

# Retail Health Care Clinics Overview & Atlas™

A Vimo Research Group™ Report

Expert, independent and objective health care industry analysis

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# Content

## 1. WHAT ARE RETAIL CLINICS?

- History of the Industry
- Partnerships

## 2. WHAT MAKES RETAIL CARE DIFFERENT?

- Planning
- Providers
- Ailments

## 3. THE GOOD AND THE BAD

- Advantages
- Disadvantages
- Price Transparency
- Personal Health Records

## 4. WHAT RETAIL CLINICS MEAN FOR YOU

- Retailers
- Nurses and Physician Assistants
- Primary Care Physicians
- The Health Care Industry
- Insurance Companies
- Employers and Employees
- The Uninsured
- You

## 5. REFERENCES

## 6. APPENDIX: RETAIL CLINICS IN THE UNITED STATES

## Introduction and Objectives

A lot is changing in health care these days. New procedures and medications are being discovered every day. Health insurance now provides more options than the once-ubiquitous HMOs. And every change is accompanied by a new ethical dilemma that we haven't had to face before.

Through all of this change, the way people receive medical care has remained remarkably constant. You get sick, call your doctor for an appointment, go to the clinic or hospital, get called in from the waiting room, receive treatment and a prescription, fill that prescription at your local drugstore, and soon get better. But this process is hardly set in stone. A new type of health center, known as a convenient care or retail clinic, changes all but the first step of getting sick.

Welcome to Vimo's Retail Health Care Clinics Overview & Atlas™. This report provides a brief history and detailed analysis of this new type of health service delivery and its possible impact on the health care industry. The nationwide Atlas, to be published later in 2007 at <http://www.vimo.com/reports>, will provide a snapshot of the industry and allow viewers to interactively navigate around the country to see the clinics currently in operation and their prices. We plan to update the Atlas periodically. We invite consumers and insurers to comment on, blog, report errors and updates, and contribute additional information to the report.

## What Are Retail Clinics?

Retail clinics combine medical treatment with the retail approach of selling products at fixed prices to the consumer. These clinics are mostly located in shopping centers and drugstores, and are staffed by nurse practitioners, registered nurses, and physician assistants. Small, with a focus on preventive care rather than emergencies, they treat basic health problems like colds, rashes, and minor injuries. They also offer immunizations, physicals, and preventive health screenings. If patients need more advanced care, retail clinic staff can refer them to a primary care physician or specialist, or give them a prescription. The average visit is walk-in and takes about 15-25 minutes [6].

**The retail clinic industry began in 2000, when QuickMedX opened its first clinics. ... By the end of 2008, industry experts expect several thousand centers to be operating.**

### History of the Industry

The retail clinic industry began in the Minneapolis-St. Paul area in 2000, when QuickMedX (later MinuteClinic) opened its first clinics on the premise that there was a problem in access to medical care, rather than availability [6, 15]. They sought to fix this problem in terms of place, time, and price - with locations that were easy to access, clinicians who were available at times convenient to the consumer, and prices that were affordable. Retail clinics started by treating a very limited number of health problems and slowly built up their repertoire to include most basic illnesses and injuries [10]. From their initial cash-only policy, many convenient care companies also contract with major insurers [6].

Today, nearly thirty of these companies operate more than 500 clinics in the United States [14]. While the clinics have reached almost every state, they are concentrated in the Southeast and Midwest. They are growing rapidly - by the end of 2008, industry experts expect several thousand centers to be operating [9, 10, 11, 14, 17]. The Convenient Care Association, or CCA, was founded in August 2006 to unite and standardize these clinics [6].

### Partnerships

The biggest convenient care companies include MinuteClinic, RediClinic, and Take Care Health Systems. Each company has many branches, mostly located in and around shopping centers, drugstores, and major retailers like Wal-Mart and Walgreens. Retail clinic companies started by simply leasing space within the

store, but many now have contractual ties with their retailers and actively work together.

Working in retail stores gives retail clinics one way of expanding their clientele, but several clinics also work with major insurance companies like Aetna, CIGNA, and United Healthcare. Similar to the retail partnerships, affiliations with insurance companies began with the insurer adding retail clinic visits to their coverage but have now progressed to joint promotions and other cooperative efforts [15]. Whether a visit is covered by insurance depends on the insurer, the clinic company, and the state.

