

#### URGENT CARE FALL CONFERENCE

#### OCTOBER 3-5, 2013

RENAISSANCE GLENDALE HOTEL AND SPA GLENDALE, ARIZONA



# Urgent Care Site Selection



Urgent Care Association of America



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# Learning Objectives

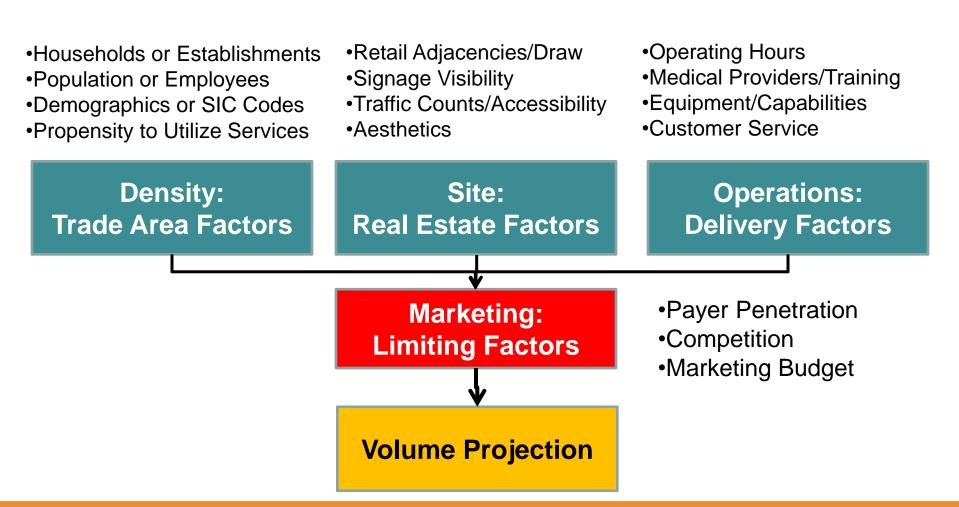
- Explain the factors that drive urgent care volume including trade area make-up, physical real estate characteristics, and operational delivery as well as volume-limiting factors like marketing, payer contracts, and competition.
- Identify the pros and cons of various types of space including medical office buildings, freestanding/street-facing, shopping center end-cap, and in-line retail.
- Perform an analysis of build-out of existing space versus buildto-suit and owning versus leasing.
- Avoid common site selection pitfalls leading to urgent care failure such as insufficient density, poor visibility, and overspending on build-out.
- Leverage the physical location of the urgent care center as a marketing tool.



## SITE SELECTION FACTORS



# **Forecasting Model Components**



### Trade Area Drivers of Urgent Care Volume

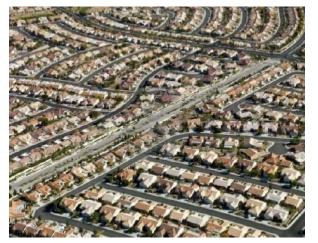
- Density of Households and Businesses
  - Total count within 3-5 miles or 12-15 minutes.
  - Trade area size/configuration varies by market.
- Demographics of Households and Businesses
  - Consumers who match the profile of conventional urgent care users.
    - Household income, family demographics
  - Employees in industries who require occupational medicine services.
    - Regulatory/compliance needs, injury rates



