



## **Closing of Cook Medical Center ER Frequently Asked Questions**

### **Why does the ER have to close?**

Ongoing reductions in reimbursements across the nation have created a risk of closure for 1 in 3 rural hospitals nationwide.<sup>1</sup> This challenging environment creates a unique challenge of providing a higher quality of medical care at a lower cost to ensure longevity. Approximately 22.7% of Cook County's population are uninsured, which led Cook County residents to seek minor medical care in the most expensive care setting--the emergency room. Approximately 5% of those patients who sought care at Cook Medical Center's Emergency Room were admitted to the hospital for a serious, emergent medical condition.

Cook Medical Center has lost approximately \$2.6 million annually since 2012 with the Emergency Room contributing to that annual deficit at a rate of \$6 million annually. By consolidating the emergency services, TRHS will be better positioned to invest in healthcare services for Cook County, which could include additional outpatient primary care services with access to prenatal care and education, as well as the addition of specialists to drive improved health outcomes with a focus on cardiovascular disease, teenage pregnancy rates, obesity rates and diabetes management.

By extending the hours at Cook Family Wellness Center in Adel for minor medical issues, TRHS will be able to provide a more appropriate level of care in the most appropriate setting to drive the mission of creating a healthier population.

### **If the majority of your ER patients were uninsured and cannot afford healthcare, how will you treat patients who do not have the ability to pay at the new clinic?**

Cook Family Wellness Center will treat all patients that present to the clinic, regardless of their ability to pay. Indigent care services will be extended to the clinic. The amount the patient is required to pay is determined by the annual income levels of the Federal Poverty Guidelines. If the patient cannot pay the minimum amount requested at the time of service, the patient will be treated and payment arrangements will be made at that time.

### **Will current ER employees lose their jobs?**

Our intent is to retain every employee; however, we recognize employees must make the best decision for their personal situations. Our primary goal is to find a comparable position within the Tift Regional Health System.

Employees who currently staff Cook Medical Center's Emergency Room will have the first opportunity to apply for the expanded Cook Family Wellness Center positions. All impacted employees will receive a one-pager on how to apply for available positions. For positions that have limited vacancies we will apply a seniority rank to determine those individuals, however, there are additional roles at Cook Medical Center and TRMC for all employees. If you are interested in any role at the Cook Family Wellness Center, please contact Human Resources at 229-353-4200 for assistance.

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<sup>1</sup> "2016 Rural Relevance: Vulnerability to Value Study", iVantage Analytics, February 2016.

### **What is the timeline for closing the ER and what is the alternative?**

Cook Medical Center's emergency services in Adel will be consolidating with Tift Regional Medical Center's emergency room (ER) in Tifton. Cook County residents with emergency medical conditions are encouraged to call 9-1-1 and will be sent to Tift Regional Medical Center in Tifton. The last day of operations for Cook Medical Center ER will be on February 28, 2017 and it will close at midnight on March 1, 2017. On that same day, Cook Family Wellness Center will begin offering extended hours to patients with minor injuries and illnesses.

The extended hours for Cook Family Wellness Center will be Monday through Friday from 8:30 am – 10:00 pm, Saturday, and Sunday from 10:00 am – 10:00 pm. Cook Family Wellness Center will offer treatment for adults and children over the age of six months for minor conditions. Patients evaluated with an emergent medical issue will be transported to the nearest Emergency Room for emergency care. Some examples of conditions that require emergency medical care at a hospital emergency room include:

- Severe chest pain, difficulty breathing or “turning blue/gray”
- Compound fracture (bone protrudes through skin)
- Convulsions, seizures or loss of consciousness
- Severe head injury
- Fever in newborn (less than 6 months old)
- Heavy, uncontrollable bleeding
- Deep knife wounds or gunshot wounds
- Moderate to severe burns
- Poisoning
- Serious head, neck or back injury
- Pregnancy-related problems
- Severe abdominal pain
- (Signs of) Heart attack (i.e.. chest pain lasting longer than two minutes)
- (Signs of)Stroke (e.g. loss of vision, sudden numbness, weakness, slurred speech, or confusion)
- Suicidal or homicidal feelings

### **Is Cook Medical Center the only hospital to close its ER?**

Unfortunately, no. One in three rural hospitals nationwide are at risk for closure<sup>2</sup>. In fact, six rural hospitals in Georgia alone have closed since 2013. Additional hospitals that have closed their ERs are Emory Orthopedic & Spine, Emory Smyrna Hospital, Trace Regional Hospital, Baton Rouge General Mid-City and Flint River Hospital.