## What Makes Retail Clinics Different?

While many aspects of retail clinics are similar to traditional health settings - an in-person consultation with a professional, the possibility of a prescription, and use of technology in medical procedures and records, to name a few - there are a number of important differences. In some cases, these differences affect the method and quality of care you receive. In other cases, the changes are more logistical.

### Planning

One of the main differences between the two types of care is the amount of planning required for a visit. Traditional clinics are appointment-based and, depending on the treatment you need and how busy your provider is, can require days or weeks of advance planning. Retail clinics, on the other hand, do not require appointments. The flip side is that they can have long lines.

### Providers

In the traditional health system, you have a primary care physician who you see for regular checkups and when you get sick or need special care. This doctor is familiar with you both as a person and as a patient, at times for as long as decades. In addition to training in treatment, your primary care physician's medical school education has taught him/her to cultivate and use this patient-doctor relationship to improve your care.

Convenient care differs in a number of important ways. First, the providers are not medical doctors (MDs); they are nurse practitioners (NPs), registered nurses (RNs), and physician assistants (PAs). While these professionals do hold master's-level degrees in their fields, their training is still shorter and less extensive than that of MDs [1,6]. Retail clinic licensing varies by state, but most states require some kind of affiliation with a medical doctor, whether by always being on-site or by being available by phone for consultation [11].

**Convenient care differs in a number of important ways. First, the providers are not medical doctors. ... Second, convenient care eliminates the ongoing nature of the patient-doctor relationship.**

Second, convenient care eliminates the ongoing nature of the patient-doctor relationship [1]. Chances are, you will see a different provider each time you visit a clinic, and they will not know your health history. This is why retail clinics can do away with appointments; they only have to ensure that *someone* is available when you need care, not your particular provider. Depending on your health condition, this may or may not be a concern.

This lack of continuity has an important consequence for medical records.

Traditional health settings keep and update your chart in their offices, assuming that you rarely, if ever, visit outside providers for treatment. In contrast, retail clinics focus on you as the center of the system, instead of orienting the system of treatment and record around your particular primary care office. The basis of this is a personal health record to which you sign in electronically every time you visit a retail clinic. Nurses can access this record during your appointment, and use the results of your past treatment even if they did not provide it. Efforts are currently in place to standardize these records between convenient care and primary care providers [2].

### Ailments

Part of the philosophy behind retail clinics is that they treat the simplest and most common health problems quickly and efficiently, to keep them from using up valuable physician time and prevent them from escalating into more serious issues. By definition, then, convenient care clinics address only a limited list of illnesses and injuries that licensed nurses and PAs are well qualified to treat [6]. In contrast, traditional clinics and hospitals treat a much larger variety of health problems, including those that are rare or more severe.

Retail clinics also rely more on the patient’s own awareness and initiative. Typically, a patient comes in with a minor problem like an ear infection or a sprained ankle and gets treated specifically for that problem. Prices are predetermined and printed as in a takeout restaurant, and the patient’s role is to “order” the treatment he/she needs. Traditional clinics, on the other hand, treat the patient rather than the problem, and often detect and alleviate issues that the patient was not even aware of [3].

Table 1. Major differences between traditional and retail clinics.

	Traditional Settings	Retail Settings
Planning	Appointment-based	No appointment needed
Providers	Primary care physician	Nurses and physician assistants
Continuity	Primary care physician every time	Different provider every visit
Record system	Physician-centered	Patient-centered
Scope	Broad variety of ailments	Simplest and most common ailments
Patient role	Seeks treatment in general	Chooses a specific treatment

# CCA Standards

In response to concerns about these and other differences between convenient care and traditional clinics, the Convenient Care Association developed a set of ten mandatory standards for every clinic they license. These rules, established in March 2007, standardize these clinics in relation to each other and help define the role of retail clinics in the existing health care system [5, 6].