## **Consumer Urgent Care Demographics**



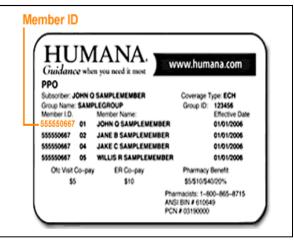
Married Couple with Children Present



**Growing Suburbs of Major Metro Areas** 



College Graduate Age 35-54



**Employer-Provided Health Insurance** 



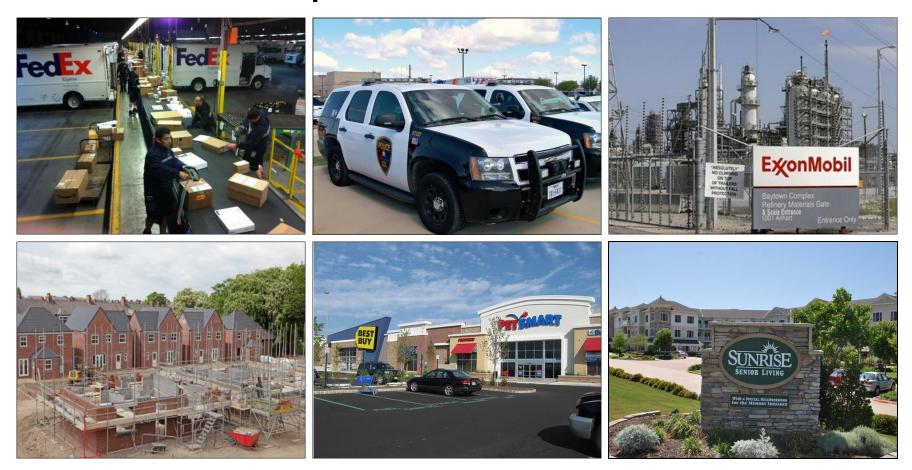
**Owner-occupied Single Family Housing** 



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



## High-Utilization SIC Codes for Occupational Medicine





### **Consumer Demographics Scorecard**

	esri 🛽	Market Profile				
		6340 N Beach St, Haltom City, TX, 76137 Rings: 1, 3, 5 mile radii				Latitude: 32.85859 Longitude: -97.28982
				1 mile	3 miles	6 miles
	Population Summary				75.405	170 200
	2000 Total Population 2000 Group Quarters			14,948	75,485	179,390 2,008
	2010 Total Population			17,740	103,101	250,096
	2015 Total Population 2010-2015 Annual Rate			19,458 1.87%	116,041 2.39%	280,507 2.32%
	Household Summary			1.0/76	2.39%	2.3276
	2000 Households			5,581	26,378	61,989
	2000 Average Household S	170		2.68	2.83	2.86
	2010 Households	net.		6,615	35,719	86,345
	2020 11003010103			0,010	2.86	2.87
DEMO	GRAPHICS*	<u>1 MILE</u>	3 MILE	5 MILE	40,217	96,926
DEIWO	GRAFIICS	TIMILE	JINNEL	JINILL	2.86	2.87
Denul	*! - · · ·	17 740	102 101	250,006	2.40%	2.34%
Popula	ation:	17,740	103,101	250,096	20,101	47,012
		676.005	600 CE C	677 707	3.27	3.30
Avg. H	.H. Income:	\$76,035	\$80,656	\$77,737	26,203	64,168
_					3.37	3.35
Daytin	ne Population:	3,636	29,205	75,170	29,061	71,266
		· ·	,	<i>,</i>	3.39	3.37
Media	n Age:	32.1	32.5	33	2.09%	2.12%
% \//bi	te Collar:	71.1%	65.2%	62.6%	27,489	64,434
70 <b>VVIII</b>	te conar.	/1.1/0	03.270	02.070	72.4%	70.0%
					23.6%	26.1%
	Vacant Housing Units			5.3%	4.0%	3.8%
	2010 Housing Units			7,056	37,795	91,631
	Owner Occupied Housing U	Inits		51.7%	66.9%	66.5%
	Renter Occupied Housing L	Inits		42.0%	27.6%	27.7%
	Vacant Housing Units			6.3%	5.5%	5.8%
	2015 Housing Units			7,796	42,669	103,091
	Owner Occupied Housing U	inits		50.8%	66.7%	66.5%
	Renter Occupied Housing U	Inits		42.7%	27.6%	27.5%
	Vacant Housing Units			6.6%	5.7%	6.0%
	Median Household Income					
	2000			\$54,659	\$55,751	\$52,236
	2010			\$67,308	\$71,396	\$68,192
	2015			\$75,138	\$78,376	\$76,797
	Median Home Value					
	2000			\$92,568	\$87,739	\$84,150
	2010			\$115,117	\$114,516	\$113,315
	2015			\$131,938	\$131,617	\$131,053
	Per Capita Income					
	2000			\$23,699	\$22,315	\$21,529
	2010			\$29,333	\$28,115	\$26,954
	2015			\$32,356	\$30,925	\$29,752
	Median Age					
	2000			30.3	31.2	32.0
	2010			32.1	32.5	33.0
	2015			32.3	32.6	33.0

#### **Benchmarks:**

<u>3-Mile Population Density:</u>		
>85,000		
45,000 to 85,000		
<45,000		
3-Mile Median Household Income:		
>\$70,000		

× 770,000
\$55K to \$70K
<\$55,000

Also consider distribution of income levels.

