



UCA

2021

AUTUMN

BENCHMARKING REPORT

 URGENT CARE
ASSOCIATION®

INTRODUCTION

If you are a member of the Urgent Care Association or College of Urgent Care Medicine, we are pleased to be giving this quarter's report to you at a 100% discount!

This gift is in appreciation for all you have done as urgent care providers in your communities, but also in appreciation of your rock-solid support of UCA and CUCM through such challenging times. We are honored to have you as a member.

If you've not seen a Benchmarking Report yet this year, we've been doing things differently because of COVID - primarily sourcing data from our industry partners and vendor members vs. via center member surveys.

However, the 2021 Autumn report includes data from some of those partners, as well as new data gathered this summer in a short survey. We hope you find it helpful to your urgent care medical practice and center operations.

LOOKING AHEAD

In 2022 we will keep sharing exclusive data from our industry partners, but we are excited to announce that **data gathering directly from all members will resume!**

We plan to continue to publish frequently - with each report focused on the top priorities for the season.

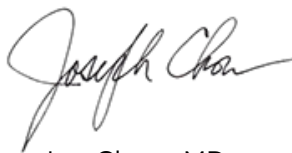
Make sure we know what **YOUR DATA PRIORITIES** are by telling us here:



We hope you enjoy the Autumn report...Winter's report is not far behind. If you missed Spring or Summer and would like to order, click here. <https://www.ucaoa.org/Resources/Industry>.



Lou Ellen Horwitz
Chief Executive Officer



Joe Chow, MD
President
Urgent Care Association



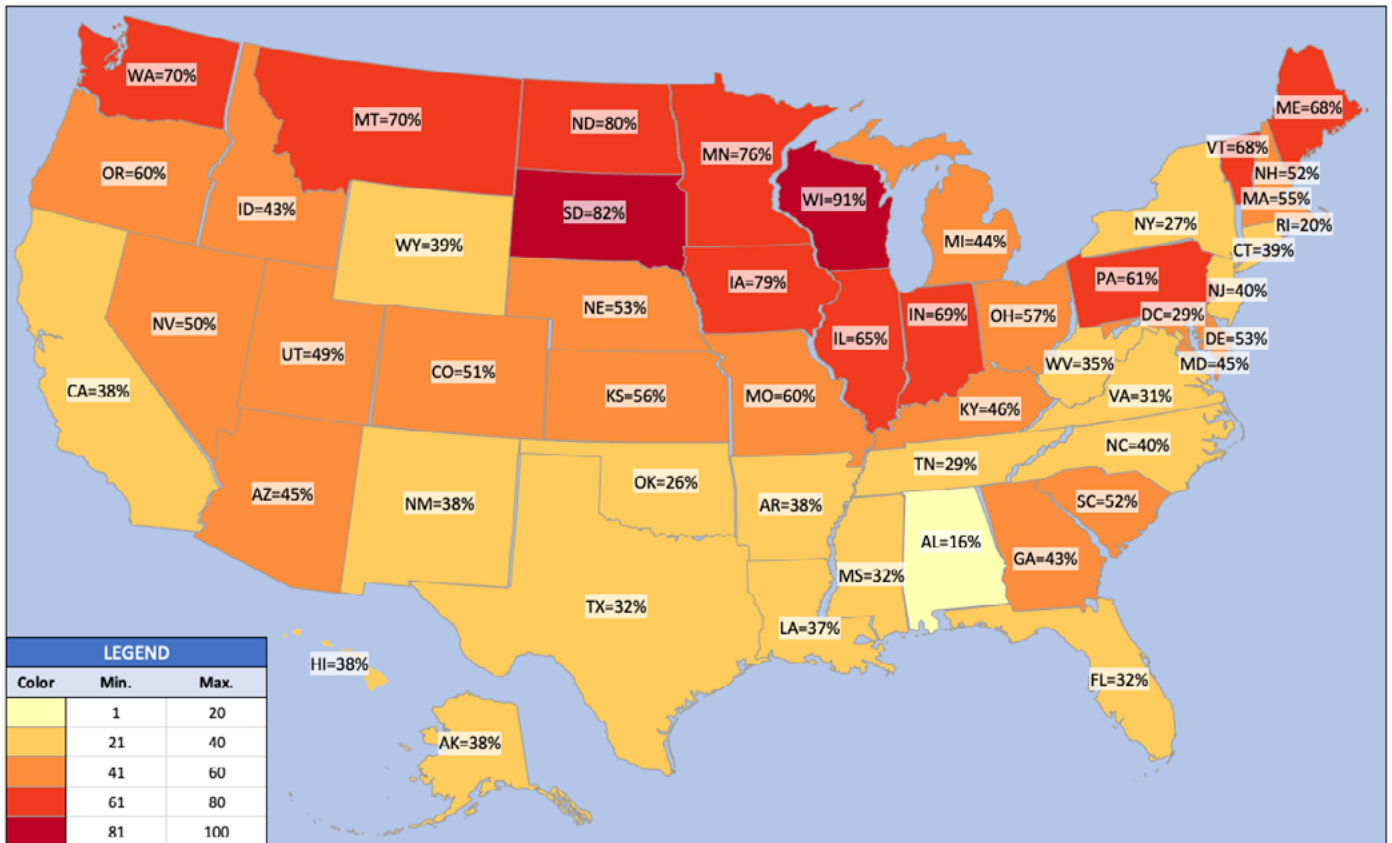
Jasmeet Bhogal, MD
President
College of Urgent Care Medicine

