Mr. Michell and Mr. Wood  
February 21, 2005  
Page Two

were required to make the determination. This is also true for recipients under the age of 4 and over 65; Medicaid would not pay for additional services in the ED if an emergency does not exist, regardless of age. No conflict between state or federal law and the hospital(s) holding a Medicaid recipient responsible for payment of a non-covered service as long as it is consistent with applicable provisions is seen.

I am pleased to approve your proposal as presented; however, if any modifications are requested, you must contact the Agency again in advance for further review and approval.

Sincerely,

[Signature]

Alan Levin
Secretary

AL/pan
FOR IMMEDIATE RELEASE:  
February 22, 2005

Agency for Health Care Administration Announces Agreement with Ocala Hospitals to Improve Emergency Room Access

“Agreement to ease ER crowding, ensure access to emergency care”

TALLAHASSEE – The Agency for Health Care Administration (AHCA) today announced an agreement with Ocala area hospitals to ensure that all patients have access to the care they need in the city’s emergency rooms. The plan allows hospitals to determine whether patients who use emergency rooms are truly in need of critical treatment. Patients with emergencies will be treated, while non-emergency patients will be counseled and directed to other care facilities.

Memorey Regional Medical Center, Ocala Regional Medical Center and West Marion Community Hospital presented the proposal to AHCA to reduce the use of emergency rooms for non-emergencies.

“Emergency rooms have a very specific mission to save lives in critical situations where every second counts,” said AHCA Secretary Alan Levine. “That’s why we are ensuring patients with emergency conditions receive the care they need—when they need it. This plan allows Ocala emergency rooms to focus on providing life-saving medical care, while making sure non-critical patients get the counseling and care they need.”

The agreement provides a framework for Ocala-area hospitals to triage emergency room patients. All patients will receive a complete medical screening exam and will be assigned an acuity level based on a five-point scale, from critical and life threatening to non-emergency. Emergency patients will be treated immediately, while patients with no medical emergency will be notified, counseled of other options for treatment and referred to other facilities if appropriate. Patients under the age of 4 and over the age of 65 are exempt from the referral process.

Working to improve access to affordable, quality health care to all Floridians, the state Agency for Health Care Administration administers Florida’s $14 billion Medicaid program, licenses and regulates more than 32,000 health care facilities and 30 health maintenance organizations, and publishes health care data and statistics.

###
Dear Patient:

Thank you for choosing our facility today.

Our triage nurse will talk with you, check your vital signs such as temperature and blood pressure, and will sort you according to your need for care. Patients are sorted into categories from a level I, the sickest patients that need immediate help to survive, to a level five, a patient who has a minor illness or injury that does not need aid instantly.

Please be aware that less urgent patients may wait until all life-threatening patients who arrive after you may be seen before you.

All patients who come to our Emergency Department are entitled to a Medical Screening Exam by one of our Qualified Medical Professionals. If that person determines that you do not have an emergency medical condition upon completion of the medical screening exam, you will be given the following options:

1) Stay to have your treatment completed after satisfying your financial obligation with our Patient Financial Counselor.
2) Follow up with your family physician.
3) Follow up with one of the resources in our resource packet.

Our Medical Screening Examination program allows our hospital to focus their resources on the sickest patients and educate our patients on alternative community resources for medical care and treatment for non-emergency medical conditions.

We appreciate the opportunity to serve you, and we commit to treat you with dignity, respect and clinical excellence.

Thank you again for choosing us.
Community Health Services
is sponsored and funded
by
Munroe Regional Medical Center
Ocala Regional Medical Center
and
Marion County Board of County Commissioners

Community Health Services
Monday through Friday
8:30 a.m. - 5:00 p.m.
The office is located on the corner of S.W. 10th Street and 1st Avenue.

1025 S.W. 1st Avenue
Ocala, Florida 34474
Phone: 352-732-6599
Fax: 352-732-4816
Community Health Services

Marion County has a walk-in medical office available to people that are unable to pay due to their income.

Community Health Services provides care for minor illness and injuries. It does not provide for continuous, primary care.

Qualifications

Call or come in, even if you are unsure if you qualify.

You will need a Florida Driver’s License or a Florida Identification Card and your Social Security Card.

Your income must be at or below 125% of the Federal Poverty Guidelines in order to be seen after your first visit.

Nurse Practitioner

Community Health Services is staffed with Advanced Registered Nurse Practitioners.

Fees & Charges

Community Health Services has a minimum charge for services and medications.

Only cash payment will be accepted for Services and medications provided.

