

New Urgent Centers: Models of Healthcare Efficiency

May 12, 2014 By Tom Barkley

Having options for healthcare treatment is great. But when you've been laid up in bed for days with what you had thought was a 24-hour bug, you just want answers — without all the deliberations of whether to go to the hospital emergency room, neighborhood urgent care center, or the drugstore clinic.

Dr. Kurt Belk believes he has the answer you're looking for. The ER physician is medical director of [The Urgency Room](#), part of a new breed of urgent care centers that can handle most of the cases typically treated by emergency rooms but without all the red tape and overhead costs associated with hospitals.

“As an ER physician, I don't have to refer you on to anyone else because I can deal with all of the spectrums of your concerns at The Urgency Room,” Belk told Real Business

“One of the things that's innovative is, we're the front door,” he explained. The board-certified ER physicians that staff the company's three urgent care centers in the Minneapolis area can quickly determine whether you should be treated there, admitted to a hospital for more comprehensive treatment, or just make an appointment to see your primary care doctor.

“The patient would rather hear 'no' from a doctor, rather than a nurse or the front-desk person at the clinic,” said Belk. “I can have that direct dialog with a patient and connect them to their primary care base.”

Electronic Health Records Are the Key

Integration with primary care physicians is a key part of the strategy for these high-acuity urgent care centers, since it ensures a more seamless and efficient level of care that can help reduce overall costs. The technological enabler of integration is the electronic health record (EHR).

The Urgency Room uses [Epic](#), the most prevalent EHR software among hospitals and other healthcare providers in the area. “I've got a really great electronic infrastructure about that individual's patient history, and that really helps with defragmenting healthcare by integrating the patient's care no matter where they touch the system,” said Belk. “It's really helpful from the perspective of patient safety, care navigation, and patient integration.”

The rise of the integrated, high-acuity urgent care center is part of an increasing segmentation of the healthcare system, partly in response to consumer demand for more choice and better care at a lower cost.

“Urgent care is positioned as a consumer-driven phenomenon,” said Alan Ayers, who serves on the board of the [Urgent Care Association of America](#). “Consumers really like the idea of having some place they can go when a medical need arises — where they don’t need an appointment and they typically have a lower copay than a hospital.”

At the end of the spectrum for less-acute care needs, patients have a growing number of options — from walk-in clinics at local pharmacies to telemedicine. That means urgent care centers trending toward the treatment of more serious conditions such as lacerations, broken bones and ailments with complex symptoms.

Where we see urgent care going is toward that higher acuity level and an integration into the greater healthcare system,” said Ayers, who is also vice president of corporate development for [Concentra](#), a Dallas-based health care provider in 38 states.

“We are seeing an increased interest among various EHR providers in urgent care,” he said, which is largely due to the more than doubling of urgent care centers across the country over the past seven years to [nearly 10,000 locations](#).

Better Outcomes at a Lower Cost The ability to easily access and share patient’s health history has enabled urgent care centers to be more closely integrated with other providers — from hospitals looking to relieve traffic at emergency rooms to nursing homes referring patients for after-hour treatment. Similarly, urgent care centers can act as source of referrals to primary physicians and specialists.

“A frequent complaint is that urgent care has focused on episodic treatment and lacks the continuity of a primary care environment,” said Ayers. “But if urgent care can be connected electronically to primary care physicians, specialists and other healthcare resources in the community, now suddenly you would have the continuity of care to make sure the patient’s needs are met not only today — but for the longer term.”

Belk gets a call about every other week from some physician or other provider across the country wondering how The Urgency Room works and what it’s achieving.

“I think people are seeing this as a national trend,” said Belk, who is in the process of planning two more facilities in the Twin Cities area.

For him, the most important thing is to create a more rational healthcare system that creates better outcomes at a lower cost. “If we don’t find a way to reduce the overall cost of healthcare, we will fail,” said Belk. “What’s paramount with that is the EHR, because it helps with the integration and reduced complexity.”

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