

# Urgent to Emergent Care Spectrum in New York State (CURRENT STATUS)

DRAFT

		Non-Emergent Care			Urgent/ Non-Life Threatening			Emergency 
		Limited Service Clinic [Retail Clinic]	Primary Care Physician Practice	Urgent Care	Upgraded D & TC	Free-Standing Emergency Depart.	Hospital-Based Emergency Depart.	
Scope of Practice	<b>Condition Description</b>	Low Acuity, Non Life-Threatening, Episodic, Preventive	Low Acuity, Non Life-Threatening, Episodic, Chronic, Preventive	Low Acuity, Non Life-Threatening, Episodic, Urgent	Low Acuity, Non Life-Threatening, Episodic, Chronic, Preventive, Urgent and Limited Emergency care	Acute, Urgent, Severe, Life-Threatening	Severe, Acute, Life-Threatening	
	<b>Outpatient Services</b>	Diagnosis and treatment of minor medical conditions, primary care health screenings and immunizations. Require only a focused history and physical examination that does not require venipuncture or the dispensing of controlled substances.	Diagnosis and treatment of medical conditions, routine preventive screenings and immunizations, management of chronic diseases.	Diagnosis and treatment of medical conditions on an urgent/immediate basis.  Scope of services varies – may have on-site imaging and lab services.	Primary care and limited emergency care diagnosis and treatment; resuscitation, stabilization and transport of patients who require services not offered at the UD&TC; limited extended observation.	Severe, acute condition stabilization, diagnosis and treatment. Possible exceptions are major procedural interventions (e.g. cardiac catheterization).	Emergency and Urgent/ immediate care; wide range of diagnostic and treatment services; can include invasive and major procedural interventions.	
	<b>Observation beds</b>	NO	NO	Sometimes	Sometimes	Sometimes	Sometimes	
	<b>Advanced Imaging</b>	NO	Sometimes	Sometimes	Sometimes	Usually	Usually	
	<b>In-house Lab Services</b>	NO (except CLIA waived tests)	NO (except CLIA waived tests)	Sometimes	Sometimes	YES	YES	
	<b>Ambulatory Surgery</b>	NO	NO	NO	Sometimes	Sometimes	YES – in hospital	
Facility & Staffing	<b>Staff Model</b>	1-2 HCP (either Physicians or Nurse Practitioners).	1 to multiple physicians and non-physician healthcare practitioners (HCP) e.g. NP, PA, RNs, etc.	Varies. Physicians and non-physician HCP (NP, PA, RNs, etc.), some models employ mostly NPs and PAs; may have someone board certified in emergency medicine.	Varies. At least one physician and an NP, PA, or RN, who are certified or trained in ACLS and ATLS and/or PALS.	Physicians and non-physician HCPs; board certified in emergency medicine; someone board certified in emergency medicine must be present at all times.	Physicians and non-physician HCPs.	
	<b>Facility Size</b>	1-2 exam rooms	1 to several exam rooms	Varies	Varies	Several exam rooms/bays	Several exam rooms/bays	
	<b>Hours of Operation</b>	Business hours and extended hours evenings and weekends.	Business hours; sometimes evenings and weekends	Varies; typically includes evening and weekend hours; sometimes 24/7.	Provide on-site or make available limited emergency services 24/7.	Varies; typically includes evening and weekend hours; sometimes 24/7.	24/7	

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Organization	Physician/NP practice or Corporate Operator	Either	Either	Either	Corporate Operator	Corporate Operator	Corporate Operator
	Publicly-Traded, Private Equity-Owned	NO*	NO	NO	NO	NO	NO
Consumer Expectations	Unscheduled walk-in care	YES	Sometimes; Scheduled appointments preferred; Same day sick visits	YES	YES	YES	YES
	Expectation of Patient-Healthcare Practitioner Relationship	NO	YES	NO	YES	NO	NO
	EMTALA	NO	NO	NO*	No. But may not deny treatment based on inability to pay.	YES	YES
Payment	Accept Medicaid?	Unknown	Unknown	Unknown	Yes	Yes	Yes
	Facility Fee?	No	No	Depends	Yes	Yes	Yes
Miscellaneous	NYS Statutory Authority	No	No	No, unless D&TC	Public Health Law 2956; CON; Emergency Regs	CON; Emergency Regs	Article 28; CON; Emergency Regs
	# of Existing Providers in NYS (as of 9/2013)	17 (physician practices in retail settings)	Unknown	Unknown	None	At least 4 EDs outside of a traditional hospital setting.	214
	Additional Notes:	<p><i>Proposed 2013-2014 Article VII language permitting this model was not passed.</i></p> <p><i>NOTE: In-Store Health Service Kiosks are not included in this category.</i></p>	<p><i>Some physician practices provide Office-Based Surgery (OBS) that is subject to accreditation.</i></p>	<p><i>If hospital affiliated, then may be subject to EMTALA.</i></p>	<p><i>Rural areas only; no upgraded D&amp;TC currently exist.</i></p>	<p><i>Definition of free-standing emergency department varies state to state. New York currently recognizes the "Provider –Based Off-Campus ED" CMS classification for emergency services provided away from the main campus of a hospital.</i></p>	