

# Using Smart Technology to Manage Frequent Emergency Department Users

*Auscura's platform, SmartContact, now leverages intelligent automation to control emergency department (ED) overuse and avoid unnecessary admissions.*

BURR RIDGE, IL, UNITED STATES, October 17, 2023 /EINPresswire.com/ -- [SmartContact](#) employs a nine-step process aimed at cutting Emergency Department (ED) visits in half by streamlining case manager workflows, crafting personalized care plans, and enhancing communication channels among primary care physicians (PCPs), case managers (CMs), and other members of a patient's care team.



To achieve this goal, SmartContact harnesses the power of predictive analytics, which scrutinizes various factors, including social determinants of health (SDoH), ED visit patterns, and medical issue categorization. This approach is instrumental in gauging the risk of ED overutilization and hospital admissions. SDoH is based on demographic data, medical history, patterns of ED visits and hospitalizations, and primary care accessibility. These insights directly influence case management strategies and present opportunities for social service interventions.

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SmartContact benefits both patients and the healthcare system by addressing each of five facets of value-based Care: quality, utilization, efficiency, satisfaction, and teamwork.”

*Tom Scaletta, MD; CEO,  
Auscura*

One of the core functionalities of SmartContact is the automatic categorization of patients into four distinct groups: medically fragile, psychiatrically fragile, substance users, and convenience visitors. Each category is further subdivided to facilitate a more tailored approach, aiming to effect behavioral change in patients, reduce ED visits, and

minimize hospitalizations. Notably, the customization of care plans extends to collaboration with

the PCP and CM, ensuring the goals are fine-tuned to meet each patient's unique needs.

- Within the medically fragile subcategories, individuals grappling with conditions such as congestive heart failure, emphysema, dementia, and renal failure are identified. This demographic is often elderly, relying on Medicare for healthcare coverage, and typically requires hospitalization upon presenting to the ED. End-of-life planning is often a crucial component of their care, and sometimes hospice placement is deemed appropriate.
- Psychiatrically fragile subcategories encompass patients dealing with psychoses, severe anxiety, major depression, and manic episodes. Many of these individuals face homelessness, and noncompliance with prescribed medications is prevalent.
- Substance User subcategories address patients grappling with alcohol and opiate use disorders. This demographic often contends with inadequate social support networks and may resist enrolling in rehabilitation programs. Furthermore, many face concurrent acute medical complications, such as withdrawal, pneumonia, or ketoacidosis, necessitating admission to the hospital.
- Convenience visitor subcategories are linked to insurance status, with a significant portion of patients relying on government-funded insurance plans that limit their access to primary care physicians or urgent care facilities. A minority, however, possesses private healthcare insurance with low ED co-payments.

SmartContact's multifaceted approach aligns with the overarching goal of improving healthcare quality and efficiency. By reducing ED visits and optimizing resource utilization, SmartContact enhances patient satisfaction and promotes effective teamwork among the interdisciplinary care team.

SmartContact benefits both patients and the healthcare system by addressing each of the five facets of Value-Based Care (VBC): quality, utilization, efficiency, satisfaction, and teamwork. Specifically:

- Quality: SmartContact contributes to improved quality of care by reducing ED visits and admissions, ultimately leading to enhanced health status. Post-encounter wellness checks are pivotal in identifying missed diagnoses early in disease progression, addressing aftercare gaps, and ensuring the availability of necessary resources.
- Utilization: The system effectively manages the utilization of ED resources and hospital beds, optimizing their allocation for improved patient care.
- Efficiency: SmartContact streamlines and enhances efficiency through automation, providing a stark contrast to the manual case manager (CM) workflow of identifying cases, reviewing medical records, assembling care teams, and communicating ED visits. This automation results in a more

streamlined and efficient process.

- Satisfaction: Patient and family satisfaction is notably elevated as they appreciate the close attention and improved health outcomes facilitated by SmartContact's proactive approach.
- Teamwork: A culture of collaboration and teamwork is fostered within the interdisciplinary care team, which collectively works to reduce ED visits and elevate patient health outcomes.

#### The 9-Step Process:

1. Program Introduction: A senior administrator launches the program and encourages broad participation among PCPs.
2. Data Analysis: Data is securely uploaded, allowing for the identification of frequent ED users and the automatic creation of preliminary care plans.
3. PCP Engagement: The system initiates communication with the designated PCP to confirm their participation and facilitates the finalization of care plans.
4. Care Team Formation: Care team members are identified by the PCP and CM team. Explicit consent is obtained when necessary, such as when a sponsor is included on the care team for a patient with an alcohol use disorder.
5. Patient Engagement: Patients are proactively contacted biweekly through automated SMS or email to assess their well-being and provide encouragement.
6. Issue Management: The care team is promptly alerted when a patient reports a medical or social issue or returns to the ED.
7. Real-Time Care Plan Review: On-duty ED staff can seamlessly review care plans in real time, allowing immediate interventions as needed.
8. Post-Visit Communication: The PCP, CM, and other care team members are informed of the ED visit the following day. They are encouraged to review the case, and feedback on the care plan is actively sought.
9. Progress Tracking: Ongoing monitoring and tracking of existing cases occur, enabling the calculation of Return on Investment (ROI) and identifying new cases as criteria are met.

Research published in 2014, authored by Murphy and Neven in the [Journal of Emergency Medicine](#), revealed substantial cost savings. Specifically, a \$1,000 savings per frequent ED user (1% of patients with 6+ visits/year) and a \$5,000 savings per excessive ED user (0.1% of patients with 12+ visits/year) is achievable when personalized care plans and coordinated behavior

management teams are implemented.

The initial [proof of concept](#) for SmartContact has been completed and published. Subsequently, SmartContact has integrated multiple layers of intelligent automation to streamline workflows for all stakeholders, ensuring continued effectiveness and efficiency. SmartContact saves up to \$15 per ED patient across all ED cases, with a nominal technology cost of \$0.50 per patient.

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