



Thought Leaders' Summit UCA 2018 Annual Convention & Expo May 8, 2018

Thank you for participating in the 2nd Annual Thought Leaders' Summit during the 2018 UCA Annual Convention & Expo. As leaders representing the top organizations in the urgent care industry, we value your expertise, time and contributions to this important discussion about the future of our industry. UCA, AMB Investments and SolvHealth will work together to ensure that your recommendations are incorporated into a final strategic plan supporting the continued growth of the urgent care sector.

During this year's event, some of the complex topics included:

1. *Identifying how best to respond to large mergers and acquisitions (e.g. CVS- Aetna, etc.) influencing the future of the urgent care industry.*
2. *2018 legislative priorities, the destabilization of the Affordable Care Act and potential strategies to mitigate the impact of negative legislative and regulatory policies on the industry.*
3. *UCA relationships with the Antibiotic Resistance Action Center at George Washington University and the CDC—industry challenges, response options and future convenings related to antimicrobial resistance and stewardship.*
4. *Guidance and thought leadership on how UCA can best support the industry to ensure ongoing success; Identifying unmet needs or barriers to industry success.*
5. *The expansion of Telehealth and other on-demand services within the urgent care industry, including payer influences.*

UCA appreciates your thoughtful, candid, insight during this invitation only meeting. After the event, we collected your responses and assessed some of the goals and objectives from the Summit. Some of the key strategies and UCA action items emerging from the Summit include:

1. Develop a strategic plan to support the urgent care industry and respond to CDC research findings related to antimicrobial resistance and stewardship.
2. Evaluate a list of future challenges identified by Thought Leaders during the Summit and assess how UCA can address industry needs.
3. Create an education campaign for consumers and payers on the benefits of emergency room diversion to the urgent care sector.
4. Educate federal and state lawmakers on the cost savings related to price transparency.
5. Leverage relationships with EMRs to improve data collection and analytics on the urgent care industry.
6. Continue to convene additional meetings/summits with industry leaders to plan future strategies.

In the coming months, you will hear more from UCA on how we can best support you and your organizations by focusing on the long-term sustainability of the urgent care industry. Over the next year, UCA will execute key strategies identified during the Summit. We will develop partnerships and allocate necessary resources to achieve the objectives on each priority. UCA will also, schedule follow up calls and meetings to provide updates and seek input from Thought Leaders in the next 6 months.

Key Discussion Points During Summit

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In this section, we highlighted some of the key discussion points around each issue. While some of the comments are direct quotes, to ensure confidentiality we have not attributed these comments to specific attendees. If there are additional key discussion points that you believe are important and warrant further discussion, please let us know.

Overview of Responses

1. *Thought Leaders were asked to identify some of the top challenges facing the industry. The following threats and opportunities were discussed:*
 - Education and Credentialing. Hiring, training and retaining talented staff emerged as a common challenge among Thought Leaders. As the industry continues to grow, so does competition for experienced primary care physicians. The credentialing process is also time consuming and costly for each new provider. Educating staff on new payer rules and policies, licensure requirements and other payer specific mandates are related industry challenges.
 - Competition and Encroachment. Increased competition combined with the volume of new urgent care centers is a major concern. The rate of consumer growth is still inconsistent and there should be a long-term strategy to attract new customers over the next 5 years. Urgent care centers should consider the competitive advantages of offering expanded services, including wellness, and other programs.
 - Data Collection/Analysis. UCA should launch an initiative to better communicate with payers by reporting urgent care “stories”. At this stage, payers do not have accurate information on urgent care centers and hospitals are often given credit for ER diversion strategies. Anecdotal evidence is not enough and UCA should establish partnerships with EMR companies to collect data from independent sources. Practice Velocity and DocuTap manage a significant share of urgent care data and we should leverage these relationships.
 - Payers and Reimbursement. Consumers benefit from seeking care at a higher-acuity urgent care center versus the emergency department. It is cost effective, more convenient for patients and reduces unnecessary emergency room visits. However, the costs savings to consumers are not always equally aligned with payment and reimbursement from payers (Blue Cross/Blue Shield was specifically cited).

