Critical Need for Emergency Department Innovations to Improve Care for Seniors

The proportion of the U.S. population over 65 years of age is significantly increasing.

In 2015, 46 million seniors made up 15% of the U.S. population. That number is expected to double to more than 98 million, representing nearly 24% of the population by 2060. As the population ages, the proportion of older adults requiring healthcare services is significantly increasing.

Seniors account for a disproportionate number of Emergency Department (ED) visits in the U.S.

More seniors are turning to the ED to address their healthcare needs. In 2009-2010, 19.6 million ED visits were made by patients aged 65 and over (15% of all ED visits). The rate at which seniors utilize the ED will continue to increase for years to come.

Once in the ED, seniors are more likely to be admitted to the hospital than any other age group.

In 2013, 14% of all ED visits in the U.S. resulted in hospitalization, but the rate for seniors was 36%. Seniors made up 46% of all ED visits resulting in hospitalization. Among those over 65 years old, the percent of hospitalizations originating in the ED increases with age.

Millions of hospitalizations are potentially preventable.

In 2008, one out of every 10 hospital admissions was potentially avoidable; the majority (60%) of those were for patients 65 years or older.

The growing number of seniors with increased medical needs will place a non-sustainable cost burden on the current U.S. healthcare system.

Healthcare spending is projected to increase from 17.4% of the U.S. gross domestic product in 2013 to 19.6% in 2024.

Innovative approaches to providing acute care to seniors are needed.

Stresses on the U.S. healthcare system include high costs, inefficient and inequitable care and inconsistent application of evidence-based practices. One of the most vulnerable patient groups, older adults, may be significantly affected by the pressures challenging our healthcare system, especially when they are in need of emergency treatment.