- Hiring thoroughly credentialed providers, with rigorous background checks
- Monitoring quality on an ongoing basis
- Building relationships with traditional providers and hospitals to ensure continuity of care
- Encouraging patients to have a primary care provider and making appropriate referrals
- Compliance with applicable OSHA, CLIA, HIPAA, CDC, and ADA standards
- Providing patients with health promotion and disease prevention education
- Using Electronic Health Records to make care efficient and allow patients to share information
- An environment that meets standards for quality patient care, infection control, and safety
- Emergency response procedures and relationships with local providers in case of need
- Empowering patients to make informed choices about their health care and costs

## The Good and the Bad

As with any system of health care delivery, retail clinics have both advantages and disadvantages. Being aware of these can help you choose when to visit a retail clinic and when to see your primary care physician.

### Advantages

As their name implies, convenient care clinics are convenient in a number of ways. For many people, the shopping centers and drugstores they are located in are closer to home than traditional clinics and hospitals [13]. Being in a store with a pharmacy - as most retail clinics are - also allows patients to fill their prescriptions immediately, without making a separate trip. It also lets them combine clinic appointments with other errands they might have to run [2].

The convenience also applies to time. Drugstores are usually open on weekends and outside business hours, allowing students and people who work during the week to visit when they would like [17]. Lines are generally short, and the store setting may provide waiting patients something to do while they wait.

Widespread use of retail clinics may also shorten traditional clinic, urgent care, emergency room, and hospital lines in the long term, since many people who would visit these centers will be able to get treatment at retail clinics [13].

In addition to being convenient, these clinics have potential health benefits as well. Not needing an appointment allows patients to get treatment in a more timely fashion, before minor problems escalate into major ones [11]. They also provide a good alternative for patients who might not otherwise seek treatment [12]. According to one poll, more than 90% of patients are satisfied with the care they receive [3].

Financially, convenient care treatment tends to be less expensive than traditional treatment. Reasons for this include the lower cost of paying nurses and physician assistants as compared to medical doctors. These reduced costs can have benefits for patients who use health insurance to pay for retail clinic visits. Since the visit costs the insurer less, these savings can be, and often are,

passed on to the beneficiary in various ways [13, 15]. The price transparency of retail clinic treatment, still fairly rare among doctors, gives patients and the health care industry in general a chance to know how much money they are spending on treatment, and decide whether they are spending it as efficiently as possible.

Through the personal health record, retail clinics are able to compile, store, and access information easily and discreetly. Most retail clinics have kiosks where the patient checks in electronically for treatment [2], and their record of treatment and conditions is then visible to their provider, providing some continuity to the process.

### **Disadvantages**

Increasing the convenience of medical treatment may come at the cost of increased risk. While NPs are well-qualified professionals, they are not doctors, and this makes some question the quality of care, particularly for the most susceptible patients [13]. A few states require a doctor to be on site [13], but even in these states, nurses and physician assistants provide most treatment, with doctors available only in case they are needed. When nurses cannot treat patients' problems, they refer the patient to a doctor or specialist, nullifying the convenience a clinic would normally provide.

As mentioned previously, retail clinics also rely much more on the patient's knowledge of his or her health history, current conditions, and medication [13]. Since the records are decentralized and, under the current system, may be incomplete, their information must be supplemented by what the patient knows. Often, patients do not have this information [13]; details like a long-ago illness or the exact name of a medication are easy to forget or, more dangerously, remember incorrectly.

Decentralizing medical records also allows for errors in sending information back to the primary care provider, which could be important if the retail clinic appointment resulted in a new prescription or treatment regimen that the primary care physician is not made aware of [1]. Many medications and other treatments are dangerous when combined, and having multiple providers in charge of one person's care increases the risk of these mistakes.

The lack of continuity in convenient care can also pose risks. Retail providers have a less comprehensive patient history to use in treatment, and they lack the ability to follow up on treatment [1, 15]. Whether something worked, and how well, is never checked, and so that information can never be used. While short-term illnesses can be effectively treated in one visit, that feedback becomes very important when it comes to chronic or long-term health issues [9].

Executives of retail clinic companies say that ideally their services will be used in addition to primary care, not as a replacement [4, 15]. Falsely believing that visiting a retail clinic every so often is just as comprehensive as regular primary care visits can have unintended consequences [3]. Retail clinics treat only what the patient thinks to ask for, which works well when symptoms are obvious and do not stem from a deeper problem, but is not effective when problems are subtler and the patient may not even realize there is a health risk. The primary care system provides an expert who can ask the right questions and bring problems to attention.