2. *How should the urgent care industry respond to large pending mergers and acquisitions (e.g. CVS – Aetna Merger, etc.):*

Thought Leader Responses

- The threat of large scale mergers and acquisitions to the urgent care industry is minimal. Current mergers like CVS/Aetna are largely driven by the decline in retail sales and weakened demand for commercial real estate. CVS and other large retail chains are primarily interested in selling prescription drugs and they are utilizing their retail space to accomplish this objective.
- As the traditional primary care physician delivery model shifts to on-demand care, consumers (particularly those in a younger demographic group) will seek opportunities to receive all their services in one location. Retail stores are anticipating this trend and are offering a “one stop shop” of services (e.g. health care, prescriptions, other amenities).
- Delivery of primary care is often prohibitive in some markets due to the number of services required. Long-term investment, continuity of care, offering additional wellness services and referring patients if they require more than 4 services can increase efficiency and profitability.

3. *What are some potential strategies to mitigate the impact of legislative and regulatory policies on the industry?*

Camille Bonta, UCA Lobbyist updated Thought Leaders on pending legislation and regulatory policies. Price transparency and Medicaid/Medicare parity legislation were some of the key topics.

Thought Leader Response

There were specific recommendations related to price transparency legislation. A bipartisan group of U.S. Senators is working on new price transparency legislation. UCA has several position statements on price transparency and the role of urgent care in the health care system. Educating lawmakers on the benefits, cost savings and importance of urgent care in the continuum of care should be a top legislative priority in the next year.

4. *How should UCA respond to pending CDC research findings related to antimicrobial stewardship?*

Laurel Stoimenoff provided an update on the status of CDC research findings on antimicrobial stewardship in the urgent care industry and the UCA response. Participants received an overview of the findings, data collection protocol and were updated on follow up discussions with the CDC and the Antibiotic Resistance Action Center.

Laurel noted that a number of key UCA members and CUCM will participate in a Summit with the CDC in July 2018. UCA is also hosting an Antibiotic Stewardship Symposium during the UCA Fall meeting in October 2018.

Thought Leader Responses

After a review of the research abstract, several participants questioned the data collection methods. The CDC data indicates that overprescribing is significantly less in retail clinics versus urgent care centers.

Participants noted that the retail industry has strict clinical protocols often managed by EMR controls. Others speculated that prescribers at retail clinics may alter protocols through ICD-10 selection where UCCs tend to allow much greater freedom to practice, prescribe and diagnose. This could account for the difference in the research findings since the actual percentage of total patients receiving an antibiotic was similar in the two settings.

While UCA has taken steps during the past few years to educate the industry on antibiotic stewardship, Thought Leaders collectively agreed that UCA should craft a detailed response to the research and commit to taking definitive action to reduce overprescribing and promoting antibiotic stewardship. They approved the following actions and requested that UCA follow up with next steps:

1. Share details of CDC research (abstract) with the Thought Leaders (it remains confidential until JAMA IM publishes it)
 2. Work with EMRs to collect related data on antibiotic prescribing in urgent care
 3. Support UCA, UCF and CUCM in developing new strategies, resources and certificate/accreditation programs
 4. Support the creation of a public education campaign that is similar to European standards of care/prescribing recommendations
 5. Collaborate with retail medicine
 6. Create a shared agreement to promote antibiotic stewardship with the top 20 urgent care centers; CEOs and/or CMOs should sign the agreement.
5. *What is the impact of the expansion of Telehealth and other on-demand services within the urgent care industry? How have payers influenced the industry on these new services?*

Thought Leader Responses

- The telemedicine industry is growing and UCA and the urgent care industry should develop long-term strategies to capture a share of this market. However, current technology is limited and the current video-based “virtual visit” model has not replaced the demand for personal visits. Until the industry manages to increase its penetration into the primary care market, telemedicine is not a current threat to the urgent care industry.
- The retail market and some larger urgent care centers have developed models for integrating telehealth services. At this stage, most payers are providing limited reimbursement for services and technology investment costs are high. Telehealth services will continue to be limited across the urgent care industry until it becomes more consumer directed and reimbursement models increase profitability.

Final Comments

UCA will finalize key strategies and develop a timeline for executing proposed initiatives discussed during the Summit. In addition, over the next few months, UCA will provide timely updates on all activities related to the upcoming release of CDC research on antibiotic stewardship in the urgent care industry.

Thank you again for your participation in the 2018 Thought Leaders' Summit. Your participation, insights and expertise were invaluable and we are grateful for your contributions to this discussion on the future of our industry. UCA and its partners, AMB Investments and Solv Health, will continue to evaluate opportunities to support the delivery of on demand medicine and ensure that urgent care is an essential component of the healthcare continuum and population health now and in the future.

If you have any additional comments or recommendations, please let us know.

With gratitude,

Laurel Stoimenoff, CEO, UCA