



A Closer Look from Families USA

Retail Medical Clinics: Okay in a Pinch, but No Substitute for Real Health Coverage

Retail medical clinics are popping up across the country in stores such as Wal-Mart, Target, and CVS. Several thousand more of these clinics are set to open in the coming years with names like MinuteClinic and RediClinic.¹ The appeal of this spur-of-the-moment form of health care is obvious: For around \$50,² you can be treated by a nurse practitioner or physician assistant for an ear infection, the flu, a fever, sore throat, allergies, or bronchitis. Your wait time? Probably less than 30 minutes.³ Even better, you can pick up groceries and other household items while you wait to be seen.⁴ Many of us can barely find time to see a doctor once a year for a physical exam, never mind finding time to seek care for a cough or cold that just won't quit. Who wants to scramble for a last-minute appointment, or spend hours waiting in the emergency room, for what is probably a minor condition that will get better on its own?

Without a doubt, retail health clinics give consumers easy access to treatment for simple conditions, and perhaps even the peace of mind that comes with knowing exactly how much each service will cost. But beyond convenience, what does the rise of retail clinics mean for consumers and for the health care system as a whole? The trade-off for convenience may be piecemeal services that lack the advantages of the kind of continuous care that comes with a doctor-patient relationship that's been cultivated over time. Consumers are going to use retail health clinics because they are convenient, but they should be aware of these clinics' limitations and use them only to supplement care from their regular primary care physician. And no matter how convenient these clinics are, they should not be mistaken for a solution to the increasing number of Americans who find themselves without health insurance.

Convenient but Not Comprehensive

We've all experienced an unexpected illness or injury. You're preparing dinner and you cut your finger. Or you wake up one Saturday morning with a sore throat and fever. Or your child falls and ends up with a painful, swollen ankle. The condition requires care, but do you really want to spend hours waiting in the emergency room? Maybe you can wait until Monday and get in to see your regular doctor. Or, you could drop in to the nearest retail clinic and get quick treatment, picking up a few household items on your way out.

But what happens if your sore throat calls for treatment with an antibiotic? Can you remember the exact names and dosages of the medications you are already taking so you can tell the nurse practitioner? If not, she might end up prescribing something that reduces the effectiveness of—or reacts negatively with—your other medications. Or what if what's bothering you is a

symptom, such as fatigue, that can be a sign of the common cold or flu, or an indication of a major health problem, like cancer? Retail clinics are generally not set up to handle such complex cases.

And what happens *after* you visit a retail medical clinic? If you don't already have a "medical home"—a regular source of care—the clinic *may* be able to refer you to a doctor for follow-up care, depending on the clinic's relationships with local health care providers.⁵ Whether or not you are able to take advantage of this referral, however, will likely depend on your health insurance status. If you are uninsured, for example, you may decide to skip the follow-up care, especially if it's expensive. Even if you do have health coverage and a medical home, will the clinic send your doctor the records of your visit, including any medications that were prescribed? If not, your doctor may now be missing a potentially vital piece of your medical history that can affect future diagnoses and treatments.

Quality and Continuity of Care

Retail clinics are based on a one-time model of care. This model precludes clinics from offering comprehensive physical exams, extensive diagnostic testing, or follow-up care. This, in turn, may increase the risk of missing signs of a serious illness—or being diagnosed with the wrong illness altogether.⁶ What's more, these clinics rely on consumers to have a sense of what services they might need based on a standard "one-size-fits-all" menu. Patients are ultimately responsible for giving retail clinic providers a clear picture of their medical history, while keeping their doctors informed about any diagnosis and treatment they receive there.⁷ Clearly, retail clinics place the burden of managing one's health care squarely on consumers' shoulders. For this reason, the American Geriatric Society has created consumer guidelines designed to help elderly patients decide when retail medical clinics are and are not a reasonable alternative to their doctor's office. These guidelines urge consumers to explain all of their medical problems to the retail clinic provider and to bring a complete list of medications.⁸

Some retail clinics have taken steps to reduce the risks associated with the one-time model of care by forming relationships with local hospitals and health care providers, while others continue to operate as independent storefronts.⁹ How these clinics are regulated, and the extent to which they are connected to traditional health care institutions, varies depending on the state in which the clinic is located and the parent company that manages it.¹⁰ According to the California HealthCare Foundation, some states require clinics to be licensed as a physician practice, which means that the clinic is subject to the authority of the state medical licensing board. Other states, however, require only the corporate umbrella of the clinic to obtain a license, which can be used to cover multiple clinic sites.¹¹

