

# **Integrating Occupational Health and Urgent Care Services**

## **Site Selection and Configuration**

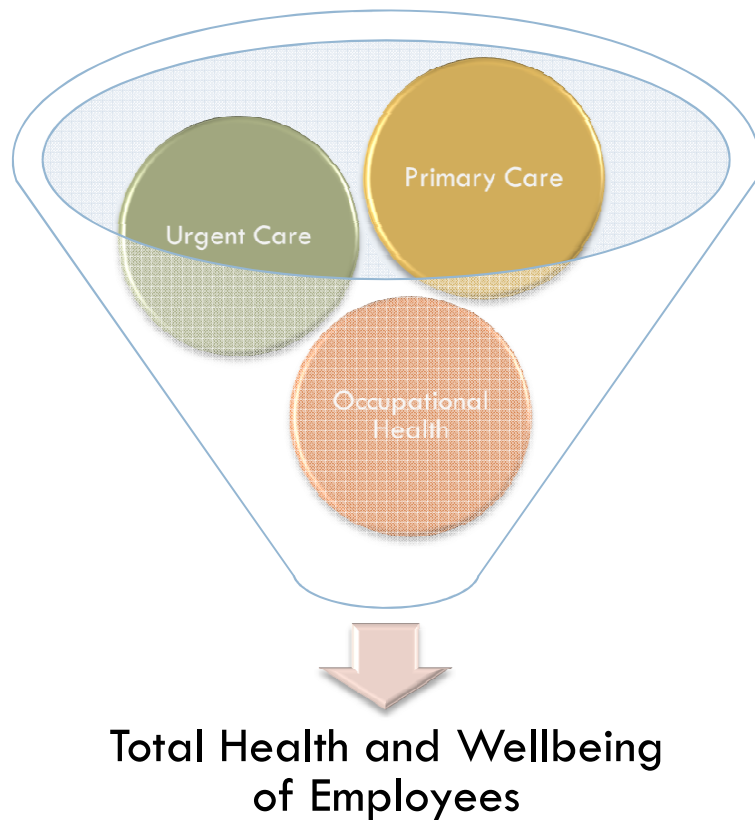
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# Convergence of Multiple Operating Models

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# Changing Business Drivers

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## Occupational Medicine

- Proximity to density of business in industries that utilize occupational medicine.
- Convenience/accessibility to the employer.
- Sales and account management to create and foster employer relationships.
- Relationships with workers compensation payers, third-party administrators.
- Providers focused on prevention, injury outcomes, compliance, and cost containment.
- Detailed communication with the employer expanding scope of services provided.

