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Poor Community Health is Associated with Increased Use of Emergency Departments among Employees

Key Findings

- Poor community health was associated with high use of emergency department services but not increased hospitalizations or paid claims.
- Findings suggest a need for greater access to primary care.
- Business leaders expressed interest in further understanding the health needs of communities where their employees live.

The Question:

Do employees from less-healthy communities use more care and cost more?

Employers understand the effect of poor individual health on their economic performance, including rising health care costs and lost productivity. Yet, minimal research has examined the effect of poor community health on business performance. Where people live affects their health and mortality, which underscores the need for public and private sector investment in the health of communities.

Neil Goldfarb, president and CEO of the Greater Philadelphia Business Coalition of Health, and colleagues from the Thomas Jefferson University, the Public Health Management Corporation, the Philadelphia Department of Public Health, Gallagher, and the CFO Alliance, sought to address this gap in the literature by examining whether employed adults and their adult dependents living in less-healthy communities in the greater Philadelphia region used more care and incurred higher costs to employers than employees from healthier communities. They used a multi-employer database to identify employees and their dependents and mapped them to 31 zip code regions. They calculated community health scores at the regional level, using metrics similar to the Robert Wood Johnson Foundation County Health Rankings. The researchers used descriptive analyses and multilevel linear modeling to explore relationships between community health and three outcomes of interest: emergency department use, hospital use, and paid claims. Business leaders reviewed findings and offered insights on preparedness to invest in community health improvement. Full findings are available in [Preventing Chronic Disease](#).

The Implications:

The health of communities affects employees' use of emergency departments, which suggests a need for greater education about and access to primary care.

Goldfarb and colleagues found that employees living in areas with poorer community health had higher emergency department utilization, but not hospitalizations or paid medical claims. Other analyses suggest that intervening variables such as racial composition of a community may help to explain the relationship between poor community health and increased emergency department use. Study findings may help to focus future efforts on reducing emergency department use by employees and dependents in less-healthy communities, including efforts to reduce barriers to primary care. Employers could invest in worksite or community-based primary care clinics, expand coverage for retail clinics and urgent care centers, and offer telemedicine services as a part of these efforts. Employers should work with researchers to develop and provide employee education about the importance of primary care and the appropriate use of the emergency department. Future research should further explore the mechanisms behind these relationships and develop and test strategies for business investment in building healthier communities.



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Contact Us

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