

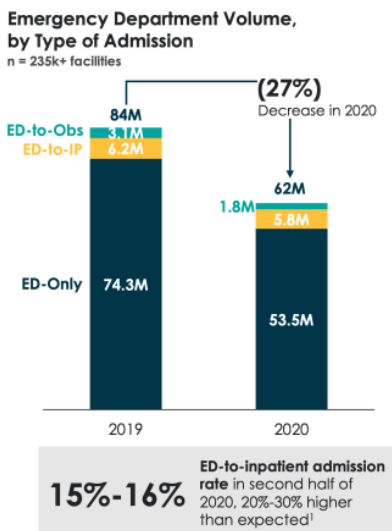
## ED volume remains persistently down, but at higher acuity

As we shared [recently](#), post-pandemic healthcare volume is not returning evenly. While outpatient volume is rebounding quickly, other settings remain sluggish, especially the emergency department. We partnered with healthcare data analytics company [Stratason](#) to take a closer look at ED volume decline. As shown in the graphic below, **nationally, ED visits were down 27 percent in 2020, compared to 2019**. ED-only volume (cases that started and ended in the ED) took a large hit across last year, down nearly a third from 2019. We expect that **a portion of this ED-only volume will never fully recover to pre-COVID levels**, with patient demand permanently shifting to lower-acuity care settings, including virtual, and some patients avoiding care altogether for minor ailments as they learn to “live with” problems like back pain.

**ED-to-observation volume saw the greatest decline in 2020**, likely as a result both of patients avoiding the ED, and presenting in the ED sicker, meeting the criteria for inpatient admission. However, **ED-to-inpatient volume, which fell only seven percent in 2020**, has been returning. In the second half of 2020, the ED-to-inpatient admission rate was 20 to 30 percent higher than the pre-COVID baseline. Across all three categories of ED volume, pediatrics saw steeper declines compared to adult cases. While some further ED volume rebound is anticipated, health systems should expect that **fewer, but sicker, patients will be the new normal for hospital emergency departments**. Fewer low-acuity patients utilizing high-cost emergency care is good news from a public health perspective, but health systems must bolster other access channels like urgent care and telemedicine to ensure patients have convenient access for emergent care needs.

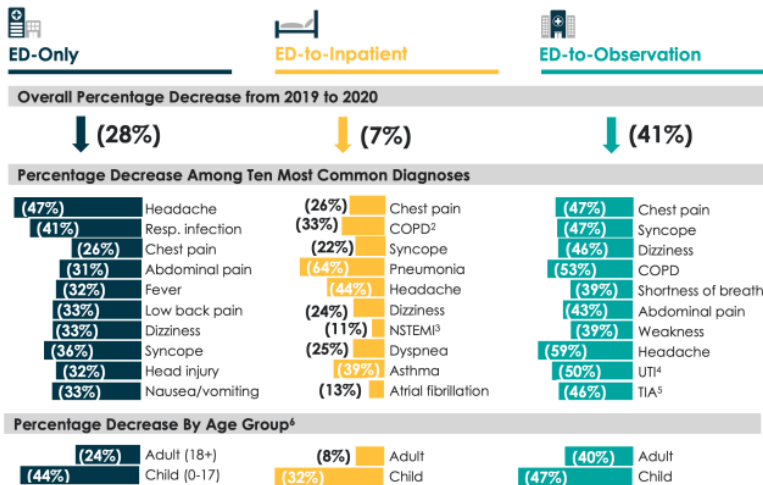
### Examining COVID's Impact on Emergency Department Volume

Some Lower-Acuity Cases Disappear from ED; Minimal Impact on ED-to-Inpatient Admissions



### Impact of Pandemic on Categories of ED Volume

n = 235k+ facilities



1. Using pre-COVID baseline.  
2. Chronic obstructive pulmonary disease.  
3. Non-ST elevation myocardial infarction.  
4. Urinary tract infection.  
5. Transient ischemic attack.  
6. Excluding encounters with unknown age.

Source: Stratason's proprietary 837 claims database. Stratason, 2020 data; Noel, MD, Andrea, et al. "Fewer Visits, Sicker Patients: The Changing Character of Emergency Department Visits During the COVID-19 Pandemic." Ehm.org, Epic Health Research Center, 3 Feb. 2021; Gist Healthcare analysis.