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Finally, operating a clinic inside a store or shopping center can cause problems. Since the drugs being recommended or prescribed are often sold in the store, there might be pressure on nurses to prescribe those drugs, which could cause a conflict of interest [17]. One study found that patients who visit retail clinics spend slightly more on medication than those who visit traditional clinics, although this might be because retail clinics tend to prefer brand-name drugs to generic brands [13]. There are also public health concerns about having many sick, possibly contagious people roaming about a store, instead of staying in a waiting room as in traditional clinics [1].

Because they are so different from the traditional health care system, retail clinics bring to light current issues relating to health care that we used to take for granted. As they become more prevalent over the next year or two, these issues will come more and more to the forefront of medical debate.

### Price Transparency

Historically, the health care industry has been tight-lipped about the prices of consultations, tests, and other procedures, maintaining that treatment quality is

intangible and that putting a price on health will reduce that quality by forcing providers to cut costs. And until recently, consumers didn't worry about how much their health care cost because it was covered by insurance [7].

But in the past several years, two things have happened. First, health insurance began shifting away from employer-sponsored coverage and strict managed care plans such as HMOs. People started shopping around and paying for their own insurance, often choosing high-deductible health plans (HDHPs) and the accompanying health savings accounts (HSAs). When individuals have to pay the first several hundred dollars of their yearly health expenses, they begin to question how much their treatment really costs.

Second, retail clinics began to proliferate and publish - even advertise - their prices, increasing pressure on physicians to make their own prices available to a cost-conscious public. Recently, a major west coast physician group, HealthCare Partners Medical Group, listened to that pressure and made their prices for several common procedures available for comparison [7].

Adding to physicians' dilemma is the fact that prices for retail clinic treatment and traditional clinic treatment often measure two different things. Patients visit a retail clinic with a specific problem already in mind, and the provider only gives them treatment. In contrast, patients do not necessarily visit traditional clinics already knowing what is wrong with them; instead, these visits provide both examination and treatment, and understandably cost more [7]. But consumers looking at just the number can easily miss this difference.

### **Personal Health Records**

As previously mentioned, retail clinics' answer to the care continuity problem is the electronic Personal Health Record, which theoretically contains a comprehensive history of one's health care. Although personal and physician- or hospital-centered records attempt to do the same thing, each system is operated differently, with its own merits and flaws. For example, physician-centered records can be limited because they lack mention of any outside treatment that the doctor's office is not informed of, but they are centralized, which makes them easy to keep track of and maintain. Personal records are the opposite. Being decentralized, there is no one person in charge of them. But they can be

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Several companies are trying to put together online personal health record systems that individuals can share with whomever they want [16]. Enrolling in these types of programs would pull together all of the person's available medical information from different physician- and hospital-centered records, and they would be able to add to it by entering information and scanning in any relevant documents [2]. Programs such as these centralize information by putting the patient in charge, a move that can be good and bad. It preserves privacy, which is a major concern with electronic records, and sidesteps problems of lost or destroyed paper records. But providing the individual with control of what is included and shared may increase the risk of inaccurate and incomplete data, especially for sensitive information.

In addition to these concerns, one of the main obstacles to a shift to person-centered medical records is the different ways physician and personal records are managed. An industry-level change from one to the other would require a total overhaul of the current system, and without knowing how well it will work, hospitals and traditional clinics are understandably nervous about making the switch.

## What Retail Clinics Mean For You

As we have seen, the consequences of this trend are complex, and have the potential to affect more than those who visit and work at convenient care clinics. So what does it all mean? The gist is that the effects of the emerging retail clinic trend are uncertain, but the phenomenon will likely have a meaningful impact on many participants in the health care system.

### Retailers

As hosts of convenient care clinics, retailers have almost as much to gain as the clinic companies themselves. The presence of a clinic brings in new customers - people seeking medical treatment who may not otherwise be at the store. If the

retailer has a pharmacy, people who have received prescriptions at the clinic will almost always fill them while they are there, providing the retailer with a captive audience. In addition, if the clinic has a line, idle patients are free to shop while waiting, which will also increase the retailer's revenue [11].