Married Households w/Children:		
•High:	>25%	
•Medium:	20 to 25%	
•Low:	<20	

Also consider percent of households age 65+ and percent of unmarried female households w/children present.



## **Urgent Care Retail Adjacencies**





## **Urgent Care Retail Adjacencies**





#### Traffic Counts and Signage Visibility





# **Center Aesthetics**











#### **Real Estate Factors Scorecard**

#### Traffic Counts:

•High:	>50,000
•Medium:	20,000 to 50,000

•Low: <20,000

#### Retail Adjacencies:

•High:	>3: Kohls, PetSmart, Target, Lowes, BestBuy (or comparable)
•Medium:	Chain Supermarket, Big Box Store
•Low:	Street Draw, Convenience Services

# Signage Visibility:•High:Building and Monument/Pylon Highly Visible from Both<br/>Directions, Day and Night•Medium:Building and Monument/Pylon Visible Upon Approach<br/>Small Sign, Signage Obstructed or Not Noticeable from<br/>Street



# **Payer Penetration**



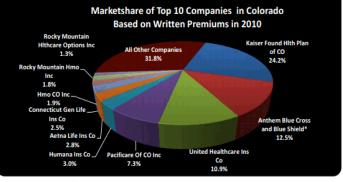


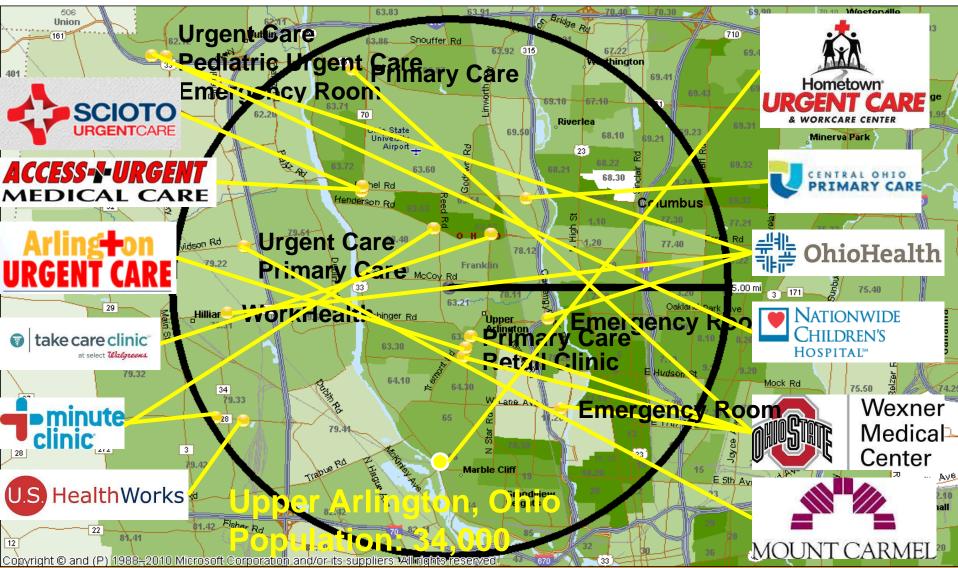
Figure 9: Marketshare of Top 10 Companies in Colorado Based on Written Premiums in 2010

Company	2010 Written Premiums	2010 % of Market Share
Kaiser Found Health Plan of CO	2,404,286	24.2%
Anthem Blue Cross and Blue Shield*	1,240,068	12.5%
UnitedHealthcare Ins Co	1,084,157	10.9%
Pacificare Of CO Inc.	727,762	7.3%
Humana Ins Co	299,981	3.0%
Aetna Life Ins Co	274,023	2.8%
Connecticut Gen Life Ins Co	249,833	2.5%
HMO CO Inc.	187,936	1.9%
Rocky Mountain HMO Inc	177,882	1.8%
Rocky Mountain Healthcare Options Inc.	130,364	1.3%
All Other Companies	3,148,830	31.8%
Total	9,925,122	100.0%

