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City project cuts ambulance costs

Pilot effort helps find services for most frequent 911 callers

By Justin Fenton

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One woman was using the wrong type of insulin, causing the 65-year-old to faint one to three times a week. A 47-year-old homeless man drank a liter of vodka a day, and concerned citizens frequently called 911 after seeing him unconscious on the street. And another woman, 88, was just lonely and liked when the emergency responders showed up at her home.

They are among a group identified as some of Baltimore's most frequent ambulance callers, 10 men and women representing more than 500 emergency responses in a year. But their calls to 911 dropped drastically after being enrolled in a 12-week pilot program initiated by the city's health and fire departments that connected them to health care and other city services.

Administered by Baltimore Healthcare Access, a quasi-public group affiliated with the city health department, "Operation Care" linked the city's repeat callers with case managers who assessed their medical needs and got them help. The focused attention cut most of the patients' calls to 911 by 80 percent or more, and the city saved nearly \$30,000 in ambulance costs, according to a report.

"Frequent calls to 911 were cries for help for people who did not know where to turn for assistance," said Kathleen Westcoat, president of Baltimore HealthCare Access. "We've been able to connect people to meaningful resources, which will greatly improve their health and well-being."

City officials say they hope to expand the program and will continue to monitor the original group of frequent callers.

"I think that this shows a path for both improving people's health and reducing costs," said Health Commissioner Dr. Joshua M. Sharfstein. "The challenge is figuring out how to tap into the savings to fund the program."

The Baltimore Fire Department responded to more than 150,000 calls during the 2007 fiscal year, many of which did not warrant emergency medical care, said spokesman Kevin Cartwright. Using data from the department's billing service, officials compiled a list of the top callers. One person alone had called more than 130 times.

The targeted patients were generally poor and suffered from psychological problems. But to the surprise of officials, all but one had health insurance - they just didn't know how to navigate the system.



"A lot of our clients didn't know we have all those programs in the city. But they're on the right track right now," said Rissely Toledo, a case manager who worked with the patients.

Beginning in May, Toledo visited each patient's home and assessed their needs. All of them had at least two or more chronic diseases or illnesses, including diabetes and heart disease, and the case manager worked to develop a plan of care for each of them. They were linked to resources that ranged from eye care and adult day care to food stamps, energy assistance and drug treatment.

"By providing good case management, I think, we're not only reducing the number of calls, ER visits and hospitalization, but helping people regain control over their lives," Toledo said.

An 88-year-old woman repeatedly called 911 because of a heart condition. But she told case managers that all she really wanted was for "someone to take me for walks," acknowledging that most of her calls were not necessary and that she was lonely because most of her friends had passed away.

Operation Care helped coordinate visits with a primary care physician to address her peptic ulcer disease and hypertension. In addition, she was referred to a service that provides daily visits to assist with her laundry, bathing, cooking and exercise.

Not all were successes. One of the men targeted in the program was a 47-year-old homeless man who drank at least one liter of vodka a day and suffered from seizures and bipolar disorder. He had made suicide attempts, partially paralyzing his right leg after jumping from a bridge. He was connected to five alcohol and drug treatment programs through Operation Care but often left after a few days or became so disruptive that he was asked to leave.

Toledo said the man assaulted an emergency medical technician and in July was sentenced to nine months in prison. She intends to continue monitoring the man, as well as the rest of the group, for at least the next six months.

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