### **Nurses and Physician Assistants**

Providing nurse practitioners (NPs), registered nurses (RNs), and physician assistants (PAs) with more independence from physicians may benefit these professionals. First, there may be more jobs available, since providers will be able to work either in traditional settings or in retail clinics. Since this larger job market provides nurses and PAs with a choice in where to work, doctors' offices may have to compete for the staff they need, possibly by providing higher salaries or improved benefits. In general, the value of NPs, RNs and PAs could increase.

### **Primary Care Physicians**

In contrast, physicians' relative value in the health industry could be affected and they may have to adapt to a new competitive landscape [15]. By taking the simpler cases that physicians might normally deal with, retail clinics may leave physicians with the more complicated cases that tend to take more time and produce less revenue [10]. In addition, it is possible that physicians would have fewer patients in total, which would also lower revenue.

### **The Health Care Industry**

In addition to affecting individual health professionals, retail clinics have the potential to impact the structure of the health care industry. One significant change would seem to entail a decreased focus on the relationship between the doctor and the patient. Of course, this relationship will exist to a limited extent at the clinics, but it could be eroded at traditional clinics through patients who might have a primary care physician but go to retail clinics often [9].

The eventual results are hard to predict. It is possible, for example, that the system evolves in a manner that separates physicians and retail clinics into distinct domains, with retail clinics as a "first step" for treatment and referrals to physicians made only when needed. Alternatively, competition between

convenient care and traditional clinics may simply result in increased price transparency, enhanced competition, and lower prices.

### **Insurance Companies**

The lower costs of retail clinics have direct and indirect benefits for insurance companies. First, retail clinic treatments cost less than comparable treatments in a physician's office, lowering costs for the insurer and potentially for the consumer through lower insurance premiums [13]. Second, market competition between insurance companies provides opportunities for product differentiation, such as lowering co-payments for retail clinic visits or even eliminating co-payments completely [15]. Third, the accessibility of retail clinics may encourage patients to take care of their health problems in a more proactive, preventive manner, thus avoiding more serious and eventually costly claims [11].

### **Employers and Employees**

The possibility of lower insurance premiums could translate to lower prices for employers who provide health benefits to their workers. Additionally, expanded evening and weekend hours at retail clinics could encourage employees to seek treatment outside of business hours instead of making appointments during the working day [8].

### **The Uninsured**

Retail clinics may prove most attractive to the uninsured. Retail clinics place less emphasis on insurance payments - indeed, the retail clinic company QuickHealth does not work with any insurers [3]. Retail clinics' lower prices ensure that the uninsured have predictable access to affordable health care. In fact, one study by QuickHealth shows that people without health insurance are some of the primary beneficiaries of the retail clinic trend [3].

### **You**

Similar to the impact of retailing in many other industries, convenient care clinics put the power in the hands of you, the consumer. Empowering the consumer forces clinics - both traditional and convenient care - to streamline and improve the treatment they provide [15]. Retail clinics are easily accessible and

relatively inexpensive, providing a good alternative for those who want it. But like any other power, they come with the responsibility to choose wisely. Just like traditional practices, convenient care clinics are not perfect.

## References

1. American Academy of Pediatrics, Retail-Based Clinic Policy Work Group. "AAP principles concerning retail-based clinics." *Pediatrics*. Volume 118, Issue 6. Page 2561-2562. December 6, 2006.
2. Cassidy, Tricia. "Making health care convenient." *ADVANCE for Health Professionals*. November 7, 2006. Accessed online at <http://health-information.advanceweb.com/common/editorial/editorial.aspx?CC=79039>.
3. Cappozza, Korey. "Retail clinics catering to uninsured Hispanics." *California Healthline*. October 23, 2006. Accessed online at <http://www.californiahealthline.org/articles/2006/10/23/Retail-Clinics-Catering-to-Uninsured-Hispanics.aspx>.
4. CIGNA Health Care. "CIGNA HealthCare offers members convenient care." *Earthtimes.org*. June 19, 2007. Accessed online at [http://www.earthtimes.org/articles/show/news\\_press\\_release\\_124756.shtml](http://www.earthtimes.org/articles/show/news_press_release_124756.shtml).
5. "Convenient Care Association issues industry-wide quality and safety standards. *Business Wire*. March 28, 2007. Accessed online at [http://findarticles.com/p/articles/mi\\_m0EIN/is\\_2007\\_March\\_28/ai\\_n18768538](http://findarticles.com/p/articles/mi_m0EIN/is_2007_March_28/ai_n18768538).
6. Convenient Care Association. Accessed online at <http://www.convenientcareassociation.org>.
7. Girion, Lisa. "Physicians' group unveils its price list." *Los Angeles Times*. May 29, 2007. Accessed online at [http://www.mercurynews.com/business/ci\\_6010992](http://www.mercurynews.com/business/ci_6010992).
8. Health Leaders-InterStudy. "Retail-based clinics' popularity grows as major insurers embrace concept." *Earthtimes.org*. June 6, 2007. Accessed online at [http://www.earthtimes.org/articles/show/news\\_press\\_release\\_117746.shtml](http://www.earthtimes.org/articles/show/news_press_release_117746.shtml).
9. Hitti, Miranda. "Retail health clinics popular for kids." *WebMD Medical News*. April 20, 2007. Accessed online at