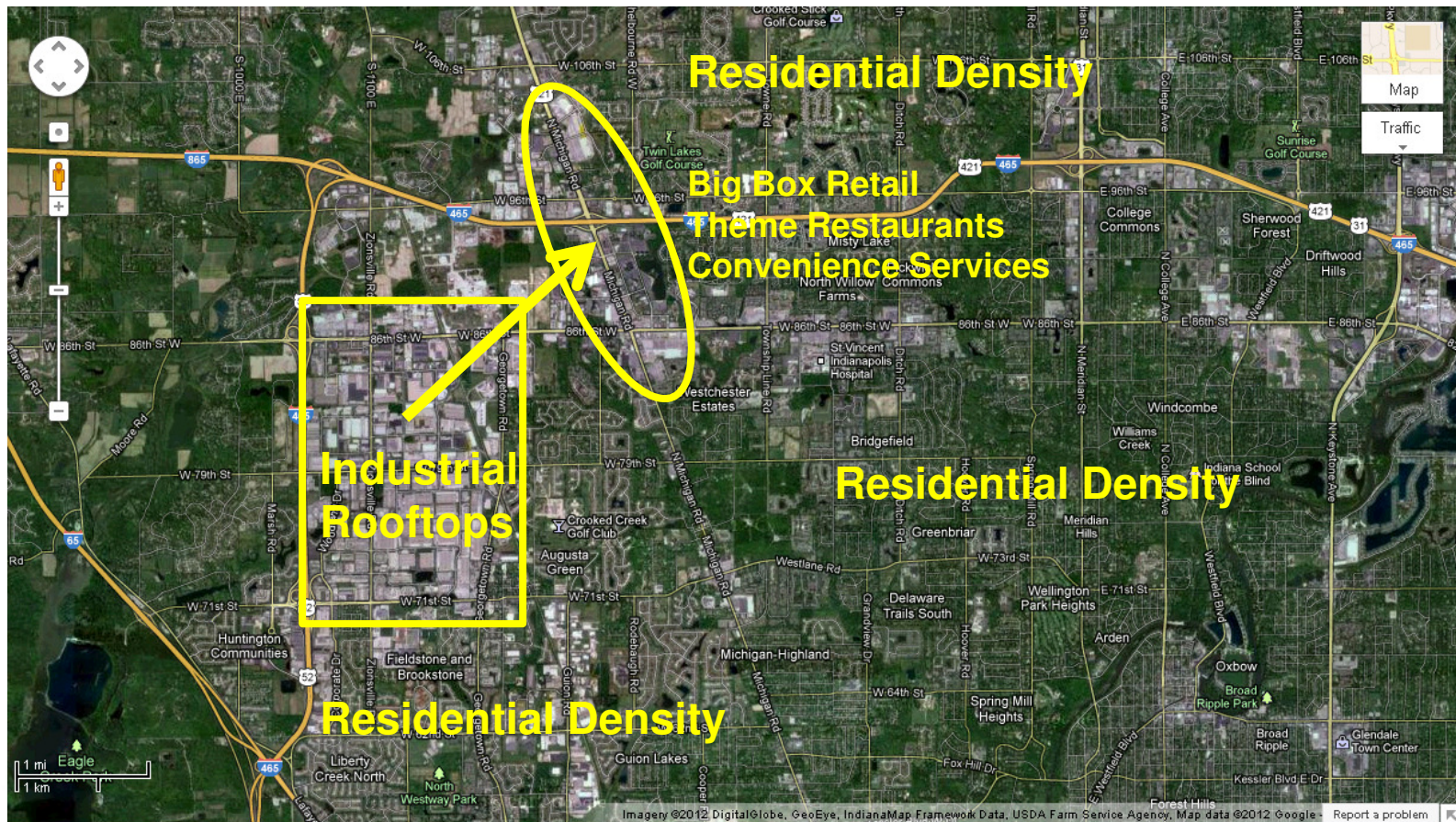
## Urgent Care

- Proximity to density of “urgent care” demographics.
- Retail adjacencies, signage visibility, traffic counts, easy turn-in, ample parking.
- Paid advertising, referral relationships, and grassroots marketing to attract new patients.
- Group health payer contracts, provider directory listings.
- Providers willing to treat infections, women’s health issues, children, and to refer longitudinal conditions.
- Outstanding patient experience spurring repeat visits and positive word-of-mouth.



# Site Selection Strategy

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# Forecasting Model Components

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- Households or Establishments
- Population or Employees
- Demographics or SIC Codes
- Propensity to Utilize Services

**Density:  
Trade Area Factors**

- Adjacencies/Draw
- Signage Visibility
- Traffic Counts/Accessibility
- Aesthetics

**Site:  
Real Estate Factors**

- Operating Hours
- Medical Providers
- Equipment/Training/Capabilities
- Customer Service

**Operations:  
Delivery Factors**

**Marketing:  
Limiting Factors**

- Payer Penetration
- Competition
- Marketing Budget

**Volume Projection**



# Consumer Urgent Care Demographics

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Married Couple with Children Present



