



A publication from C.S. Mott Children's Hospital, the University of Michigan Department of Pediatrics and Communicable Diseases, and the University of Michigan Child Health Evaluation and Research (CHEAR) Unit

Retail Clinics: An Emerging Source of Health Care for Children

Retail clinics, also called in-store or convenient care clinics, began to appear in 2005 and now number more than 900 nationwide. Retail clinics sit within other retail settings — such as pharmacies, supermarkets, or discount stores — and offer health care for health problems such as minor rashes, sore throat, pink eye, ear infections, and bladder infections. Some retail clinics also offer preventive care, such as vaccinations and sports and camp physicals.

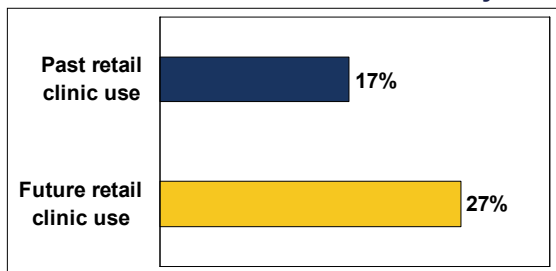
Retail clinics advertise convenience for consumers, short wait times without a need for an appointment, and prices lower than emergency departments and urgent care clinics. On the other hand, groups such as the American Academy of Pediatrics have been critical of retail clinics because they can draw children away from their usual doctors' offices, thereby disrupting communication between parents and physicians about children's health.

In April 2008, the C. S. Mott Children's Hospital's National Poll on Children's Health examined retail clinics as a source of health care for children.

Past and Future Use of Retail Clinics for Children

The Poll found that 29% of parents nationwide report having a retail clinic in their community. Of parents with a retail clinic in their community, about 1 out of 6 parents has taken their children to a retail clinic for care. Furthermore, about 1 in 4 parents is likely or very likely to use a retail clinic for their children in the future (Figure 1).

Figure 1. Use of Retail Clinics by Children with a Retail Clinic in Their Community



Source: C.S. Mott Children's Hospital National Poll on Children's Health, 2008

Past and future use of retail clinics for children did not vary by child's insurance status or by region of the country.

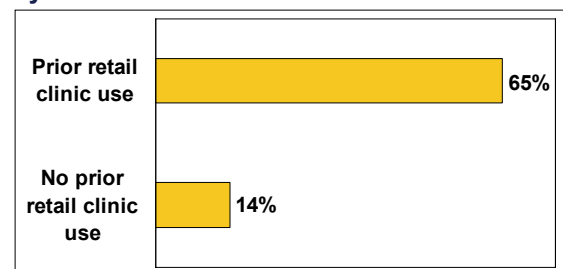
Report Highlights

- **29% of parents report having a retail clinic in their community.**
- **In communities with retail clinics, 1 out of 6 parents have used them for their children.**
- **1 out of 4 parents would have taken their children to the emergency room, if the retail clinic was not available.**
- **78% of retail clinic visits were covered at least in part by health insurance.**

Likelihood of future retail clinic use for children was strongly linked to whether children had already used a retail clinic for care (Figure 2). Nearly 2 out of 3 parents whose children had already used a retail clinic said that they were likely or very likely to use a retail clinic again for care.

Among parents who have *never* used a retail clinic, but have one in their community, one out of seven indicated that they are likely or very likely to use a retail clinic for their children in the future.

Figure 2. Likelihood of Future Use of Retail Clinics by Children with a Retail Clinic in Their Community



Source: C.S. Mott Children's Hospital National Poll on Children's Health, 2008

Alternative Sources of Health Care

Parents who had used retail clinics for their children were asked where they would have taken their children for care if the retail clinics had not been available. Nearly one-half of parents would have taken their children to a doctor's office, and more than one-quarter said they would have taken their children to the emergency room (Table 1). Most of the remainder would have taken their children to an urgent care clinic. Very few would have foregone care entirely.

These patterns were not different for children with insurance versus those without.

Table 1. Where Children Would Have Gone for Health Care If Retail Clinic were NOT Available

Doctor's office	49%
Emergency room	27%
Urgent care	22%
Would not have gone anywhere	1%

Source: University of Michigan, National Poll on Children's Health, 2008

Overall, 7 out of 10 parents who had used retail clinics for their children said they considered taking their children to the doctor's office. But 40% said they could not get an appointment at the doctor's office, and 46% said they wanted to take care of their children's problem more quickly.

Payment for Retail Clinic Visits

Retail clinics have become known as places where the uninsured can get health care at relatively low cost. But most retail clinics also contract with health insurance plans, so that patients with insurance can also get care in the retail clinic setting and their plans will pay for part or all of the visit.

In this Poll, more than three-fourths of all retail clinic visits for children were covered, at least in part, by health insurance companies. In fact, 40% of all visits were covered in full by health insurance (Table 2).

Table 2. Payment for Child's Last Visit to a Retail Clinic

Insurance covered full cost of visit	40%
Insurance covered partial cost of visit	38%
Parent paid out of pocket for the visit	22%

Source: University of Michigan, National Poll on Children's Health, 2008

Implications

By early 2008, more than one-quarter of households with children in the United States reported having a retail clinic in their communities. The rate of retail clinic use by these households with access (1 in every 6) signals that retail clinics are an emerging source of health care for children.

We found in this Poll that most parents who have used retail clinics for their children expect to use them again. We also found a few reasons why this may be the case: the majority of retail clinic visits are paid for, at least in part, by health insurance, and they offer a timely and accessible alternative to care at their children's usual doctor's office.

One of the biggest questions about retail clinic use is whether children would have gotten care anyway at some other health care location, or whether retail clinic visits are essentially "extra" care. Overwhelmingly, the results of this Poll indicate that retail clinic visits are a substitute for visits to other locations, especially doctors' offices and emergency rooms.

Because the costs of retail clinic care are less than care in emergency rooms for the same health problems, these results may be welcome news as families and health insurance plans struggle with high health care costs. On the other hand, when retail clinic visits replace care that would have been provided at doctors' offices, questions arise about how well care is coordinated across different sites. Unless doctors' offices convince parents that they are as convenient and accessible as retail clinics, we are likely to see parents opting for retail clinic care in the rapidly increasing number of communities where such clinics have opened.

Data Source

This report presents findings from a nationally representative household survey conducted exclusively by Knowledge Networks, Inc. for C.S. Mott Children's Hospital via a method used in many published studies. The survey was administered from April 11-29 to a randomly selected, stratified group of adults aged 18 and older (n=2,064) with and without children from the Knowledge Networks standing panel that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 53% among panel members contacted to participate.



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