Table 18: Market Share of the Top 10 Health Carriers in Colorado<sup>12</sup>



# **Competition: Analysis and Mapping**



# Natural and Psychological Barriers

- Political Boundaries (City/County/School District Lines)
- Retail Trade Areas
- Socio-demographic Changes
  - Gentrification
  - Economic and Ethnic Segregation
- Major Freeways, Cross-Streets
- Traffic and Commuting Patterns
- Construction/Changes to Traffic/Commuting Patterns
- Lakes/Rivers, Mountains, Parks, Cemeteries, Golf Courses, etc.



## SIGNAGE VISIBILITY















## **Consider Visibility from All Angles**





#### Day and Night; Street and Sidewalk





## Signage Visibility Enhancements





#### **TYPES OF AVAILABLE REAL ESTATE**

## **Benchmarks: Facility Characteristics**

- 3,500 to 4,000 sq. ft.
- Parking: 5-6 spaces per 1,000 sq. ft.
- Front office: manager's office, file room, IT closet
- Restrooms accessible from waiting room
- 5 exam rooms; 2 procedure rooms
- X-ray suite
- Centralized medical station
- Trend away from private physician's offices
- Centralized supply room
- Break room (FLSA) and employee restroom
- Utility/cleaning closet, biohazard disposal



## Benchmarks: Location Type and Rents

#### **Occupancy Costs:**

Rent CAM (Common Area Maintenance) Build-out Cost \$18-24/sq. ft. \$4-8/sq. ft. \$70-90/sq. ft.

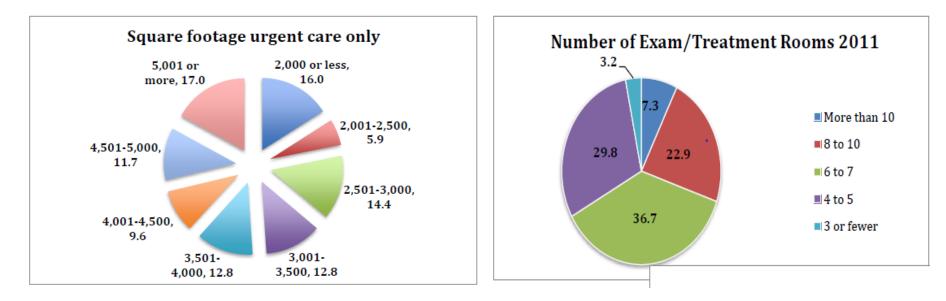
Location Type	2012
Freestanding	36.9
Within Medical Office Building	30.0
Within Shopping Center/Strip Mall	19.4
Within Mixed Use Building	13.4

Source: Urgent Care Association of America, 2012 Benchmarking Study



# **Benchmarks: Clinic Attributes**

• Average of 3,800 sq. ft. • 6-7 Exam Rooms



Source: Urgent Care Association of America, 2012 Benchmarking Study



# **Retail Center: Outlot Building**



#### Pros:

Visual separation from co-tenants High visibility of building signage Building as a "brand" attribute

#### Cons:

Project timeline Requires available pad site Excess square footage, sub-leasing High cost of build-to-suit High ongoing maintenance cost





## Retail Center: In-Line Strip



#### Pros:

Parking lot visibility Cross-traffic from adjacent retailers Shell easy to demise and build-out

#### <u>Cons:</u>

Parking limitations w/other businesses Signage visibility from street Medical use exceptions





## **Retail Center: Endcap**



#### Advantages of a freestanding building without the cost.



# **Urban Storefront**



#### Pros:

Good visibility Car and/or foot traffic Business and residential adjacencies

#### Cons:

Parking issues Size limitations Night/weekend volume



## Medical/Dental Professional Building



**Pros:** Cross-referrals to/from other providers, patient traffic, perception of "medical hub" **Cons:** Parking issues (time of day, close-in), limited signage, branding/service restrictions

