

Caring for your health in the middle of the night



Open all night, weekends and holidays

For your urgent care needs when
your doctor's office is closed

Fever, flu, fractures • Coughs, cuts, colds
Strep, sprains, stitches

- Saves time, usually takes less than an hour
 - Saves money, half the cost of the emergency department
- Friendly, compassionate and caring staff
 - Receive expert medical care
 - Most insurance accepted

Now open in Thornton

3655 East 104th Avenue

1 block west of Colorado Blvd.

Call or come in, no appointment needed



303-861-7878

Because your health isn't just 9 to 5

www.afteroursinc.com



Afterours

URGENT CARE CENTERS

*All night. Weekends.
Because health
isn't just 9 to 5.*

Fever. Flu. Fractures.

**Monday-Friday 5 PM-7 AM
Weekends & Holidays 24 Hours**



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All night. Weekends.

Right care. Right now.

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AfterOurs

URGENT CARE HEALTH NEWS

Volume 1, Issue 1

Caring for your health in the middle of the night

AfterOurs Urgent Care offers off-hours relief quickly, economically

Families fret fever, flu, fractures

Our annual “cold” front is arriving right on schedule, along with the joys and spills of such winter sports as skiing, snowboarding and skating.

Sniffles and sore throats

Convenient, competent, cost-effective healthcare in the middle of the night and any other time your doctor’s office isn’t open.

have replaced swimming and suntan stories as primary topics of discussion. Soon, flu and fever will be in full bloom.

Historically, families fretting sickness and injuries have turned to two healthcare providers—their doctor or the emergency department (ED). After hours, non-emergency care decisions often have boiled down to, “Can this wait until the doctor’s office opens

or should we go to the ED?”

Concern and guilt about the “what ifs” of waiting have been weighed against the costly and time-consuming ED option.

It’s this massive middle ground of healthcare that, until now, has not provided sufferers with many choices.

AfterOurs Urgent Care Centers has made the decision much easier. Open during the hours when doctors’ offices are closed, AfterOurs offers non-emergency care at a much lower cost than the ED (average co-pays are \$30 versus \$90; average charges are \$313 versus \$875). Treatment time averages 52 minutes at AfterOurs versus 192 minutes at the ED (ED treatment time estimates

provided by the CDC).

That’s roughly one-third the cost of the ED, and most people are on their way within an hour! No appointment is necessary. Hours are 5 PM-7 AM Monday through Friday, around the clock on weekends and holidays.

AfterOurs provides top-notch care using the latest treatment protocols, and forwards complete treatment records to the patient’s primary care physician for efficient follow-up care.

Most insurance, including Medicare, is accepted.

If you’re not sure about coming in or have questions, feel free to call our Hotline at 303-861-7878. A medical professional will help you determine the best course of action.

Next time you want to get out of the cold, check into AfterOurs Urgent Care.

Conditions treated:

Sprains, strains, fractures; minor burns, accidents, falls; cuts and abrasions requiring stitches; illnesses such as fever, flu, colds; conditions such as sore throat or runny nose; ear, eye, minor infections; minor aches and pains.

In the know: Flu’s clues

- Symptoms usually appear 1-4 days after flu virus infection, and may include body aches, chills, dry cough, fever, headache, sore throat, stuffy nose.
- Flu almost never causes symptoms in the stomach and intestines. “Stomach flu” is not influenza.
- Typically, fever begins to decline the second or third day of the illness.
- Children are 2-3 times more likely than adults to get sick with the flu—and they frequently spread the virus to others.
- Wash hands frequently with soap and warm water, or an alcohol-based sanitizer to prevent flu.



Sources: www.niaid.nih.gov/factsheets/flu.htm; www.mayoclinic.com

Thank you, doctors!
See “From the CEO” on the back page.

Statistics prove AfterOurs’ cost, time savings versus the emergency department



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Thornton location: 3655 E. 104th Ave., one block west of Colorado Blvd.

Monday-Friday, 5 PM-7 AM • Weekends, 5 PM Friday - 7 AM Monday • Holidays, 5 PM day before to 7 AM day after
Open when your doctor’s office and other urgent care centers are closed

Patients award AfterOurs 3.9 out of possible 4.0 grade point average

Theodore Roosevelt once said, "Far and away the best prize that life offers is the chance to work hard at work worth doing."

We can't think of any more worthwhile work than providing quality patient care. So far, our patients approve.

Overall patient satisfaction with their AfterOurs

lack of gripes, rare in today's healthcare environment. When asked how their AfterOurs experience could be improved, responses ranged from "serve cocktails and hors d'oeuvres" to opening clinics in west Denver.

