Retail Clinics: Improving Coordination of Care

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Retail clinics are a growing part of our health care system and communication and coordination between retail clinics and medical homes is an essential part of health care delivery.

So how can we integrate retail clinics into our evolving health care system?
Rate of Growth of Retail Clinics

Since 2000: Almost zero to 1,300 and growing

- From 2007-2009
  - 10 fold increase in number
  - 4 fold increase in visits
  - 5.97 million visits in 2009

- 117 million ER, 557 million PCP
Background

75% of Convenient Care Centers (CCC’s) are owned by the parent store that houses them. CVS, Walmart

Usually treat minor conditions: UTI, rash, respiratory infection, update immunizations
Cost

- Menu care
- Transparent pricing for visit types and testing
- Clear list of services offered
- California Health Care Foundation showed lower cost than ER, UC, PCP for minor illness
Quality

- Staffed by Nurse Practitioners typically
- Scope of practice and oversight standards
- Stand Alone visits
- Chronic disease management is coming
Access

- Physician workforce shortage: Over 100,000 by 2025
- Expanded and weekend hours
- Uninsured, underinsured, immigrants...
Stakeholders

- Accountable Care Organizations
- Patient Centered Medical Homes
- Hospitals, Primary Care Services - MD, DO, PA, NP, ...

- Duplicated care, Medical Errors from uncoordinated care
- Lost revenue and patient visits
Stakeholders

- Emergency Rooms / Urgent Care Centers
  - Fewer visits for minor problems - lowers cost visits
  - Uninsured and underinsured - more options/access
  - ER use for higher acuity patients
Stakeholders

- Pharmacies
  - Increased utilization
  - OTC products readily available

- Employers
  - Increased access for minor issues at a lower cost
  - Fewer missed days/hours
Stakeholders

- American Geriatric Society
  - Educating patients about appropriate CCC’s visits
  - Concerns for quality with complex patient visits
- Communities and Patients: Urban and Rural
  - Increased access
Concerns

Coordination and Communication
- Duplicate testing
- Medication reconciliation
- Notes available for PCMH
- CCC’s becoming PCMH - Chronic disease management
The Board of the Convenient Care Association
Require as part of membership that all CCC’s
 Coordinate care with PCP, PCMH, ACO
 Visit notes, testing, medications, referrals
 Connect patient’s to local PCP, PCMH, ACO
 This would be a good faith effort
Retail Clinics

- Thank you
- Questions?
References

To be added. Need to put in the correct format yet.