Integrating Occupational Health and Urgent Care Services

Site Selection and Configuration

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Concentra Urgent Care
Convergence of Multiple Operating Models

Total Health and Wellbeing of Employees
Changing Business Drivers

**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
Forecasting Model Components

Density: Trade Area Factors
- Households or Establishments
- Population or Employees
- Demographics or SIC Codes
- Propensity to Utilize Services

Site: Real Estate Factors
- Adjacencies/Draw
- Signage Visibility
- Traffic Counts/Accessibility
- Aesthetics

Operations: Delivery Factors
- Operating Hours
- Medical Providers
- Equipment/Training/Capabilities
- Customer Service

Marketing: Limiting Factors
- Payer Penetration
- Competition
- Marketing Budget

Volume Projection
Consumer Urgent Care Demographics

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
Signage Visibility
Signage Visibility, cont’d.
Center Aesthetics
Configuration/Flow Considerations

- 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.

- 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

### 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

- 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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