of the ACP’s medical service committee, said he wasn’t surprised by the findings for this population and for these three conditions. But he said he did not think the findings would translate to older patients or even similar age groups at retail clinics elsewhere in the United States. Retail clinics began in Minnesota and are well established there, according to the study authors.

The study is reassuring, Dr. Eijnes said in an interview, but “I don’t think it puts to rest the other issues and concerns.”

One concern is that the retail clinics may usurp or interrupt a patient’s relationship with his or her primary care physician. Both Dr. Eijnes and Dr. Eppler said that an acute care visit for a UTI, for example, provides an occasion for the physician to delve into other health issues, including chronic conditions. That would not occur at a retail clinic, they said.

Lead author Dr. Atee Mehrotra, of the University of Pittsburgh, said the potential for undermining the patient’s relationship with his primary care physician is a valid concern. He hopes to look at this aspect of retail clinics in future studies, Dr. Mehrotra said in an interview.

For this study, the costs were calculated by aggregating claims into episodes of care. Episodes were categorized according to where the first visit occurred. Retail clinic episodes were matched with episodes in the other settings. Overall, there were 15,170 episodes of care, with 2,100 occurring in retail settings, 6,211 in physician offices, 5,880 in urgent care centers, and 979 in emergency departments. The cost included the health plan reimbursement plus copayments.

To measure quality, the researchers created 14 indicators derived from various sources. Aggregate quality scores were calculated by dividing all instances in which recommended care was delivered by the number of times patients were eligible to receive care in each setting. The authors found that women and high-income individuals accounted for the greatest number of retail clinic episodes.

The cost of care was “substantially” lower in retail clinics, at $110, compared with $166 in a physician’s office, $156 in an urgent care center, and $570 in an emergency department. Total costs over 12 months were $1,236 for the retail clinic, $1,435 for the physician office, and $2,157 for the emergency department. The largest portion of the cost was for evaluation and management. Follow-up visits were similar across settings. Lab and imaging costs were lower in retail clinics, primarily because they weren’t ordered as often.

Of the total 15,170 episodes, there were only 11 hospitalizations; two of the hospitalized patients had first gone to a retail clinic.

The quality scores were almost the same across all settings. Both clinical quality and emergency care centers, with clinics meeting 63% of the measures, physicians 61%, and urgent care centers 63%.

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Overall, the number of uninsured Americans increased to 46.3 million in 2008, from 45.7 million the previous year. The new figures, which were released by the Census Bureau on Sept. 10, come from the Annual Social and Economic Supplement to the Current Population Survey. The survey asks questions about health coverage in the previous calendar year.

However, the data may underestimate the number of uninsured. David Johnson, chief of the Census Bureau’s Housing and Household Economic Statistics division, said that the Current Population Survey counts individuals as having insurance if they were insured during any part of the year. This could undercount individuals who lost employer-based coverage later in the year due to layoffs.

The Census data also showed that 7.3 million U.S. children (about 9.9%) went without health insurance coverage in 2008. This is the lowest rate and number of uninsured children in the United States since 1987, according to the data. The change may be due to more children gaining health insurance through government programs like the Children’s Health Insurance Program. The Census Bureau estimates about 33% of children were enrolled in some type of government health insurance program in 2008, up from 31% the previous year.

Number of Uninsured Rises to 46.3 Million but Rate Is Unchanged

BY MARY ELLEN SCHNEIDER

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