

Retail clinics less likely to be located in underserved communities

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Despite reports indicating that placement of retail clinics are determined by physician shortages and higher uninsured populations, these clinics appear to be located in more advantaged neighborhoods, according to a report in the May 25 issue of *Archives of Internal Medicine*.

"Retail clinics are medical clinics located within larger retail outlets that are usually staffed by nurse practitioners and supervised by an off-site physician," according to background information in the article. Retail clinics usually focus on urgent care and routine preventive services, such as immunizations. These facilities tend to be open on nights and weekends, usually provide service without appointments and tend to have lower prices than those charged by primary care physicians or emergency departments.

Craig Evan Pollack, M.D., M.H.S. and Katrina Armstrong, M.D., M.S.C.E., of the Leonard Davis Institute of Health Economics, University of Pennsylvania, Philadelphia, mapped locations of retail clinics as of July 2008 and linked them to the 2000 U.S. Census and 2008 Health Resources and Services Administration data to determine if the clinics are typically located in areas with higher medical need.

"A total of 930 retail clinics were geocoded to the continental United States. Eighteen states (37 percent) had no retail clinics, and 17 states (35 percent) had 25 or more clinics," the authors write. Five states had more than 50 clinics including Florida (112), California (90), Texas (85), Illinois (58) and Georgia (56). Retail clinics were located in 908 census

tracts within 247 counties. Ninety-six percent of counties with retail clinics were classified as metropolitan areas.

"Counties with retail clinics had lower rates of uninsured individuals (12.1 percent vs. 13.3 percent)," the authors write. "Compared with census tracts without retail clinics, those tracts with retail clinics had a lower percentage of black and Hispanic individuals, fewer rental units and lower rates of poverty. In addition, the census tracts had residents with higher median incomes and higher rates of home ownership."

"If retail clinics are determined to be a valuable and effective source of care, rethinking the distribution of these clinics may be an important avenue for improving their potential societal benefit," the authors conclude. "With nearly a third of chain stores located in medically underserved areas, the future expansion of retail clinics into existing stores could potentially improve access for underserved populations."

More information: Arch Intern Med. 2009;169[10]:945-949.

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