Services Provided

- Treatment for minor injuries and acute illness, only.
- Community Health Services does not provide services for the following conditions:
  - School physicals
  - Immunizations
  - Prenatal care
  - Work related injuries
  - Motor vehicle injuries
  - Sexually Transmitted Diseases

Please note that Community Health Services is not a substitute for regular health care.

Appointments

- No appointment necessary. This is a walk-in service.
- Recheck appointments may be scheduled for follow up visits.
MEDICAL CARE

If you have private insurance you are encouraged to check with your insurance company to determine who the preferred providers are for your plan. The phone number is on the back of your insurance card.

If you are on Medicaid you may call 732-1349 and the Medicaid office will give you a list of physicians that accept Medicaid. You may also follow up at Community Health Services and Marion County Health Department.

If you need medical care and have no insurance, the following resources are available:

**Community Health Services**
1025 SW 1st Avenue
Ocala, FL 34474
352-732-6599
8:30 am – 8:00 pm Monday-Friday
Walk-in clinic, no appointment necessary

**Marion County Health Department**
1801 SE 32nd Avenue
Ocala, FL 34471
352-629-0137
8:00 am – 5:00 pm Monday-Friday
 Chíes in Belleview, Dunnellon
Bring picture ID & Social Security card, call for an appointment before you go.

If you need assistance with prescriptions the following resources are available to you (there is no assistance available for narcotics):

**Marion County Health Department**
1801 SE 32nd Avenue
Ocala, FL 34471
352-629-0137
8:00 am – 5:00 pm Monday-Friday
Chíes in Belleview, Dunnellon
Bring picture ID & Social Security card, call for appointment before you go.

**Community Health Services**
1025 SW 1st Avenue
Ocala, FL 34474
352-732-6599
8:30 am – 8:00 pm Monday-Friday
Walk-in clinic, no appointment necessary.

**Interfaith Emergency Services**
435 NW 2nd Street
Ocala, FL 34475
352-629-8868
9:00 am – 4:00 pm Monday-Friday
(closed 12 noon – 1:00 pm for lunch)
Voucher for medication based on need and fund availability.

**Brothers Keeper**
5 SE 17th Street (Blessed Trinity)
Ocala, FL 34474
352-622-8037
9:00 am – 3:00 pm Monday-Friday
(closed 12 noon – 1:00 pm for lunch)
Voucher for medications available based on need and fund availability.

Note:
Contact your local pharmacist for information on any drug manufacturer assistance programs.

FINANCIAL ASSISTANCE

**CRS Medical Benefits, Inc.**
1431 SW 1st Avenue
Ocala, FL 34474
352-401-1525 / 352-694-7638

**Department of Children and Families**
3001 W. Silver Springs Blvd.
Ocala, FL 34473
352-626-3000

EMERGENCY SHELTER

**Interfaith Emergency Services**
435 NE 2nd Street
Ocala, FL 34475
352-629-8868
Shelter open 24 hours
Priority given to women and families

**Salvation Army Shelter**
320 NW 1st Avenue
Ocala, FL 34475
352-732-8326
Shelter open 24 hours, check in at 6:00 pm
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<td>Issues/Comments</td>
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<tr>
<td>Number of patients referred after MSE</td>
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<tr>
<td>Number of ED Divert hours</td>
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<td>Patients referred to CHS</td>
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<tr>
<td>Patient compliance with referral within 36 hours</td>
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<tr>
<td>Number of return visits to ED within 24 hours (same complaint)</td>
<td>1%</td>
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<tr>
<td>Number of non-emergent ED visits by Medicaid/Self pay patients</td>
<td>Trend Analysis</td>
</tr>
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</table>
IMPORTANT
MEDICAL NOTICE

Emergency Department
Policies & Procedures in Marion County
Effective: February 15, 2005

In accordance with the Federal Emergency Medical and Active Labor Act (EMTALA), Munroe Regional Medical Center, Munroe Regional's Emergency Center at TimberRidge, Ocala Regional Medical Center, and West Marion Community Hospital require that all patients who present to these Emergency Departments will receive a Medical Screening Exam (MSE). Qualified personnel will perform the Medical Screening Exam - Physician, Physician's Assistant (PA), or Advanced Registered Nurse Practitioner (ARNP).

- All patients that have received a completed medical screening exam will be classified in accordance to the severity of their illness.
- Patients who are classified as having an emergency will receive emergency treatment.
- Patients with non-emergency medical conditions may consult with financial counselors on non-emergency treatment options.
- Please note that, all patients under the age of five and over the age of 64 will be exempt from this referral process. The Palmer-Klein Children's Express at Munroe Regional will remain open to treat all children.

