

A Q&A with Tine Hansen-Turton of Convenient Care Association



John George

Tine Hansen-Turton

Convenient Care Association was formed in 2006 to give a voice to the growing number of retail-based health clinics, the group had 75 potential members. Today, the number of retail clinics across the country has swelled to about 1,450. Tine Hansen-Turton, the association's president as well as CEO of the National Nursing Centers Consortium, talked recently with Philadelphia Business Journal Senior Reporter John George about the retail-health clinic industry's growing niche in the health-care industry.

Q. How has the industry evolved since the association was formed?

I've been in health care for 20 years. This is probably the first model we've seen in the country where consumers took such a liking to it early on. This really is the consumer-driven model. The first couple of years it was primarily a cash model. Consumers pushed the insurers [to cover care at the clinics]. Today there's not an insurer that doesn't contract with these clinics. The clinics are keeping people out of emergency rooms when they can't see their family doctors. ... We're at almost 1,450 clinics now and we expect that number to double over the next five years.

Q. Most of the clinics in the region are in the suburbs and not in the city. Why?

You need to have enough space in the retail settings to house a clinic. We have had an issue in cities like Philadelphia that are older. Most of the pharmacies are smaller. The newer stores that are being built by the retail pharmacies in cities and suburbs have larger footprints, so you will see more clinics. Clinics eat into retail space, which is precious in a retail setting. We are also seeing new supermarkets that are being built with space for pharmacies and clinics. There's a trend locally and nationally to look a retail not in a traditional sense, but in a way that can include health care.

Q. It's clear health systems are moving into this space.

We're taking more call from hospitals. There's interest by hospitals in partnering with the larger operators of health clinics and in determining whether they can open and run these kind of clinics by themselves.

Q. Often when I go into a pharmacy these clinics aren't all that busy. Do they have ebbs and flows?

Early on in the model we needed to get more volume. These days the clinics are more busy. You will always see more people in the morning, lunchtime and early evening. It follows the trends of the work day. Weekends are also very busy. The clinics are busy during flu season. They are busy during the summer with sports physicals. Overall, the clinics are doing very well volume-wise. We're over the hump to see if this model works. It works.

Q. Where is the industry headed?

With the onset of the Affordable Care Act [and with more people with health coverage] we will need so many more primary-care spots that we don't have at this point in time. This industry is well-positioned to be a partner with a hospital or primary-care physicians. Everybody is going to be looking at whether people are getting care when they need it at the right place. n

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