

Urgent  
Care  
Association  
Of  
America



## Urgent Care Industry Information Kit

2011

Urgent care centers provide walk-in, extended hour access for acute illness and injury care that is either beyond the scope or availability of the typical primary care practice or retail clinic.

**Urgent Care Association of America**  
[www.ucaoa.org](http://www.ucaoa.org)

# About Urgent Care Centers

Urgent care centers provide walk-in, extended hour access for acute illness and injury care that is either beyond the scope or availability of the typical primary care practice or retail clinic. Some of the most common conditions treated are fevers, upper respiratory infections, sprains and strains, lacerations, contusions, and back pain. Most centers also treat fractures, can provide IV fluids, and have x-ray and lab processing onsite.

They are typically staffed with physicians, and may also have physician assistants, nurses, nurse practitioners, medical assistants and radiology technicians working with patients. They typically open between 8 and 9am, and close between 7 and 9pm on the weekdays (and somewhat earlier on weekends).

Urgent care centers are usually located in freestanding buildings, and the majority of centers are independently owned by physicians or groups of physicians. About 25 percent are owned by a hospital system – and most of those are located off the main hospital campus.

In most states, urgent care centers are licensed in the same way as a typical physician practice – there is not separate licensure.

Urgent care centers may also provide other healthcare services in addition to treating common and acute illness and injury. Many centers provide occupational medicine services, travel medicine services and sports and school physicals.

## Integration with Primary Care

UCAOA recommends that all individuals have a primary care physician and supports the American Academy of Family Physician's concept of a "medical home." While some urgent care centers formally provide ongoing primary care, many centers do not and refer patients to a local physician group to serve as their primary care provider.

## Integration with Emergency Care

Urgent care centers are NOT freestanding emergency departments. They are not equipped to treat life-threatening emergencies, nor provide assistance for labor and delivery. Anyone in active labor or with a major injury should immediately seek treatment in the nearest emergency room.

## Integration with Retail Clinics

Urgent care centers are NOT the same as in-store retail clinics. Urgent care centers treat a broader scope of services and ages (most retail clinics' minimum age is 18 months) than retail clinics, and have a different staffing model (primarily physicians vs. primarily NP's). Most retail clinics and urgent care centers in a community have a good referral relationship.

# Industry Statistics

Approximately **8,700** centers in the U.S.  
*center*

*week*

**85%** are open 7 days/week

Average of **342** weekly patient visits *per*

*Nearly* **3 million** total visits *per*

Over **150 million** visits *annually*

**81.1%** of centers open **8:00 AM** or earlier  
and **90.6%** close after **7:00 PM**

## Time in Operation

5+ years	53%
3-5 years	26%
1-2 years	12%
Less than 1 year	9%

## Ownership

Corporation	13.5%
Physician/group of physicians	50%
Non-physician individual	7.7%
Hospital	
Franchise	

## Locations

Urban	25%
Suburban	55%
Rural	20%

**Wait Times** to see a physician, nurse practitioner or physician assistant:

<b>57%</b>	Less than 15 minutes
<b>36%</b>	Between 15 and 45 minutes
<b>6%</b>	More than 45 minutes

## Physician Specialties

Family Physicians	54.3%
Emergency Medicine	21.7%
Internal Medicine	15.2%

**65%** of centers have at least one physician on site at all times

*Data taken from the 2008 and 2010 Benchmarking Studies - see "References" on page 5 for sources.*

# About the Urgent Care Association of America

**The Urgent Care Association of America (UCAOA)** was founded in 2004 and represents over 3,200 professionals working in urgent care.

UCAOA serves an international field, joining together the over 8,700 urgent care centers in the USA and across the world including Australia, Canada, Hungary, Ireland, Israel, Mexico, and New Zealand.

UCAOA provides educational programs, the monthly Journal of Urgent Care Medicine ([www.jucm.com](http://www.jucm.com)), and a variety of different resources for starting a new urgent care center, providing clinical care in the urgent care setting, and running a successful urgent care practice.

UCAOA established national criteria for urgent care centers, including a Certified Urgent Care Center designation. UCAOA also partners with The Joint Commission in their Accreditation programs for urgent care centers.

UCAOA is headquartered in Warrenville, Illinois, a suburb of Chicago.

## Mission

The Urgent Care Association of America exists to provide leadership, education and resources for the successful practice of urgent care.

## Vision

To be the catalyst for the recognition of urgent care as an essential part of the health care system.



# Contacts

**Lou Ellen Horwitz, MA**  
Executive Director  
[lorwitz@ucaoa.org](mailto:lorwitz@ucaoa.org)  
(877) 698-2262

**Marc R. Salzberg, MD, FACEP**  
President, Board of Directors  
[msalzberg@ucaoa.org](mailto:msalzberg@ucaoa.org)

# References

**2008 Urgent Care Benchmarking Study Results.** April 10, 2009.

All data in this report comes from a study conducted by the Institute for Health Policy at Massachusetts General Hospital and originally published as: Weinick, Robin M., Steffanie J. Bristol and Catherine M. DesRoches. 2009. Urgent Care Centers in the U.S.: Findings from a National Survey. *BMC Health Services Research*.

**2010 Urgent Care Benchmarking Study Results.** April 10, 2009.

[http://www.ucaoa.org/resources\\_stats.php](http://www.ucaoa.org/resources_stats.php)

All data in this report comes from a study conducted by Professional Research Consultants, Inc (PRC) based in Omaha, Nebraska.

**“National Hospital Ambulatory Medical Care Survey: 2006 Emergency Department Summary”**

*National Health Statistics Reports (Centers for Disease Control)*. August 8, 2007.  
<http://www.cdc.gov/nchs/data/nhsr/nhsr007.pdf>

**Expenses for a Hospital Emergency Room Visit, 2003.** Agency for Healthcare Research and Quality (AHRQ). January, 2006. [http://meps.ahrq.gov/mepsweb/data\\_files/publications/st111/stat111.pdf](http://meps.ahrq.gov/mepsweb/data_files/publications/st111/stat111.pdf).

**Comparing costs and quality of care at retail clinics with that of other medical settings for 3 common illnesses.** Mehrotra A, Liu H, Adams JL, Wang MC, Lave JR, Thygeson NM, Solberg LI, McGlynn EA. September 1, 2009. *Annals of Internal Medicine*. 151(5):321-8.