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INDUSTRY PROFILE

PERCENTAGE OF URGENT CARE CENTERS OWNED BY OR AFFILIATED WITH A HOSPITAL OR HEALTH SYSTEM



HOT TOPICS

DETERMINING THE POTENTIAL FINANCIAL AND CLINICAL BENEFITS OF ON-SITE LAB TESTING

To determine if it makes financial sense for an urgent care to offer not only rapid/lateral flow lab diagnostic testing on-site, but molecular testing as well (rather than sending them out to a third-party lab), a simple worksheet like the one below can help.

Consider the following example of an Urgent Care that performs 50 Influenza A/B tests per week (2,600 tests per year). If using a lateral flow/rapid (antigen) flu test at an average cost of \$13 per test*, with an average Medicare reimbursement rate of \$33.10**, the practice realizes about \$52,000 in net revenue annually. But if the flu test is performed using molecular technology (analyzer), the average cost per test is higher at approximately \$45.00*, but the average Medicare reimbursement is significantly higher at \$95.80**.

In this example, the practice would earn about \$132,000 annually with the molecular platform – a difference of nearly \$80,000. If a clinic is utilizing a third-party lab for molecular testing, it will not realize this revenue at all.

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HOT TOPICS

DETERMINING THE POTENTIAL FINANCIAL AND CLINICAL BENEFITS OF ON-SITE LAB TESTING

		COST*	REIMBURSEMENT**
Influenza A/B Antigen (Lateral flow or rapid)	Per Test	\$13.00	87804QW \$33.10
	# of tests per year (XX per week)	2,600	2,600
	Total	\$33,800	\$86,060
Net annual revenue - Antigen			\$52,260

		COST	REIMBURSEMENT
Influenza A/B Molecular	Per Test	\$45.00	87502QW \$95.80
	# of tests per year (XX per week)	2600	2600
	Total	\$117,000	\$249,080
Net annual revenue - Molecular			\$132,080
Additional revenue if using Molecular			\$79,820

**Average aggregated cost across industry. Actual costs may vary.*

***Average Medicare reimbursement. Reimbursement amounts can vary widely across state and health plans.*

In addition to the potential increased revenue for an Urgent Care, on-site lab testing with molecular technology can elevate patient care (and patient satisfaction) by enabling quick diagnosis and immediate treatment with increased accuracy while minimizing the potential spread of disease while waiting for test results.

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HOT TOPICS

DETERMINING THE POTENTIAL FINANCIAL AND CLINICAL BENEFITS OF ON-SITE LAB TESTING

WORKSHEET

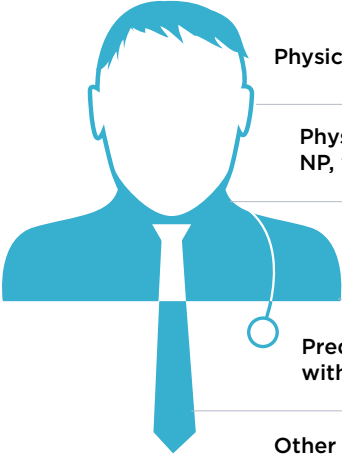
Use this worksheet to conduct your own analysis.

