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New WSJ.com/ Harris Interactive Study Finds Satisfaction with Retail-Based Health Clinics Remains High

According to the American Public Health Association, there were approximately 700 retail-based healthcare clinics operating in the U.S. as of December 2007. These clinics, also known as convenience care clinics, are typically found in stores such as Walgreens®, Target® and Wal-Mart®, and are usually staffed by Nurse Practitioners and Physician Assistants.

According to the latest WSJ.com/Harris Interactive health care study, U.S. adults who have used these health clinics in a pharmacy or retail chain are generally pleased, as almost all are very/somewhat satisfied with the quality of the care (90%), cost (86%) and staff qualifications (88%). As in prior surveys on this topic, the biggest driver of satisfaction appears to be convenience, with 73 percent very satisfied and another 20 percent somewhat satisfied with the convenience of these clinics. These clinics continue to be a destination for comparatively routine services like vaccinations and care of respiratory infections, and while public acceptance is increasing, they not particularly appealing for attention to more serious conditions.

Additional results of the online survey of 4,937 U.S. adults conducted by Harris Interactive between May 2 and 6, 2008 for the Wall Street Journal Online's Health Industry Edition include:

- The use of retail-based health clinics has remained consistent over the past few years, with seven percent of U.S. households in 2005, five percent in 2007 and again seven percent in 2008 saying they have done so;
- Thirty percent of patients who use retail-based healthcare clinics do not have a primary care provider;
- U.S. adults believe retail-based healthcare clinics can provide low-cost basic services to people who cannot afford care (78%) and to anyone at times when doctors' offices are closed (81%);
- Although an increasing number say they are satisfied with staff qualifications, majorities are worried about the qualifications of the staff (65%) and that serious medical problems might not be accurately diagnosed (65%).

Richard Millard, Group President at Harris Interactive, said, "Advocates believe retail based clinics fill a gap in healthcare access for our nation of more than 40 million uninsured. On the other hand, organizations such as the American Medical Association are concerned that the quality of care could suffer, and that these clinics would not be held to the same standards as medical offices."

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The study also found that:

- Similar to last year, the clinics are most frequently used for vaccinations (40%) and treatments for a common medical condition like an ear infection or cold (39%);
- Use for preventive screening tests and physical exams for sports and school increased slightly this year;
- The biggest change from last year's results is that the percentage of adults whose health insurance covered some or all of the costs at the clinic went from 42 percent in 2007 to 62 percent in 2008. This reflects a trend in the industry of health insurance plans covering the services of retail-based clinics, and could also be related to the insured using the clinics more for the convenience factor.

Table 1
Perceptions of Retail-Based Health Clinics

"Major pharmacy and retail chains like CVS, Wal-Mart and Target, have opened health clinics in their stores. These clinics provide routine medical services like strep-throat tests, flu shots and sports physicals, without an appointment, for fees that range from \$25 to \$60 per visit. Based on what you know or have heard, to what extent do you agree or disagree with the following statements?"

Base: All adults

			Agree Strongly/ Somewhat (NET)	Agree Strongly	Agree Somewhat	Disagree Strongly/ Somewhat (NET)	Disagree Strongly	Disagree Somewhat	Not Sure
Onsite health clinics at retail stores provide busy people with a fast and easy way to get basic medical services.	2005	%	78	29	48	12	8	4	10
	2007	%	76	29	48	12	8	4	12
	2008	%	78	29	49	11	8	3	11
I would be worried about the qualifications of the staff that provides care in a health clinic not run by medical doctors.	2005	%	71	35	36	21	16	5	8
	2007	%	64	26	37	26	20	6	10
	2008	%	65	29	36	25	19	6	10
Onsite health clinics at retail stores can provide low-cost basic services to people who otherwise might not be able to afford care.	2005	%	75	33	41	13	10	4	12
	2007	%	76	33	43	11	8	3	13
	2008	%	78	34	44	10	7	3	13
Onsite health clinics are just another way for big companies to make more money.	2005	%	66	29	38	24	18	6	10
	2007	%	59	21	38	27	21	6	14
	2008	%	57	21	36	29	23	7	14
Onsite health clinics at retail stores can provide basic medical services to people at times when doctors' offices are closed, like evenings and weekends.	2005	%	83	38	45	8	5	3	9
	2007	%	80	36	44	7	5	2	13
	2008	%	81	37	44	7	5	2	12
I would be worried that serious medical problems might not be accurately diagnosed by someone working in an onsite health clinic in a retail store or pharmacy.	2005	%	75	35	40	16	13	4	9
	2007	%	68	30	38	22	18	4	10
	2008	%	65	29	36	25	19	6	10

Note: Percentages may not add up to 100 percent due to rounding.