REFERRAL:
Patients referred will be given a list of community resources they can access for their healthcare needs.

PATIENTS WHO SELECT NOT TO BE REFERRED:

- Personnel will complete the registration process and collect any insurance deductible, or charges for service. Registration will ask the patient to be seated in the lobby or appropriate designated area and the patient will be treated after the emergency patients have been treated.

- This policy is in compliance with federal and state regulations governing emergency care.
APPENDIX D: Related Articles

“Rising Pressure: Hospital Emergency Departments as Barometers of the Health Care System.” Ann S. O’Malley, Anneliese M. Gerland, Hoangmai H. Pham and Robert A. Berenson, Issue Brief, Center for Studying Health System Change, November 2005

“Rising Fees for On-Call Specialists Have Hospitals Seeing Red.” Laura Cutland, Silicon Valley/San Jose Business Journal – October 24, 2005

“Specialists Shy Away from ER Calls.” Urvakash Karkaria, The Florida Times Union – October 23, 2005

“ERs Tell People In Crisis to Take a Seat and Wait.” Author Unknown, Tampa Bay Online – October 23, 2005

“St. Mary’s Trauma Hand Surgeons Threaten to Quit.” Stephanie Horvath, Palm Beach Post – August 26, 2005

“ER Crisis Prompts Joint Effort.” Stephanie Horvath, Palm Beach Post – July 23, 2005

“Panel Hopes to Raise Specialists’ Numbers.” Shana Gruskin, South Florida Sun-Sentinel – July 22, 2005

“ER Docs: No Pay, No Care?.” Susan Lundine, Orlando Business Journal – July 11, 2005

“On-Call Pay System Luring Specialists Back to Boca Hospital’s ER.” Stephanie Horvath, Palm Beach Post – June 6, 2005

“Group Tackling Challenges of ER Specialist Shortage.” Stephanie Horvath, Palm Beach Post – June 6, 2005

“Clinics to Take Manatee Hospital ER Overflow.” Donna Wright, Bradenton Herald – February 23, 2005

“Crowded LRMC Has to Divert Patients.” Robin Williams Adams, The Lakeland Ledger – February 23, 2005

“Proposal Aims to Head Off Avoidable 911 Calls.” James Miller, Daytona Beach News-Journal – May 31, 2005

“Many Patients Can Avoid ER Visits.” Teresa Burney, St. Petersburg Times – March 4, 2002


“Rescuers Struggle with ER Diversions.” Bob LaMendola, South Florida Sun-Sentinel – February 10, 2002


“Influx of Patients Puts Strain on Hospital ERs.” Stacey Singer, *South Florida Sun-Sentinel* – November 24, 2001


“Ambulances Idling at ERs.” Jon Steinman, *The Orlando Sentinel* – October 7, 2001


“Hospitals Hope Expansions Ease Aches of Crowded ERs.” Stephanie Erickson, *Orlando Sentinel* - May 23, 2001

APPENDIX E: Request for Innovative Strategies

FHA ED Task Force
Call for “Innovative Strategies” for EMERGENCY CARE SERVICES

Florida’s emergency care system is under significant pressure, facing increased patient volumes, capacity constraints, inappropriate use of the emergency care system, growing numbers of uninsured that use the emergency care system as a safety net, shortages of physicians willing to take emergency department call and challenges from regulatory uncertainties.

The FHA Task Force on Addressing the Crisis in Emergency Care has spent the past couple of months discussing and developing strategies is looking for innovative strategies in the following areas:

- EMS patient hand-off in the emergency department
- Emergency department throughput from registration to discharge to home or an inpatient bed
- ED overcapacity crisis plans
- Managing the inpatient stay to ensure that critical care areas have capacity to serve ED patients
- Programs to facilitate timely discharge of patients
- Programs that minimize the use of the emergency department for non-emergent care
- Other programs that reduce ED overcrowding, inappropriate use and/or facilitate providing emergency care to Floridians

We are looking to include examples of “innovative strategies” in our final report, due out in December. If you have implemented a program or programs that have improved your ability to provide timely emergency care, please provide:

- A description of the program
- When it was implemented
- Results (i.e. streamlined EMS-hospital hand-off, reduced patient wait times, eliminated boarders in the ED, etc.)

Please submit your “best practices” by November 10, 2005 to:

Kim Streit
VP/Healthcare Research and Information
Florida Hospital Association
Email: kims@fha.org
Fax: 407-422-5948
Phone: 407-841-6230