- <http://www.webmd.com/parenting/news/20070420/retail-health-clinics-popular-for-kids>.
10. Moran, Terry; Herman, Charles. "Future of health care or quick fix?" ABC Nightline. October 17, 2006. Accessed online at <http://abcnews.go.com/Nightline/PrescriptionForChange/story?id=2577785&page=1>.
  11. Richardson, Vanessa. "Retailers roll out low-cost health services." MSNBC. December 12, 2006. Accessed online at <http://www.msnbc.msn.com/id/16169509/>.
  12. Rosenbluth, Hal. "In rebuttal: Health clinics provide vital service." Pittsburgh Post-Gazette. November 7, 2006. Accessed online at <http://www.post-gazette.com/pg/06311/736157-109.stm>.
  13. Schmit, Julie. "Could walk-in retail clinics help slow rising health care costs?" USA Today. August 28, 2006. Accessed online at [http://www.usatoday.com/money/industries/health/2006-08-24-walk-in-clinic-usat\\_x.htm](http://www.usatoday.com/money/industries/health/2006-08-24-walk-in-clinic-usat_x.htm).
  14. Stouffer, Rick. "One-stop clinics gain in popularity." Pittsburgh Tribune-Review. February 25, 2007. Accessed online at [http://www.pittsburghlive.com/x/pittsburghtrib/business/s\\_494090.html](http://www.pittsburghlive.com/x/pittsburghtrib/business/s_494090.html).
  15. Sullivan, Drew. "Retail health clinics are rolling your way." Family Practice Management, American Academy of Family Physicians. Volume 13, Issue 5. May 2006.
  16. Thorpe, Jacqueline. "Attention shoppers: Flu shots in aisle 3." The National Post (Canada). December 18, 2006. Accessed online at <http://www.canada.com/nationalpost/financialpost/story.html?id=d4fa1ea7-4f06-45cf-b099-2507285ed4a7&k=5025&p=1>.
  17. WNT. "Walk-in medical clinics take retailers by storm." ABC News. October 19, 2006. Accessed online at <http://abcnews.go.com/WNT/PrescriptionForChange/story?id=2586216&page=1>.

## Appendix

The following list of retail clinic companies in the United States is a valuable resource for more information about the industry and the care it provides.

### **The Aero Clinic**

Web: <http://www.theaeroclinic.com>

Email: [info@theaeroclinic.com](mailto:info@theaeroclinic.com)

Phone: 770-996-2630

### **Aurora QuickCare**

Web: [www.aurora.org/quickcare](http://www.aurora.org/quickcare)

### **Care Plus Walk-In Clinic**

Web: [www.carepluswalkinclinic.com](http://www.carepluswalkinclinic.com)

### **(Geisinger) CareWorks**

Web: [www.careworkshealth.com](http://www.careworkshealth.com)

Email: [CCH@geisinger.edu](mailto:CCH@geisinger.edu)

Phone: 800-818-1276

### **Corner Care Clinic**

Web: [www.mindgenthealthcareclinics.com](http://www.mindgenthealthcareclinics.com)

Email: 866-605-4222

### **CheckUps**

Web: [www.checkupsusa.com](http://www.checkupsusa.com)

Email: [info@checkupsusa.com](mailto:info@checkupsusa.com)

Phone: 212-760-0050

### **Doctor's Walk-In Clinic**

Web: [www.dwic.org](http://www.dwic.org)

