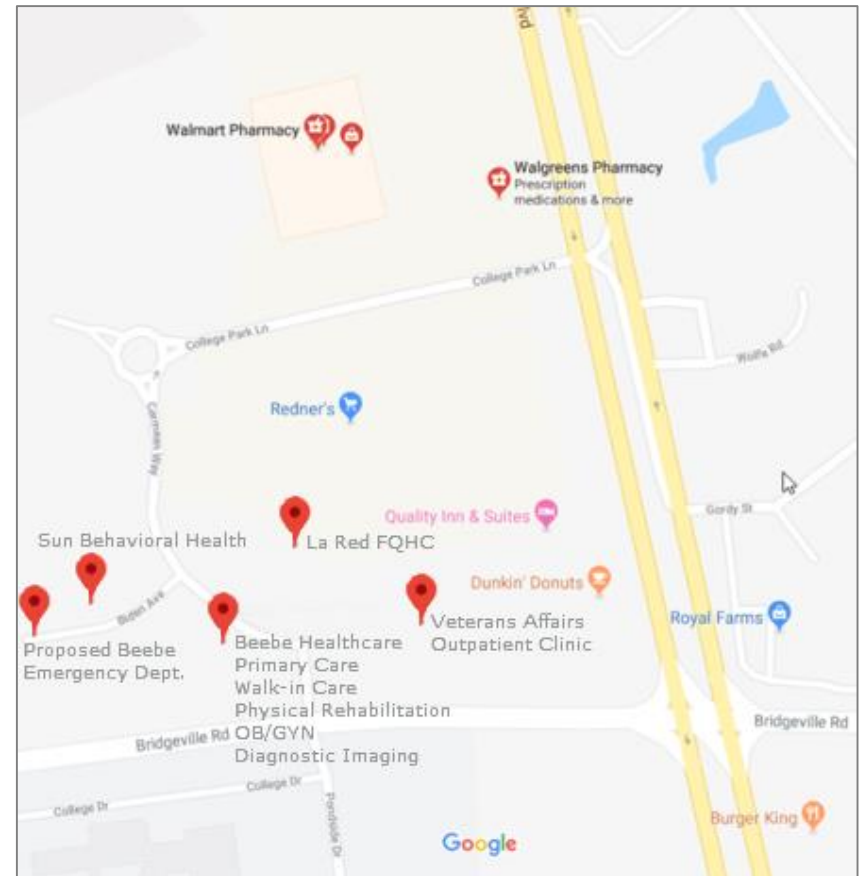
- Health System 100 report, *The Future of Demand for Hospitals*, projects national emergency-visits-per-100-residents between 46.5 and 49 by 2025.
 - 48.3 emergency medicine visits per 100 residents is projected for Georgetown Emergency department
- 14% of projected visits to the Georgetown Emergency Department are expected from those who live outside of Sussex County
- 18% of projected visits are already being served in Lewes
- 24,000 projected visits annually

Less Costly Alternatives

- A portion of visits to emergency rooms are for non-emergent needs
- Beebe operates four Walk-In Care Centers – including in Georgetown and Millsboro – for non-emergent cases
 - 47,000 Walk-In Care Visits in fiscal 2018
- Urgent, level 1 & 2 emergency medicine visits at the ED in Lewes dropped by 18% (2015-2017)
- Medicaid visits to Beebe's Lewes ED declined 6.1% (2016-2018), estimated annual \$151k savings
- Beebe Walk-In Centers operated at a loss of \$5.5 million in fiscal 2018.

Relationship to Existing Healthcare

- Site adjacent to:
 - Beebe Primary Care
 - Beebe Walk-in Care
 - Veterans Outpatient Clinic
 - La Red FQHC
 - Sun Behavioral Health
 - ½ mile to 2 pharmacies
- Beebe has transfer agreements with 52 organizations
- Active relationship with Sussex EMS and Basic Life Support



Impact on Cost

- Unit-based cost or charges to payers or patients:
No anticipated impact
- Matching supply to demand allows for efficient delivery without incentivizing over-utilization
- Improved access to care ensures care is sought and delivered early, before conditions worsen and require hospitalizations, expensive interventions
- Beebe's mission is to provide healthcare when it is needed by the people we serve, as cost effectively as possible

Impact on Cost

- Investment in primary care will increase availability of low cost alternative— Beebe recruiting 14 PCPs
 - Countywide ratio of 1 PCP to 1530 Sussex residents
 - Primary Care in Georgetown operated by Beebe, Bayhealth, Nanticoke, La Red, Veterans Affairs, and several private practices
- Operation of Beebe Walk-In Care will continue to offer low cost alternative for non-emergent care
- Insurance plan design shown to have significant impact on ED utilization. Increasing ED co-payments reduce ED utilization, with no adverse health affect.

Georgetown Emergency Medicine

- 14,413 square feet
 - 21 Emergency exam and treatment rooms
 - Advanced Diagnostic Imaging (CT, X-ray room, Ultrasound)
 - Pharmacy
- Helicopter pad for transport to regional centers
- Capital costs anticipated between \$20-22 million

Financial Viability

- Beebe maintains positive operating margins (2.7% in 2018; projected 2.9% to 3.6% through 2023)
- Tax exempt bond offering will be used to finance construction and equipment costs.
- Analysis by Ponder & Co. affirms ability to secure bond financing without jeopardizing BBB bond rating.
- If projected visits are realized, Georgetown ED projected to operate at a surplus of \$3.5 million
 - This is not all 'new' revenue
 - 18% of visits already served in Lewes; some already served by other health systems

Quality

- Georgetown Emergency Medicine will be included in future Joint Commission accreditation reviews
- Georgetown Emergency Medicine will offer tele-health psychiatric evaluations like in Lewes
- Will seek recognition by state under Emergency Medical Service for Children (EMSC) like in Lewes
- Tele-health connection to A.I. DuPont Hospital for Children will be deployed

Quality

- Timely access to diagnosis and treatment of medical emergencies is the most significant influence of positive outcomes in emergency medicine
- Timeliness of care once at the emergency department is also essential quality metric:

Measure	Performance	National Median
Door to Diagnostic Evaluation by a Qualified Medical Personnel	25 minutes	20 minutes
Median Time for ED Arrival to ED Discharge for Discharged ED patients	2 hrs 50 mins	2 hrs 10 mins
Median Time to Pain Management for Long Bone Fracture	56 mins	51 mins

- Timeliness of care is expected to be faster in free-standing emergency department due to narrower range of case complexity

Conformity to HRMP

- Beebe is an independent, not-for-profit community health system guided by charitable mission to encourage healthy living, prevent illness, and restore optimal health
- Medicare and Medicaid provider
 - 75% of total patient care expenditures for Medicare and Medicaid beneficiaries
- Charity Care Policy for income up to 400% of Federal Poverty Level
- Participant with DHIN; user of EMRs

Conformity to HRMP

- Innovator in Care Coordination (since 2013)
- First DE health system to participate in Medicare Shared Savings Program ACO (since 2014)
- Participate in CMS Bundled Payment for Care Improvement (BPCI) (since 2015)
- Advanced Care Clinic offers post-discharge coordination and follow up for those without PCP
- Beebe C.A.R.E.s program offers comprehensive support for high utilizers of ED and Inpatient care
- All programs focus on improving care outcomes and lowering unnecessary utilization and cost

Questions?

Thank You