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Table 2

Experience With Retail-Based Health Clinics

“Have you or has someone in your immediate family ever used an onsite health clinic in a pharmacy or retail chain like CVS, Wal-Mart or Target?”

Base: All adults

	2005	2007	2008
	%	%	%
Yes, have used an onsite health clinic	7	5	7
No, have not used an onsite health clinic	93	95	93

Table 3

Satisfaction With Retail-Based Health Clinics

“Overall, how satisfied were you with your or your family member’s experience using an onsite health clinic in a pharmacy or retail chain on the following items?”

Base: Used an onsite health clinic (n=313 for 2008)

			Very/ Somewhat Satisfied (NET)	Very Satisfied	Somewhat Satisfied	Not At All/ Not Very Satisfied (NET)	Not Very Satisfied	Not At All Satisfied	Not Sure
			Quality of care	2005	%	89	46	44	6
	2007	%	90	52	38	3	1	1	7
	2008	%	90	57	33	7	5	2	3
Cost	2005	%	80	42	37	12	12	*	8
	2007	%	80	52	28	8	4	4	12
	2008	%	86	52	34	9	8	1	5
Convenience	2005	%	92	61	31	2	2	-	6
	2007	%	83	63	21	4	2	1	13
	2008	%	93	73	20	3	2	1	4
Having qualified staff to provide care	2005	%	88	50	38	7	7	*	5
	2007	%	85	53	32	4	3	2	11
	2008	%	88	54	34	8	6	2	4

*Less than 0.5 percent

Note: Percentages may not add up to 100 percent due to rounding.

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Table 4

Reasons For Visiting An In-Store Clinic

“Thinking about the last time that you or an immediate family member visited an onsite health clinic in a pharmacy or retail chain like CVS, Wal-Mart or Target, what type(s) of medical services did you receive?”

Base: Used an onsite health clinic

	2007	2008
	N=112	N=313
	%	%
Vaccinations	44	40
Treatment for a common medical condition like an ear infection, cold, strep throat, skin rash or sinus infection	33	39
Preventive screening tests for conditions like high blood pressure, high cholesterol, diabetes or allergies	19	24
Physical exam for sports, school, camp, etc.	5	10
Received a referral to my family physician or the emergency room	5	8
Something else	26	16

Table 5

Insurance Coverage For Visits

“Did your health insurance cover some or all of the costs for the medical services you received?”

Base: Used an onsite health clinic

	2007	2008
	N=112	N=313
	%	%
Yes, my health insurance covered some or all of the costs	42	62
No, my health insurance did not cover any of the costs	36	23
Did not have health insurance at that time	22	16

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Downloadable PDFs of Wall Street Journal Online/Harris Interactive Health-Care Polls are posted at http://www.harrisinteractive.com/news/newsletters_wsj.asp.

Methodology

Harris Interactive conducted this online survey within the United States between May 2 and 6, 2008 among a national cross section of 4,937 adults age 18 and over. Figures for age, gender, race/ethnicity, education, income and region were weighted where necessary to align with population proportions. Propensity score weighting was also used to adjust for respondents' propensity to be online.

All sample surveys and polls, whether or not they use probability sampling, are subject to multiple sources of error which are most often not possible to quantify or estimate, including sampling error, coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments. Therefore, Harris Interactive avoids the words "margin of error" as they are misleading. All that can be calculated are different possible sampling errors with different probabilities for pure, unweighted, random samples with 100% response rates. These are only theoretical because no published polls come close to this ideal.

Respondents for this survey were selected from among those who have agreed to participate in Harris Interactive surveys. The data have been weighted to reflect the composition of the U.S. adult population. Because the sample is based on those who agreed to be invited to participate in the Harris Interactive online research panel, no estimates of theoretical sampling error can be calculated.

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