#### Highlands Ranch Medical Plaza 9330 S. University Blvd.





## Hospital Multi-Specialty Facility





#### Low-Rise Business Park, Industrial Flex-Type Space



#### Pros:

Lower rents Employment base for occ med

#### Cons:

Lower traffic counts Absence of urgent care demographics Absence of retail draw Lower-tier aesthetics



## **Office Condominiums**



#### Not Retail—Signage/Visibility Issues



#### Ideal Size/Positioning: Hollywood Video





### **RED FLAGS: WHAT TO LOOK OUT FOR**

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#### **Common Reasons for Center Failure**

- Overhead too high due to rental rates, excessive square footage, excessive "nets," or depreciation on excessive build-out expenses
  - Unlike a hotel or apartment, reimbursement (fee schedule) does not adjust based on real estate
  - Excess costs deplete working capital before break-even is achieved
  - High overhead costs will erode center margin more than it will draw additional patients
  - Center may never be highly profitable



#### Common Reasons for Center Failure, cont'd.

- Picking the wrong location
  - Competition
  - Insufficient population density
  - Wrong demographics
  - Visibility/traffic is insufficient to raise awareness



# **Second Floor Space**



Accessibility issues for injured patients.

Signage visibility challenges.



### Restaurants



Great visibility and ample parking, but expensive demolition of bar and kitchen areas and excessive square footage (w/CAM) at retail rates.



# Lifestyle Center



Designed for entertainment and residences.

Parking issues.

Lack of signage visibility from outside the complex.



## High Vacancy Rates; Empty Box Stores





No catalyst for change.

Limited traffic; poor brand perceptions.

It could be a long time before vacancies are occupied or demolished.

No control over future cotenants (i.e. flea market, dollar store, night club, etc.).



### First Mover in a New Development



Insufficient population density to support business model.

Inability to sustain operating losses while area grows to critical mass.



## **BUSINESS CASE CONSIDERATIONS**

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#### Rent vs. Buy and Shell vs. Build-to-Suit



# Leasing vs. Buying: Leasing

- Triple Net similar expense structure to ownership
  - Maintenance
  - Utilities
  - Taxes
- Tenant improvement allowance
   offsets capital needs
- Terms of lease agreement
  - Base rent and escalators
  - TI allowance
  - Terms and renewal options
  - Assignment
  - Improvements (lighting, parking signage)
  - Rights of first refusal

- No equity in building
- Little control over cotenancy
- Hurdles with landlord for maintenance/improvements
- Captive to landlord at renewal



# Leasing vs. Buying: Buying

- Greater capital needs to finance entire project
- Business opportunity for providers or management
- Ongoing maintenance and operating costs
- Capital appreciation
- Tax advantages (depreciation, business expenses)
- Resale value
- Control tenant mix
- Permitting and zoning issues
- Time consuming



## **Business Plan Data Points**

- Operational Factors:
  - --Services Offered
  - --Hours of Coverage
  - --Provider Staffing
- Consumer Demographics:
  - --Population Density
  - --Population Growth Rates
  - --Average Household Income
  - --Family Households
  - w/Children Present
  - --Cross-Correlation of Other Factors
- Employment:
  - --Employee Density by SIC Code
  - --Distribution of Business Size
  - --Municipal Accounts
- Traffic Counts (Flow and Drive Time)

- Retail Draw (Retail/Restaurant Adjacencies)
- Insurance / Payer Network Providers and Covered Lives
- Distance to Other Medical Providers

   --Urgent Care Centers
  - --Primary Care Offices
  - --Specialist Offices
  - --Retail Health Clinics
  - --Hospital and Freestanding
  - Emergency Rooms
  - --Imaging Centers and Labs
- Available Real Estate
  - --Visibility & Access
  - --Parking
  - --Co-Tenants
  - --Pad Site vs. Existing Building
  - --Buying or Leasing



# Sources of Information

--Google
--State Dept. of Transportation
--City Engineering/Streets Dept.
--Chamber of Commerce
--US Census Bureau
--Mapping Software
--Managed Care Organizations

- --Banker
- --Attorney
- --Accountant
- --Architect
- --General Contractor



# **Contact Information**



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