

A healthcare model providing care at a high cost and rate of emergency department utilization, no matter the level of quality,

# is not sustainable



7-country comparison of acute unscheduled care



## ED utilization<sup>1</sup>

Used the Emergency Department in past two years



Healthcare spend per capita<sup>2</sup>

**U.S. \$8,745**

**Australia \$3,997**

**U.K. \$3,289**



Same or next day general practitioner appointments<sup>3</sup>

**Germany 76%**

**U.S. 48%**

**Canada 41%**



**U.S. and Canada have low rates of active physicians** at 2.56 and 2.46 respectively per 1k population<sup>2</sup>



**U.S. is a top performer** in lower 30-day mortality following ischemic stroke (4.3%) and acute myocardial infarction (5.5%)<sup>2</sup>



**Countries that have robust primary care systems have lower ED use**, such as Germany and Australia<sup>2</sup>



<sup>1</sup> Commonwealth Fund (2016), <http://www.commonwealthfund.org/>

<sup>2</sup> OECD (2016, 2013, OECD Stat database), <http://data.oecd.org/>