States also vary in the extent to which they regulate the mid-level health professionals that typically staff retail medical clinics, such as nurse practitioners.¹² Nearly half of all states don't require any physician oversight,¹³ which gives clinics the option of being managed entirely by nurse practitioners and physician assistants. Some states have become concerned about the

lack of guidelines for retail health clinics and are implementing stronger regulations. For example, Florida has implemented regulations to limit how many clinics any one physician can oversee.¹⁴ Illinois is considering legislation that increases physician oversight and limits the ability of retail clinics to advertise,¹⁵ and Massachusetts may require retail clinics to communicate with a patient's physician.¹⁶

Proliferation—with a Price

Convenience and low cost are important to consumers, sometimes even trumping concerns about the quality of care. For these reasons, it seems likely that the “health care when and where you want it” trend is here to stay. There are currently more than 250 retail medical clinics,¹⁷ and this number is expected to reach more than 1,000 in the coming years.¹⁸ RediClinic, affiliated with Wal-Mart, expects to have 500 clinics open by 2009. CVS, which recently purchased the MinuteClinic brand, hopes ultimately to establish a retail clinic in every CVS store across the country.¹⁹

The increasing popularity of retail medical clinics served as the impetus for the creation of the Convenient Care Association (CCA) in 2006, a trade group that advocates for the interests of convenience clinics, including retail clinic providers and their patients. The association emphasizes the potential of retail medical clinics to integrate people who have been marginalized into the traditional health care system and to lower the rates of emergency room use for non-emergencies.²⁰ The association's priorities include working with health care experts to implement uniform treatment standards, creating a marketing strategy, and developing a policy agenda that addresses regulatory issues.²¹

Consumers aren't the only ones taking a closer look at retail clinics. Health insurance companies are enthusiastic about these clinics because they are convenient for patients and cheaper to cover than a visit to the doctor's office.²² For example, Blue Cross Blue Shield of Minnesota conducted a study on the cost savings associated with retail medical clinics and found that the average retail clinic visit cost the company approximately \$43, compared to around \$87 for a doctor's office visit.²³ Several major insurance companies, including Aetna, Cigna, Humana, and United Healthcare, have formed partnerships with retail clinics that allow consumers to pay the same amount they would for a visit to the doctor's office.²⁴

Blue Cross Blue Shield of Minnesota is one insurance company that has taken this partnership a step further: It has made retail health clinics the preferred solution for consumers by waiving copayments for patients who go to retail clinics instead of the doctor's office.²⁵ This kind of policy could lead consumers, particularly those with high out-of-pocket costs, to feel compelled to visit a retail clinic instead of a doctor, even if they suspect their health condition could be more serious.

The pressure that consumers may feel to visit a retail clinic over the doctor's office is just one of the reasons that physician organizations, including the American Medical Association (AMA), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP), are opposed to retail medical clinics.²⁶ Physician groups have voiced serious concerns about the quality of care consumers receive in these clinics, cautioning that retail clinics should be used only as a supplement to a regular medical home.²⁷ The AAFP has called for increased regulation of retail medical clinics, including a limited scope of service, greater integration with local hospitals and primary care physicians, better referral and follow-up procedures, and electronic health records.²⁸

Conclusion

As consumer advocates, and as health care consumers ourselves, we understand the importance of convenience. But we also share many of the concerns about the quality of care provided at retail clinics that have been raised by physicians. We want to emphasize the importance of establishing a medical home. Quality and continuity of care are important, especially for the millions of Americans living with chronic health conditions or following complicated treatment regimens. Medical homes are critical to the health care system because they allow patients to develop a relationship with their physician over time, which helps patients manage chronic conditions over the long term—and hopefully avoid the more expensive care such conditions often require when treated in the ER.²⁹

There is a real danger that retail clinics will be used as a substitute for medical homes, particularly as out-of-pocket health care costs continue to rise. This threat may be reduced if retail medical clinics make a good-faith effort to partner with local health care providers to make sure that consumers are using these clinics only as they are meant to be used: as an adjunct to regular medical care for one-time health issues and not as a replacement for a regular medical home. In addition, physicians should consider taking steps to increase convenience for consumers.

For consumers who have both health insurance and a medical home, retail health clinics may provide a convenient addition to regular primary care. For patients who do not have health insurance, retail clinics may offer convenient and relatively low-cost treatment for minor illness and injuries, but they are no answer for serious health problems. *And they are definitely not a meaningful source of coverage for the uninsured.* The real solution to America's health care crisis won't be found in the next hot health care trend, or across from the paper towel aisle in your local Wal-Mart. It will be found in comprehensive health care reform that ensures high-quality, affordable health care for all.

Endnotes

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