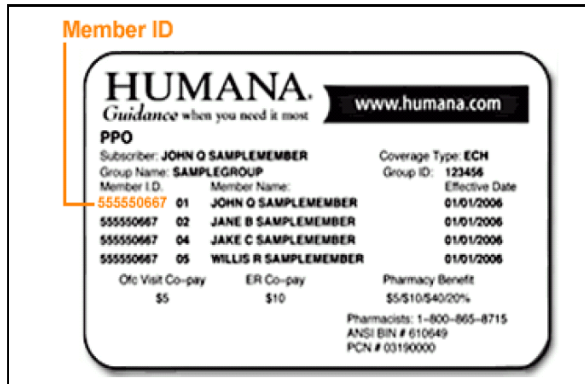
College Graduate Age 35-54



Owner-occupied Single Family Housing



Growing Suburbs of Major Metro Areas



Employer-Provided Health Insurance



Household Income \$50,000 to \$100,000

# Retail Adjacencies

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# Signage Visibility

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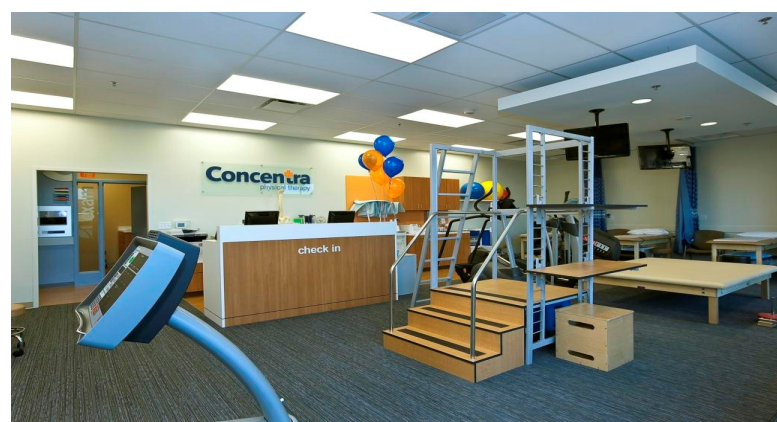
## Signage Visibility, cont'd.

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# Center Aesthetics

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# Configuration/Flow Considerations

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- Separate Flow Based on Service Type
  - Fast Track for Physicals and Drug Screens
    - Drug Testing Bays
    - Audiology/BAT/Titmus
  - Injury and Illness
    - Exam and Procedure Rooms
    - Specialized Exam Rooms: Gyn, Peds
- Segregate Waiting Areas by Service or Patient Type
  - Occupational Health vs. Urgent Care
  - “Sick” vs. “Well” Patients
  - Industrial Workers, Police/Fire, and Soccer Moms



## Configuration/Flow Considerations, cont'd.

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- Shared Clinical Services
  - Lab
  - X-ray
  - Pharmacy
  - Physical Therapy
- Space Efficiencies
  - Front Office
  - Medical Station
  - Break Room
  - Restrooms
  - File/Work Rooms
  - Storage Closets

# Financial Business Case

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## Center A

50 Visits Per Day  
8am to 5pm Monday-Friday  
Business Park Location  
Flanked by Competition  
Limited Upside in Occ Med

## Center B

100 Visits Per Day  
8am to 8pm Monday-Friday  
9am to 4pm Saturday  
Freeway Location  
Little Competition Present  
Significant Upside in Occ Med

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- Retail Rents
  - Extended Hours
  - Increased Staffing
  - Marketing/Advertising

- Distance center can move from current location is constrained by current business and competition.
- Urgent care volume increase must be sufficient to cover retail rents, marketing, and increased staffing coverage.
- Staffing efficiencies during extended hours will be low to start.
- Center EBIDTA and margin in jeopardy.

- Extended hours staffing costs are sunk—expanding volume improves staffing efficiencies.
- Growth in occupational medicine provides sufficient margin to absorb increased rents.
- Central location and lack of competition provides greater flexibility in site selection.
- Urgent care volume increase covers marketing costs.
- Center EBIDA and margin increase.

## For More Information...

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