

4C.

CHARACTERISTICS OF EMERGENCY ROOM VISITS BY DISEASE CATEGORY, DIAGNOSIS GROUP, AND AGE GROUP

The data in this section are focused on ambulatory care visits to emergency rooms of non-Federal, short-stay hospitals. The emergency room (ER) and the inpatient hospitalization data are mutually exclusive. The ER data include only those who were not admitted as inpatients.

All emergency room visits are those of the residents of Arizona. Ambulatory care visits to hospital emergency rooms of outof-state residents are not included in this report. Diagnostic groupings and code numbers are based on the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM).

*Findings of the National Hospital Ambulatory Medical Care Survey, including data on trends in ER utilization, are available in bound reports of the National Center for Health Statistics and online at http://www.cdc.gov/nchs/ahcd.htm

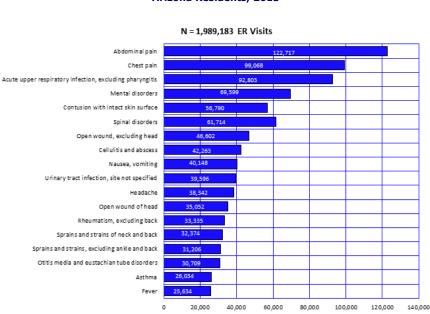


Figure 4C-1 Number of Emergency Room Visits by the Leading Diagnostic Groupings, Arizona Residents, 2013

> During 2013, nearly 2.0 million visits were made by Arizona residents to hospital emergency rooms (ER), about 30.2 visits per 100 persons. The utilization rates vary by geographic region, with the Western United States having the lowest ER visit rate.

> In 2013, abdominal pain, chest pain, acute upper respiratory infection, mental disorders, contusion with intact skin surfaces, and spinal disorders were the leading diagnostic categories, accounting for 22.2 percent of all visits (**Figure 4C-1**, **Table 4C-2**).

> Both *rheumatism* (33,335 visits) and *fever* (25,634) were among the top fifteen complaints, symptoms, or reasons for a visit to the emergency room.

*www.cdc.gov/nchs/data/nhsr/nhsr007.pdf

Note: Based on first-listed diagnosis; See Table 4C-2.

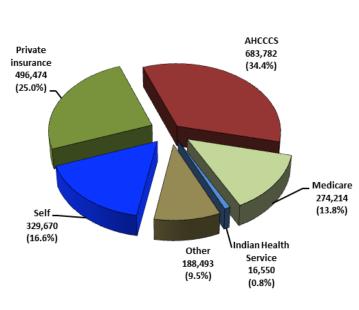


Figure 4C-2 Emergency Room Visits by Payer, Arizona Residents, 2013

> The Arizona Health Care Cost Containment System (AHCCCS, the State's Medicaid program) was the most frequently recorded expected source of payment, accounting for 34.4 percent of ER visits (**Figure 4C-3**). Private insurance was the second most frequent payer (25.0 percent of ER visits), followed by self-pay patients (16.6 percent), and Medicare (13.8 percent).

Notes: Number of visits per 100 persons; The actual number of ER visits for each group is provided below the bars.