Convergence of Occupational Medicine to Urgent Care

Synergies & Market Drivers
Occupational Health and Urgent Care Services
AOHC
April 29th, 2014
San Antonio, Texas

Bill Lewis MD, MBA
Concentra
SVP Medical Operations
WOMENA Board of Directors

Learning Objectives

☐ It’s a Business Case, the Medicine is easy
☐ Many synergies, but different Drivers
☐ Transforming the clinic culture from employer-centric to patient-centric
☐ Customer experience, customer experience & customer experience = Patient
☐ Enhancing the patient experience
☐ Operational changes are few but significant

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 “UC” 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, medical community integration.
- Providers willing to treat infections, women’s health issues, children, preventive services and to refer longitudinal conditions.
- Outstanding patient experience spurring repeat visits and positive word-of-mouth.

High-Utilization SIC Codes for Occupational Medicine

Urgent Care Demographics

Married Couple with Children Present
College Graduate Age 35-54
Owner-occupied Single Family Housing
Growing Suburb of Major Cities
Employer-Provided Health Insurance
Median income $50,000 to $100,000
Addressing the Real Estate

- Residential Density
- Target Relocation Area
- Big Box Retail
- Theme Restaurants
- Convenience Services

Forecasting Model Components

- Household or Establishments
- Population or Employees
- Demographics or SIC Codes
- Propensity to Utilize Services
- Real Estate Factors
- Trade Area Factors
- Site: Real Estate Factors
- Operations: Delivery Factors
- Density: Trade Area Factors
- Marketing: Limiting Factors
- Volume Projection
- Operating Hours
- Medical Providers
- Equipment: Training/Capabilities
- Customer Service

Urgent Care Marketing Plan

- Employer Direct:
  - Benefits Cost Savings Focus
  - Existing Sales Force
  - 400 Employer Clients
  - Break room postings to benefits support

- Conversion:
  - Captive Audience
  - X Patients per Day experiencing your facility

- Acquisition:
  - No Prior Relationship
  - In-network Insurance
  - Paid Advertising
  - Grassroots Promotion

- Research
  - Internal Assessment
  - Primary -- Business and Consumer
  - Secondary Research

- Brand Changes
  - Mission, Vision Values
  - Logo

- Infrastructure Changes
  - Process
  - Service Environment
  - Service Delivery
  - Measurement and Accountability

- Culture Changes
  - Internal
  - Communications -- Awareness
  - Campaign
  - Knowledge and Skills
  - Reinforcement
  - Orange Book
  - NPS Dashboard

First Impressions...

“Waiting vs. Welcoming Room”
First Impressions...

Occupational or Urgent Care or both?

Tangibles: Environment of Care

Procedure Room

Provider Workstation

Exterior Signage
Physicians Quality Care, Jackson, TN

- Patient Concierge
- Multiple Waiting Areas:
  - 24-Seat Movie Theater
  - Reading/Lending Library
  - Children's Play Areas
- Refreshments Offered:
  - Fresh Popcorn
  - Slushy Machine
  - Gourmet Coffee
  - Soft Drinks
  - Packaged Snacks

Don't forget Technology

Measurement: Net Promoter Score

The Ultimate Question — “on a scale of 1 to 10, rank likelihood to recommend us to others.”

0-6: Detractors 7-8: Passives 9-10: Promoters

Undermines our future business. Easily wooed by the competition. Extends our sales/marketing.

The goal is to increase net promoter score by “neutralizing” detractors and “converting” passives.

NPS: April, 2008

Net Promoter® Score 10%

Infrastructure Changes

<table>
<thead>
<tr>
<th>Process</th>
<th>Service Environment</th>
<th>Service Delivery</th>
<th>Measurement/Accountability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reengineer Processes</td>
<td>Facility “Look and Feel”</td>
<td>Job Redefinition</td>
<td>NPS™ Measurement</td>
</tr>
<tr>
<td>Remove Non-Patient-Related Activity From Centers</td>
<td>Modified Equipment &amp; supply list</td>
<td>Clinician proficiency assessment &amp; training</td>
<td>Dashboard</td>
</tr>
<tr>
<td>Integrate Flow processes</td>
<td>In-center Marketing</td>
<td>On-boarding</td>
<td>Clinical outcomes</td>
</tr>
<tr>
<td>Centralize, Automate</td>
<td>Patient/Lobby Room Initiative</td>
<td>Patient/Lobby</td>
<td>Recognition &amp; Reward</td>
</tr>
</tbody>
</table>

Net Promoter, NPS and Net Promoter score are trademarks of Satmetrix Systems, Inc., Bain & Company and Fred Reichheld.