		COST	REIMBURSEMENT
Antigen Test (Lateral flow or rapid)	Per Test		
	# of tests per year (XX per week)		
	Total		
Net annual revenue - Antigen			

		COST	REIMBURSEMENT
Molecular Test	Per Test		
	# of tests per year (XX per week)		
	Total		
Net annual revenue - Molecular			
Additional revenue if using Molecular			

STAFFING

TYPICAL PROVIDER MODEL

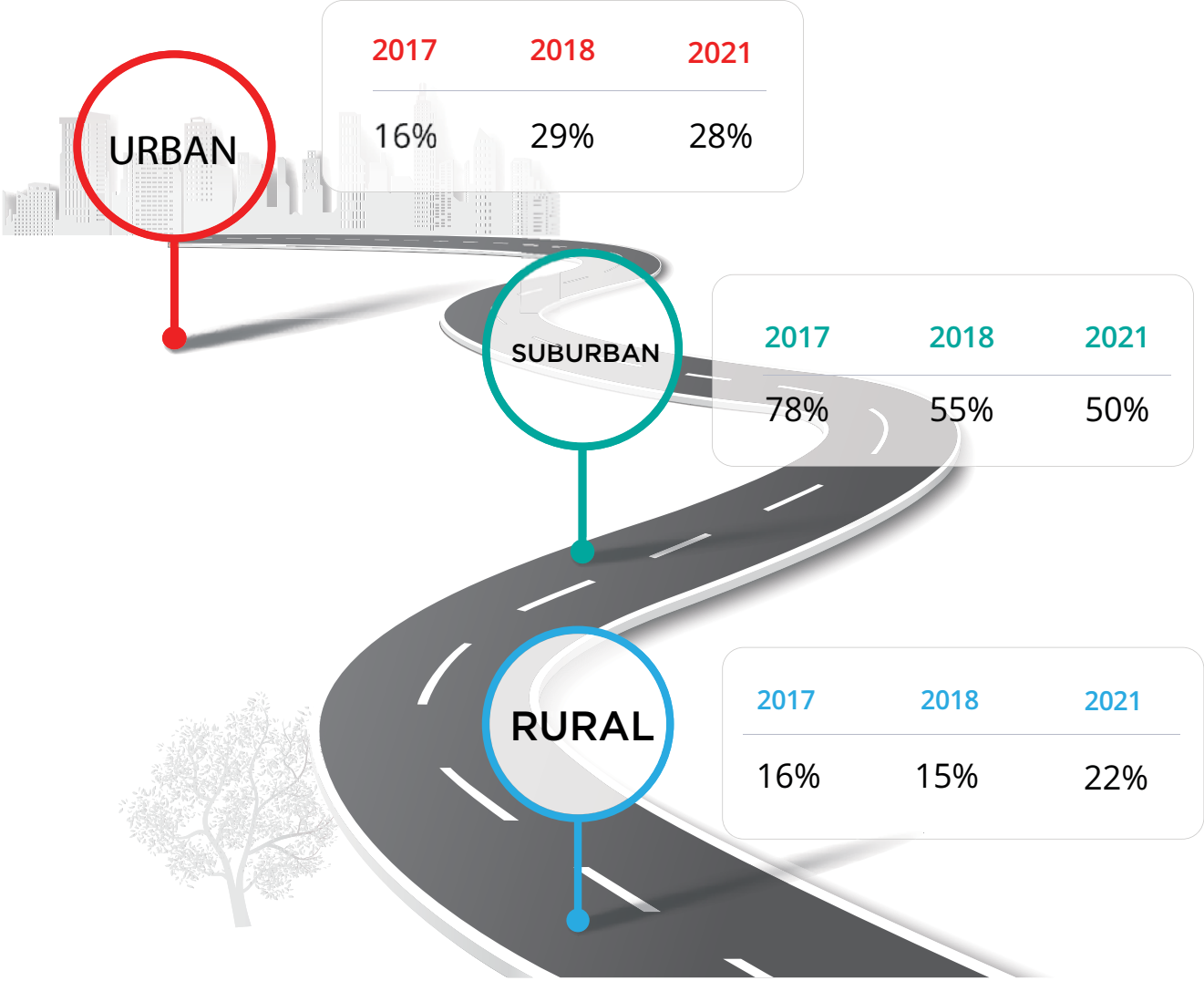


	2017	2018	2021
Physicians Only	2%	1%	1%
Physicians with PA or NP, with physician always on site	5%	26%	6%
Physicians with PA or NP, with physician not always on site	62%	54%	60%
Predominantly PA and/or NP, with remote physician supervision	31%	19%	33%
Other	1%	1%	1%