Phone: 813-289-8014

### **Early Solutions Clinic**

Web: [www.earlysolutionsclinic.net](http://www.earlysolutionsclinic.net)

### **Health Express Clinic**

Web: [www.healthexpressclinic.com](http://www.healthexpressclinic.com)

Phone: 720-289-1929

### **Lee Convenient Care**

Web: [www.leememorial.org/convenientcare/index.asp](http://www.leememorial.org/convenientcare/index.asp)

Email: [LCC@leememorial.org](mailto:LCC@leememorial.org)

Phone: 239-985-3525

### **MedBasics**

Web: [www.med-basics.com](http://www.med-basics.com)

Email: [info@med-basics.com](mailto:info@med-basics.com)

### **MediMin**

Web: [www.medimin.net](http://www.medimin.net)  
Email: [info@medimin.net](mailto:info@medimin.net)  
Phone: 623-321-1736

**Medpoint Express**  
Web: [www.medpointexpress.com](http://www.medpointexpress.com)  
Email: [webmaster@qualityoflife.org](mailto:webmaster@qualityoflife.org)  
Phone: 574-647-1690

**MinuteClinic**  
Web: [www.minuteclinic.com](http://www.minuteclinic.com)  
Email: [customercare@minuteclinic.com](mailto:customercare@minuteclinic.com)  
Phone: 866-389-2727

**My Healthy Access**  
Web: [www.myhealthyaccess.com](http://www.myhealthyaccess.com)  
Email: [myaccess@healthyaccess.net](mailto:myaccess@healthyaccess.net)

**Quick Access Family Healthcare**  
Web: [www.quickaccessmedical.com](http://www.quickaccessmedical.com)

**QuickClinic**  
Web: [www.quickclinic.com](http://www.quickclinic.com)  
Phone: 866-665-0010

**QuickHealth**  
Web: [www.quickhealth.com](http://www.quickhealth.com)  
Email: [info@quickhealth.com](mailto:info@quickhealth.com)  
Phone: 877-633-7842

**Ready Care Clinic**  
Web: [www.readycareclinic.org](http://www.readycareclinic.org)  
Phone: 815-633-4100

**RediClinic**  
Web: [www.rediclinic.com](http://www.rediclinic.com)  
Email: [info@rediclinic.com](mailto:info@rediclinic.com)  
Phone: 866-607-7334

**SmartCare Family Medical Centers HealthStop**  
Web: [www.smartcarecenters.com](http://www.smartcarecenters.com)  
Email: [info@smartcarecenters.com](mailto:info@smartcarecenters.com)  
Phone: 972-354-5700

**Solantic**  
Web: [www.solantic.com](http://www.solantic.com)  
Email: [webmaster@solantic.com](mailto:webmaster@solantic.com)  
Phone: 866-765-2684

**St. Mary's Convenient Care Centers**  
Web: [www.stmarys.org/body.cfm?id=181](http://www.stmarys.org/body.cfm?id=181)

**Sutter Express Care**  
Web: [www.sutterexpresscare.com](http://www.sutterexpresscare.com)

Email: [sutterexpresscare@sutterhealth.org](mailto:sutterexpresscare@sutterhealth.org)  
Phone: 800-972-5547

**Take Care Health Systems**  
Web: [www.takecarehealth.com](http://www.takecarehealth.com)  
Phone: 866-825-3227

**Target Clinic**  
Web: <http://sites.target.com/site/en/spot/page.jsp?title=clinic%5fhome>

**The Little Clinic**  
Web: [www.thelittleclinic.com](http://www.thelittleclinic.com)  
Email: [info@thelittleclinic.com](mailto:info@thelittleclinic.com)  
Phone: 615-425-4200

**Trinity MedXpress**  
Web: [www.trinityqc.com/body.cfm?id=1643](http://www.trinityqc.com/body.cfm?id=1643)  
Phone: 309-779-5000

## About Vimo

Vimo is the nation's first integrated comparison-shopping portal for healthcare products and services. On January 24, 2006 we launched a website that allows businesses and consumers to research, rate and purchase health insurance plans and Health Savings Accounts (HSAs), and choose doctors from across the country. Vimo brings together a variety of private and public data sources so that shoppers can find a physician and compare hospital prices for medical procedures. Vimo users can read and post reviews about any of the services or products available.