

Data table for Figure 22. Triage of emergency department visits, by age and primary payer: United States, average annual, 2009–2010

Excel and PowerPoint: <http://www.cdc.gov/nchs/hus/contents2012.htm#fig22>

Age and primary payer ¹	Triage category ²			
	Emergent	Urgent	Semiurgent	Nonurgent
Percent of visits				
Under 18 years	8.5	35.0	46.1	10.4
Medicaid	6.9	33.1	49.0	10.9
Private	10.1	37.4	43.8	8.7
Other and self-pay (excluding Medicare)	8.9	36.2	44.2	10.6
18–64 years	11.9	45.8	34.7	7.6
Medicaid	11.7	45.8	34.0	8.5
Private	11.6	47.7	34.6	6.1
Medicare	14.3	50.1	29.2	6.3
Other and self-pay (excluding Medicare)	11.2	42.6	37.5	8.6
Standard error				
Under 18 years	0.9	1.0	1.3	0.6
Medicaid	0.7	1.4	1.7	0.8
Private	1.7	1.3	1.4	0.8
Other and self-pay (excluding Medicare)	1.7	1.8	2.1	1.4
18–64 years	0.6	0.8	0.8	0.5
Medicaid	0.8	1.0	1.1	0.7
Private	0.6	1.0	0.9	0.6
Medicare	0.9	1.3	1.2	0.6
Other and self-pay (excluding Medicare)	0.8	1.0	1.0	0.7

¹Primary expected source of payment for this visit is defined using this hierarchy of payment categories: Medicare, Medicaid or Children’s Health Insurance Program (CHIP), private insurance, and other and self-pay. Other and self-pay includes workers’ compensation, self-pay, no charge, charity, and other. Because of the small number of children with Medicare, those estimates are not presented.

²Triage is based on emergency department classification of the immediacy with which patient should be seen. Emergent includes visits classified as immediate or needing to be seen within 14 minutes. Urgent visits are classified as needing to be seen within 15 to 60 minutes. Semiurgent visits are classified as needing to be seen within 61 minutes to 2 hours (119 minutes). Nonurgent visits are classified as needing to be seen within 2 hours or more. Nonurgent does not imply an unnecessary visit. Triage was rescaled for hospitals that use a three- or four-category triage system and was imputed for those with missing data. In 2009–2010, 19% of records were imputed.

NOTES: Totals by age group include all visits, including those with unknown or blank primary payer. See [Appendix II, Emergency department or emergency room visit](#).

SOURCE: CDC/NCHS, National Hospital Ambulatory Medical Care Survey, Emergency Department Component. See [Appendix I, National Hospital Ambulatory Medical Care Survey \(NHAMCS\)](#).