Satisfaction with quality of care also is evident in patient comments. Thornton's Jennifer A. notes, "The care

was awesome. I was in and out within a half-hour. People were extremely friendly, personable, and upbeat."

Florida visitor Karl M. points out, "We were visiting from Ft. Myers, Florida. I had bronchitis and chest congestion, which got worse and worse. We didn't know any doctors and my wife insisted we see somebody. We started calling hospitals, and one of them recommended this clinic. The doctor was exceptionally good. I was very well pleased."

"Very friendly staff, very nice and clean facility. They saw me very quickly," comments Thornton resident Catherine W., who was examined for a possible broken toe. Her husband Fred adds, "I felt the service was excellent and will use them again!"

Couldn't have said it better ourselves. Thanks for your support!



Commend quality, timeliness of care

experience has been equivalent to a 3.9 grade point average. Of

42 patient satisfaction surveys recently completed, 37 rated us "excellent" (A), 4 gave us a "good" (B), and 1 respondent didn't score this question. All 42 said they would recommend AfterOurs to others.

Patients also gave AfterOurs a 3.9 approval rating for "meeting and resolving" treatment needs.

Comments revealed a

From the CEO

Thank you, doctors!

Your doctor's office by day. AfterOurs by night, weekends and holidays.

It's the perfect healthcare partnership. And thanks to an ever-growing list of physicians referring patients to us, the partnership is providing a 24-hour continuum of care to ever-greater numbers of patients.

Patient feedback forms completed between Sept. 24 and Oct. 4 showed that 26.2% of AfterOurs' patients were referred by a physician. As word spreads about the AfterOurs model, which complements physician practices instead of competing with them, we expect that percentage to increase substantially.

We also appreciate the faith placed in us by physicians who have contracted with AfterOurs to handle on-call responsibilities. Again, it's the perfect partnership.

Physicians can rest assured that their patients seeking on-call medical assistance will be appropriately evaluated. If needed, the patient can visit AfterOurs right away. In either case, complete discussion and treatment records are forwarded to the patient's primary care physician.

Finally, a big "thank you" to our on-staff physicians and clinicians. From day one, they've demonstrated the best of bedside manner, dedication and professionalism.

This is how healthcare should work!

Jill Flateland

... 93% of patients surveyed rated their AfterOurs doctor "excellent" ...

KNIGHT OWL

Make kids' handwashing a habit

It's obvious—perhaps too obvious. Handwashing is one of the best ways for children to avoid illness. Yet, unless it's "automatic," kids will tend to be inconsistent at best. Suggestions to help make handwashing a habit with children:

1. Wash your hands with your children and supervise their washing, so they can model your behavior and learn proper techniques;
2. Place handwashing reminders at children's eye level, such as a chart by the bathroom sink;
3. Make sure your daycare provider promotes sound hygiene. Ask whether children are required to clean their hands throughout the day, not just before meals.
4. Associate handwashing to many common activities including: before eating, after using the bathroom, after touching animals, after nose blowing, coughing or sneezing into your hands, before/after treating wounds or cuts, before/after touching a sick or injured person.

Source: www.mayoclinic.com



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*Covering your non-emergency care
around the clock:*

Your doctor's office by Day. AfterOurs by Night, Weekends and Holidays.

- Half the cost of an emergency department (ED) visit*
- Most patients treated within an hour
- Most insurance accepted without pre-authorization*
- No appointment needed
- Latest treatment protocols
- Phone support with medical professionals

*For any potentially serious health crisis threatening
life and limb – such as heart attack, stroke, poisoning,
loss of consciousness, convulsions, or sudden inability
to breathe – immediately call 911 or go to the nearest
hospital emergency department.*

*Check with your insurance company about coverage and co-pays. The 50% lower co-pays and treatment fees are based on statistical averages. Your savings could be more or less.

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Holidays, 5 PM before holiday through
7 AM the day after the holiday

More information >



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What we treat

- *Sports injuries (sprains, strains, and fractures)*
- *Minor burns, household accidents and falls*
- *Cuts and abrasions requiring stitches*
- *Illnesses (fever, vomiting, and diarrhea)*
- *Colds, flu, sore throat or runny nose*
- *Eye infections (Pink eye)*
- *Ear aches and infections*
- *Minor aches and pains*
- *Minor infections*
- *Diabetes monitoring*
- *Other urgent care needs*

The process is simple:

- Come in, or call 303-861-7878
- Register at the front desk
- You will be examined by a medical professional
- Treatment and tests as needed
- We will provide your doctor complete treatment records

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Urgent care saves time, money plus eases overcrowding in ERs

Urgent care typically saves patients and the health care system at least 50 percent of the cost of an emergency room (ER) visit for non-emergency care. Urgent care also relieves epidemic ER overcrowding, resulting in faster and appropriate care for the community.