Content provided by UCA Member Survey

FACILITIES

CENTER GEOGRAPHIC DISTRIBUTION

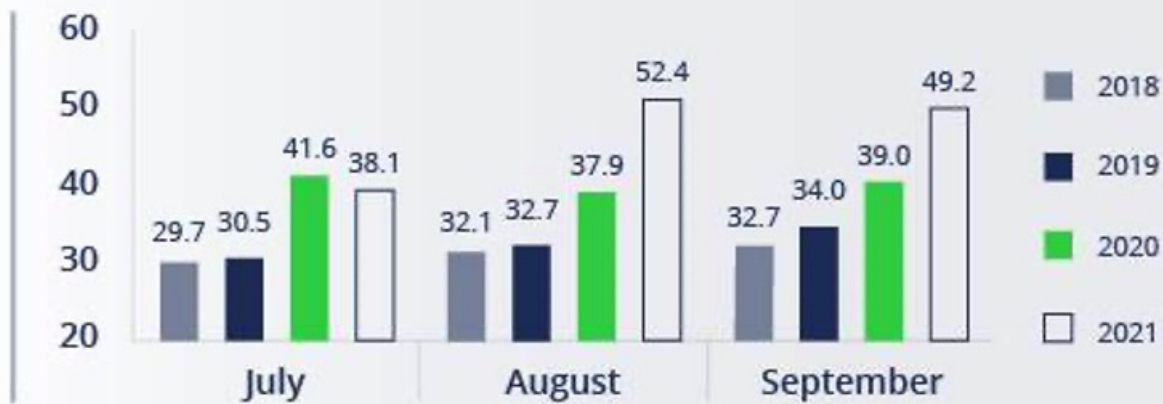


Content provided by UCA Member Survey

OPERATIONS

VISIT VOLUME / DIAGNOSIS TRENDS

Average Visits per Clinic per Day Year-Over-Year 2018-2021



Top Three Primary Diagnosis Year-Over-Year 2018-2021

	2018		2019		2020		2021	
July	J02.9	6.4%	J06.9	6.8%	Z20.828	30.6%	Z20.822	83.6%
Aug.	J06.9	5.8%	J02.9	5.5%	Z03.818	11.8%	U07.1	11.9%
Sep.	J01.90	4.7%	J01.90	4.9%	Z11.59	4.4%	Z20.828	6.8%

OPERATIONS

PERCENTAGE ESTABLISHED VS. NEW VISITS

YEAR	MONTH	% OF VISITS ESTABLISHED	NEW
2020	1	59.7%	40.3%
	2	60.5%	39.5%
	3	60.6%	39.4%
	4	54.7%	45.3%
	5	50.2%	49.8%
	6	46.0%	54.0%
	7	43.4%	56.6%
	8	46.5%	53.5%
	9	48.3%	51.7%
	10	47.1%	52.9%
	11	45.5%	54.5%
	12	47.2%	52.8%
2021	1	50.5%	49.5%
	2	54.9%	45.1%
	3	55.7%	44.3%
	4	56.1%	43.9%
	5	56.9%	43.1%
	6	56.1%	43.9%

