Emergency medicine—claims statistics and analysis

Factors that drive frequency of claims¹

1. The percentage of the providers bills that are for minor* diagnoses

2. The number of patients that have received a dispensed prescription from the provider

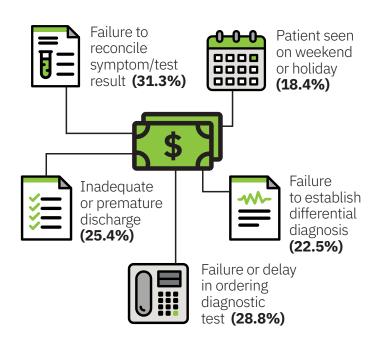
3. The number of different hospitals associated with the provider

4. The percentage of patients discharged home from the ED that subsequently follow-up with an office visit in 7 days

5. The percentage of the provider's prescribed drugs billed and dispensed at the facility that are for steroids

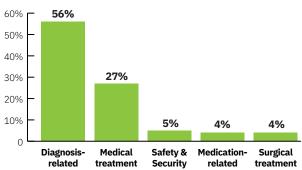
*e.g. aspiration pneumonitis, nutritional deficiencies, personality and/or developmental disorders

6. The percentage of the provider's bills that include bacterial infections

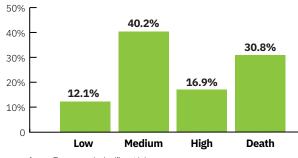




Top allegations³



Clinical severity³



Low = Temporary insignificant injury Medium = Temporary major or permanent minor injury High = Permanent major or permanent grave injury Death = Adult or infant/fetal death



Explore the MIEC Knowledge Library, which contains valuable patient safety and risk management content. **Data Driven Risk Management:** MIEC partners with independent sources to supply detailed data that allows for analysis and insight. This information is intended to help MIEC members evaluate their practices and procedures. **Notes: 1.** Preverity analysis, 2016-2021 claims data. **2.** MPLA DSP, cases closed 2015-2019 with claimant type emergency department. **3.** Candello coding data, 2016-2021.

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