Patients who Utilize Retail Healthcare Clinics have Fewer Emergency Department Visits and Incur Lower Overall Healthcare Cost

Presented at the Academy of Managed Care Pharmacy NEXUS Orlando, FL; October 26-29, 2015

Results from this study suggest that retail healthcare clinics provide an affordable alternative for many primary care services and may avert more costly non-emergent emergency department visits.

BACKGROUND

- The retail healthcare clinic care delivery model started over a decade ago as a convenient, accessible, and less costly alternative to a traditional doctor's office visit for acute conditions.
- Initially, these clinics provided a narrow range of services, but as the model has matured, the services provided have expanded to include screenings, preventative, and chronic condition care.
- It is projected that the Affordable Care Act and the associated patient demand will double the 1,418 clinics in operation in 2012 to 2,868 in 2015 with a projected savings of \$800 million annually for the healthcare system.

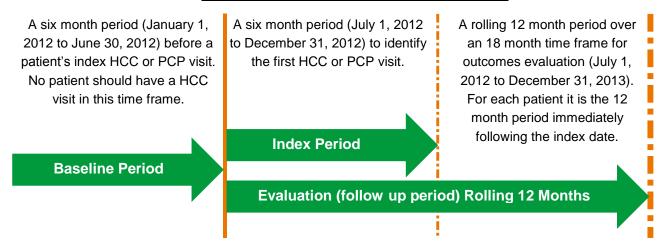
OBJECTIVE

 The objective of this study was to determine whether patients who utilized retail healthcare clinics as part of their medical care have lower healthcare cost and lower emergency department (ED) visits than similar patients who do not utilize retail healthcare clinics.

METHODS

- This retrospective propensity matched cohort study selected a two-to-one matched sample from over 195,000 beneficiaries receiving employer based health insurance from a large healthcare company.
- Patients were matched on age, number of chronic conditions, level of insurance coverage, number of covered beneficiaries, gender, number of therapeutic classes, tobacco use, baseline medical and pharmacy spending, and 27 chronic conditions.
- Patients had to be continually enrolled from January, 2012 through December 2013.
- The case cohort consisted of patients who utilized retail healthcare clinics as part of their healthcare, while the comparison cohort consisted of patients who did not use retail healthcare clinics at all.
- We used mixed modelling statistical procedures to assess healthcare utilization and healthcare cost differences between the cohorts. The study was approved by an Institutional Review Board.

Healthcare Clinic (HCC) Outcomes Study: Period Definitions Propensity Matched Retrospective Cohort Study



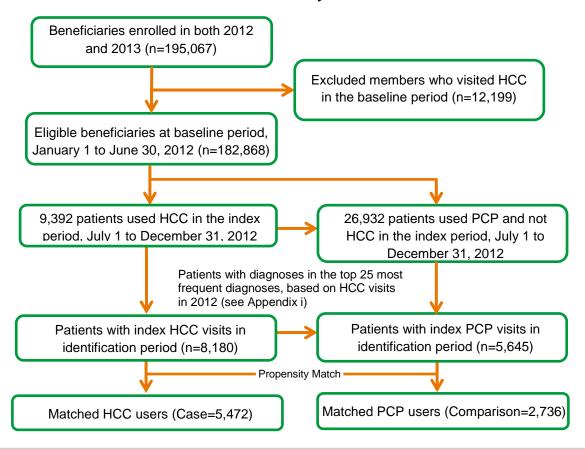
Notes:

HCC Cohort – All patients who did not have a HCC visit in the baseline period, but had at least one HCC visit in the index period.

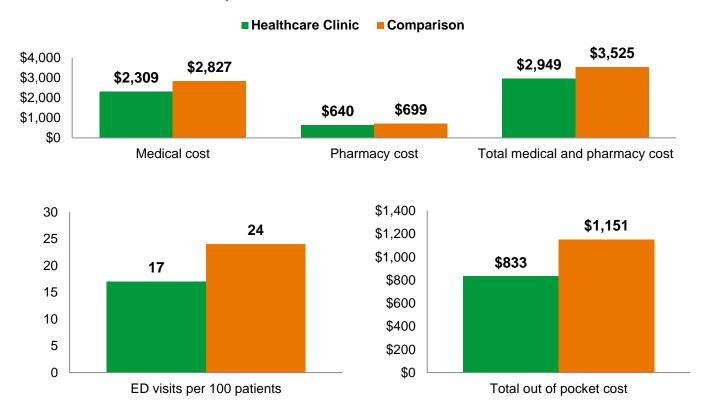
Comparison Cohort – All patients who did not have a HCC visit in any of the three periods, but had at least one PCP visit in the index period.

Index Visit – The first HCC or PCP visit during the index period with a primary diagnosis that falls into one of the top 25 most common primary diagnoses for the Healthcare clinics.

Healthcare Clinic Outcomes Study Cohort Selection Flow



Comparison of Healthcare Cost and Utilization



- In sum, the results of this study showed that the healthcare clinic cohort had significantly fewer ED visits than the comparison cohort (7 fewer visits per 100 patients), and out of pocket cost was significantly lower for the healthcare clinic cohort (\$319 lower).
- In addition, medical spending was significantly lower for the healthcare clinic cohort (\$517 lower), and total healthcare cost (medical, pharmacy and plan premium) was significantly lower for the healthcare clinic cohort (\$579 lower).

CONCLUSIONS

• The results from this study imply that retail healthcare clinics staffed primarily by Nurse Practitioners provide a more affordable alternative for many primary care services. In addition, the results suggest that retail healthcare clinics may avert more costly non-emergent emergency department visits.

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