Content provided by 

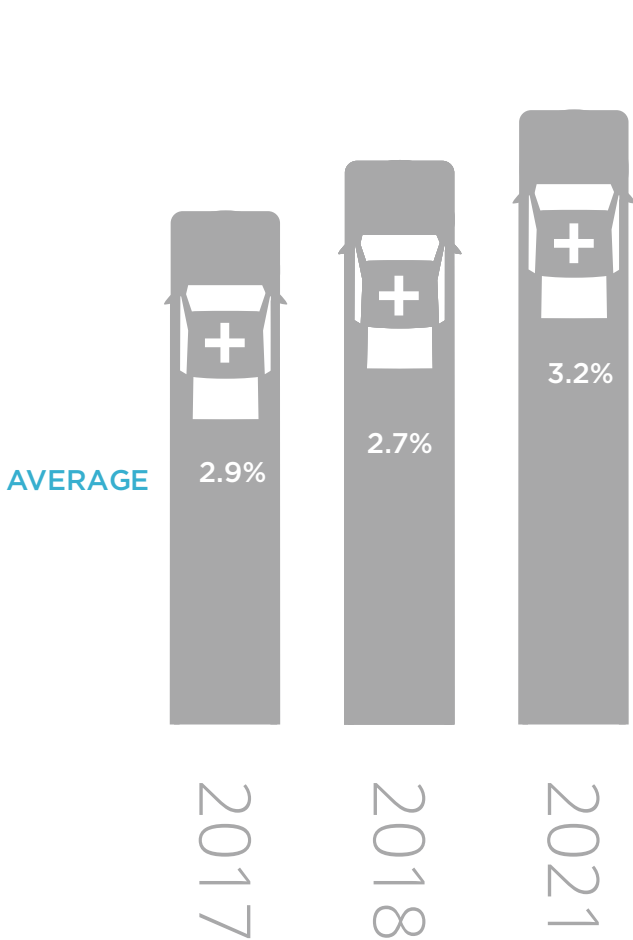
OPERATIONS

PATIENT CARE VISITS / PROVIDER / HOUR

The number of patient care visits increased in 2021 to an average of 3.2 patients per provider per hour from 2.7 in 2018. The majority of respondents (55%) indicated that this ratio is in line with their current expectations of productivity.

	2017	2018	2021
Average	2.8	2.7	3.2
Median	2.5	2.7	3.0

EMERGENCY DEPARTMENT REFERRALS OR TRANSPORT



Has this percentage ___ over the last 5 years?

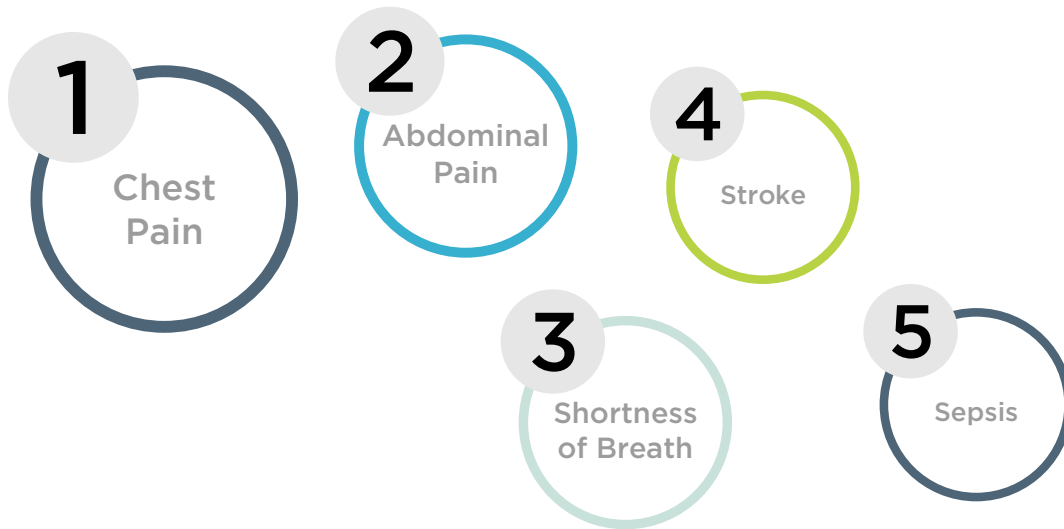
INCREASED	42%
DECREASED	9%
STAYED THE SAME	45%
I'M NOT SURE	4%

The leading reason provided for those who saw a decrease in ED transfers was training programs that increased the knowledge and skill set of providers.

