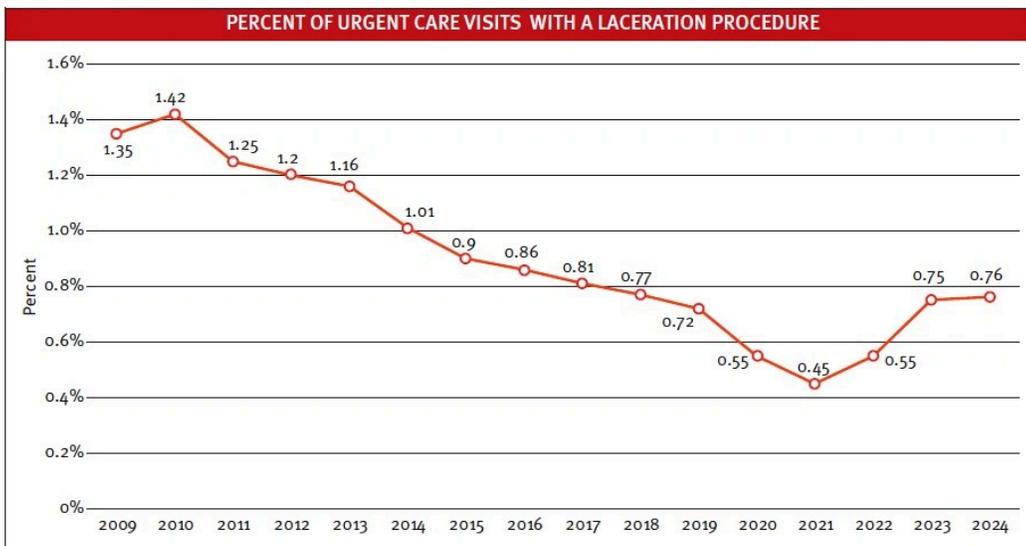


LACERATION REPAIRS DECLINE IN URGENT CARE

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The percentage of urgent care visits involving a laceration procedure increased slightly from 0.75% in 2023 to 0.76% year-to-date in 2024, which is on-par with 2018 levels, according to Experity EMR analysis of more than 93.8 million urgent care visits, as of October 6, 2024.

Over the past 15 years, the percentage of patients presenting with a laceration has gradually declined, attributed to a number of factors—chief among them being “case rate” reimbursement. Case rate models pay a contracted, flat rate per visit, regardless of services performed, thus financially disincentivizing procedures that involve extra time and supplies, such as laceration repair.

Additionally, the urgent care workforce shifted from approximately 30% of urgent care visits attended to by a nurse practitioner or physician assistant in 2009 to more than 85% today, making it less likely that the average urgent care clinic would have the clinical experience necessary to offer laceration repair.

Laceration procedures bottomed out during the pandemic from 2020 to 2022 when many resources were allocated to diagnosis and treatment of upper respiratory conditions, but

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they have now returned to 2018 levels. In the big picture, the difference between the high point in 2010 and the low point 2021 reflects a 68.3% decrease.

When an urgent care refers laceration repairs to an emergency department, it not only forgoes additional revenue from visits and charges, but it diminishes its own value proposition of cost savings through emergency department avoidance.

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