Currently, ERs are reeling from their popularity. Lack of alternatives when physician offices are closed, use by non-insured and indigent for primary health care, and increased health problems inherent in an aging society have fueled the overcrowding.

According to a study released by the Centers for Disease Control and Prevention (CDC) in May 2005, patients average more than three hours in the ER, including treatment time. This is two to three times longer than the average urgent care visit.

The CDC study indicated that 68 percent of ER cases were either urgent, semi-urgent or non-urgent. Urgent care would be more convenient and affordable for many of these cases. Alleviating this patient surge will free up ERs to concentrate on the most critical care, and minimize patient diversion because of overcrowding.

The health care system is demanding innovation in care delivery and patient education resulting from such trends as rising insurance fees, increasing employer costs, a decreasing supply of medical providers and the desire of those providers to spend more time with their families.

Five top emerging cost scenarios demonstrate why such alternatives as urgent care are becoming increasingly critical to the well-being of this nation's health care system:

1. Higher insurance premiums, including Health Savings Accounts (HSAs), spur higher deductibles and less coverage. As rates go up, employers are lowering contributions, leaving consumers paying higher premiums or opting for less coverage. With average ER treatment costs soaring above \$1,000 per visit, urgent care savings look very attractive.

Similarly, as HSA popularity grows, so do employer/employee deductible costs. It's not unusual for the first several thousand dollars of HSA expenses to be out-of-pocket. When consumers pay the full cost of ER treatment, either the HSA option begins to lose its luster or lower-cost health care alternatives, such as urgent care, gain stronger appeal.

2. Co-pays add up with growing families, longer and more lethal "sick seasons." While a co-pay difference of \$90 at the ER versus \$45 at an urgent care center may not appear overwhelming for one visit, multiply the potential over a series of illnesses throughout the year and the peace of mind of the urgent care alternative grows.

3. On-the-job productivity losses mount due to extensive ER waits. If an employee suffers a non-emergency injury during a weekend shift when most physician offices are closed, the default treat-

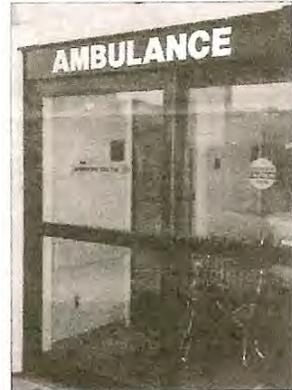
ment option is typically the ER. Since ER waiting times tend to be greater for those with less serious conditions, an employer could wind up losing many hours of productivity while that employee sits and waits at the ER.

Bureau of Labor Statistics data show private workplace injuries and illnesses are occurring at a rate of five per 100 full-time workers, so start multiplying productivity losses. Cutting those lost hours two-thirds or more by accessing urgent care can substantially improve a company's bottom line.

This issue also impacts workers who have to take time off to tend to sick or injured family members. The difference between a relatively fast urgent care visit and long-winded trip to the ER, when multiplied over the entire employee population in the course of a year, also can dramatically affect profitability.

4. Higher treatment costs spur higher insurance premiums. This is the flip side of the "higher premiums, lower coverage" scenario. To the extent that health care costs can be held in check, so can insurance premiums.

If an insurance company or self-insured employer pays 200 ER claims averaging \$1,225 (a total of \$245,000) versus paying on an urgent care tab of \$290 (a total of



\$58,000), the cost difference is substantial. Consumers and employers end up footing that bill in the form of higher premiums or reduced coverage, resulting in more out-of-pocket expenditures.

5. Indigent and low ability-to-pay care drives up ER costs. ERs are required to treat all comers, enabling the indigent and other low-income groups to "substitute" the ER for a primary care physician. Their care costs are borne by the paying population and insurance companies.

Given their lower cost structure for non-emergency care, urgent care centers can relieve some of this burden — creating a cost "safety valve" of sorts. Urgent care's ability to provide services faster and more cost-effectively ensures less drain on health care coffers and resources.

Urgent care is an innovative solution to improving the delivery and coordination of care. By saving time and money, it's a service whose time truly has arrived.

JILL FLATELAND is CEO and **DAVID WHITE** is chairman of the board of AfterOurs Urgent Care Centers along the Front Range. Reach FlateLand at 303-407-0520 and White at 303-407-0526.