Content provided by UCA Member Survey

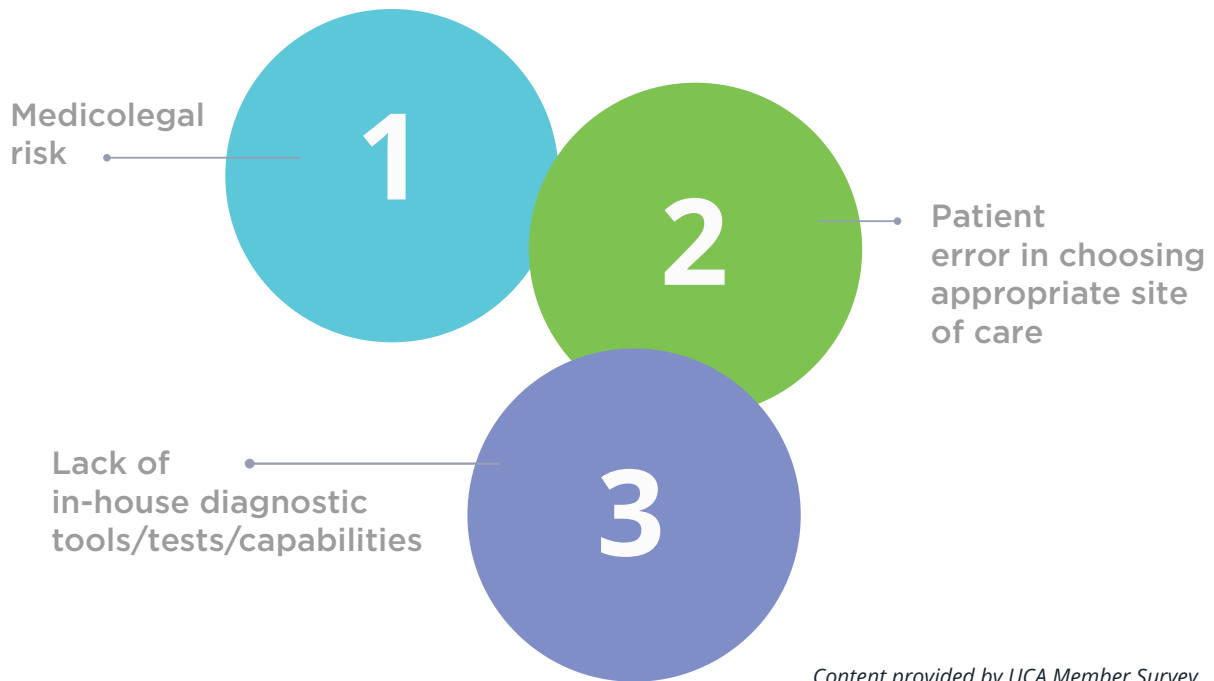
OPERATIONS

TOP 5 PRESENTATIONS THAT REQUIRED TRANSFER



Content provided by UCA Member Survey

TOP 3 REASONS FOR TRANSFER



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OPERATIONS

UTILIZATION CHANGES (PAST 5 YEARS)

	ADDED/ INCREASED USE	ELIMINATED/ DECREASED USE	NEVER HAD	NO CHANGE
CLIA Moderate Tests	22%	7%	33%	38%
Slit Lamp	2%	5%	30%	63%
EKG	2%	5%	0%	93%
Ultrasound	1%	2%	81%	15%
Splinting/Casting	7%	5%	0%	88%
RAD Techs on Staff	3%	6%	12%	80%
Procedures Overall	23%	9%	0%	68%

Content provided by UCA Member Survey

THANK YOU

AUTUMN 2021 CONTRIBUTORS



EXPERITY

Experity is a leading provider of integrated technology solutions that power urgent care. A trusted business partner of more than 5,700 on-demand healthcare practices nationwide, Experity's connected solutions include its patient engagement and clinic software (EMR and PM), billing software (RCM), teleradiology, and consulting services. Experity delivers a superior care experience to an average of 64,000 patients each day by driving innovation and efficiency for urgent care, primary care, hybrid clinics, and testing centers. A Warburg Pincus portfolio company, Experity is a fast-paced, high-growth company committed to improving the urgent care experience for everyone.

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MEDLINE INDUSTRIES, LP

As a global manufacturer and distributor of more than 350,000 medical products ranging from essential supplies to lab testing and equipment, we have what you need to succeed. Managing an Urgent Care is more challenging than ever before. With expertise and dedicated resources in both the Urgent Care and acute care settings, we're uniquely positioned to help you thrive, bringing our deep expertise in hospital systems to Urgent Care clinics.

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THANK YOU



URGENT CARE ASSOCIATION

In July 2021 UCA conducted a state of the industry survey gathering data on topics related to Staffing, Services, Provider Productivity and Emergency Room Referrals.

The survey was completed by 80 organizational respondents representing 1,329 urgent care centers. All organizational sizes (single center - 100+ center organizations) are represented in the results

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What should UCA focus on for the 2022 Benchmarking survey report? Using your mobile device hover over the QR code below to open a short survey and rank your selections.



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WINTER

COMING DECEMBER 2021