Baton Rouge General Mid City (Baton Rouge, LA), a 325-licensed-bed hospital was losing \$2M per month. Hospital leaders cited a deteriorating payer mix and declining reimbursements from government payers as the reasons for the poor financial performance. Hospital officials determined to close their Emergency Room and focus on providing the appropriate care in the appropriate setting. While the transition was difficult in the early stages, the long-term results made the hospital viable and erased the operating monthly deficit. According to AHA from 1994 through 2014, inpatient days dropped 27,000 days and outpatient visits increased by 311,000 visits. Baton Rouge General Mid City focused on transforming the community's perception of healthcare services through clinical integration and treating patients in the appropriate setting, thus reducing

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<sup>2</sup> “2016 Rural Relevance: Vulnerability to Value Study”, iVantage Analytics, February 2016.

costs to their health system. As technology improves, health systems must focus on initiatives and care outside the four walls of the hospital, thus improving access to non-acute care services and improving the health of the population.

Shifting from emergency care to an after-hours clinic for minor medical issues is a pre-emptive measure to sustain other important services and keep Cook Medical Center viable for the future. By doing so, TRHS will be able to provide a more appropriate level of care in the most appropriate setting to further drive the mission of creating a healthier population.

#### **What to do if there is an emergency medical situation?**

Call 9-1-1. Cook County's ambulance services (Community Ambulance) will transport patients with emergency medical conditions to the nearest emergency room.

#### **Who will staff the walk-in clinic? If I am a current employee, how do I apply for a job there?**

Cook Family Wellness Center will be designated as a rural health clinic, which means it will accept walk-ins, but appointments will be strongly encouraged. Dr. John Maylock and other providers will staff the clinic. The phone number for Cook Family Wellness Center is 229-896-3424. All interested employees who may want to apply for a position at the clinic are encouraged to speak directly with a Human Resources representative (229-353-4200) who can assist in providing options for each employee.

#### **What happens when a patient comes to the walk-in clinic with an emergency?**

Patients with emergency medical conditions should call 9-1-1. Patients who are identified as having an emergency medical condition at Cook Family Wellness Center will be transported to the nearest Emergency Room. In general, an emergency medical condition is one that can permanently impair or endanger the life of an individual. Some examples of conditions that require emergency medical care at a hospital emergency room include:

- Severe chest pain, difficulty breathing or “turning blue/gray”
- Compound fracture (bone protrudes through skin)
- Convulsions, seizures or loss of consciousness
- Severe head injury
- Fever in newborn (less than 6 months old)
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#### **How will emergencies be managed among hospital patients or nursing home residents?**

Hospital patients or nursing home residents assessed with an emergency medical condition at Cook Medical Center will be transported to the nearest Emergency Room. Community Ambulance, a local ambulance provider, is currently equipped with 12-lead EKG machines as well as a telemedicine component, which will allow for a real time evaluation during the transport

to the nearest Emergency Room. Telemedicine connections are also available in the facilities of Cook Medical Center, The Sylvia Barr Center, and at Cook Senior Living Center to allow for real time consultations if necessary.

#### **How will Sylvia Barr patients receive medical clearance without an ER?**

We are exploring several options for medical clearance for the Sylvia Barr Center, which will be most beneficial for the patient and effective for the staff. Prior to the ER closure, there will be a process in place to ensure easy access to care at The Sylvia Barr Center. A direct admission process is in consideration, where referrals will be directly admitted and medically cleared inside the hospital. Nursing leadership is currently researching the best practices of freestanding psych facilities and will implement the less obtrusive process to benefit patients.

#### **How will this affect economic development?**

As previously stated above, ongoing reductions in reimbursements across the nation have created a risk of closure for 1 in 3 rural hospitals nationwide.<sup>3</sup> This challenging environment creates a unique challenge of providing a higher quality of medical care at a lower cost to ensure longevity.

Cook Medical Center has lost approximately \$2.6 million annually since 2012 with the Emergency Room contributing to that annual deficit at a rate of \$6 million annually. By consolidating emergency services, TRHS will be better positioned to invest in healthcare services for Cook County, which could include additional outpatient primary care services with access to prenatal care and education, as well as the addition of specialists to drive improved health outcomes with a focus on cardiovascular disease, teenage pregnancy rates, obesity rates and diabetes management.

By extending the hours of the Cook Family Wellness Clinic, which can treat minor medical issues, TRHS will be able to provide a more appropriate level of care in the most appropriate setting to further drive the mission of creating a healthier population. To better position healthcare services to the needs of the community, TRHS is re-investing in the appropriate service lines to meet those needs. This will ensure that Cook County maintains a strong healthcare presence to continue to attract and retain businesses and industries in the future.

**For general media inquiries, please call 229-896-8000.**

**For more information about available positions, please contact Human Resources at 229-353-4200.**

**For the Cook Family Wellness Center, please call 229-896-3424.**

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<sup>3</sup> "2016 Rural Relevance: Vulnerability to Value Study", iVantage Analytics, February 2016.