

What's In It For Me?

■ Lou Ellen Horwitz, MA

Do you remember what it was like in the summer of 2020? If that summer had a theme, it would have been “overlooked.” Everyone was jumping up and down and waving their arms to get the attention of suppliers, government agencies, payers, diagnostic companies, and pharmaceutical companies so we could meet the needs of the patients literally lining up in front of our centers. We had to fight for every single thing we got, and were last in line every time, if we were included at all. That was a huge wake-up call for us as an industry—but I am afraid that we have ultimately ignored that call and will live to regret it.

In the July 2020 issue of *JUCM*, I wrote about the need for a change in Urgent Care:

*“I don’t want to change our DNA – but we have to change something **if we want to have a national impact.** We may not like it, but we do need each other. It’s not enough to just be good at what we do. It’s not enough for us to unite four days a year at Convention and compete the other 361. It’s not enough.*

“We all want this alliance. We see every day how critical Urgent Care is in our communities. We can be an ‘alliance of mavericks’ if we must, but we have to come together, and in greater numbers.”

Guess how much we’ve come together since then? Not much.

I measure this the only way that we can: by how many centers are part of the Urgent Care Association (UCA). The whole reason that UCA exists—the whole reason that any association exists—is to bring people together in a group to do things that they cannot do separately.

Guess who else measures us this way? Federal stakeholders. One of the first questions we get is, “how many members do you have?” Federal stakeholders want to know how big of a player UCA is, and size of membership

is how they measure. It’s great to be able to say that there are 14,599 Urgent Care centers in the country, but if UCA can only claim to represent 38% of them, it diminishes our credibility (even though no one else represents the other 62%).

I share these numbers so you will understand what having a national impact requires from you. If you aren’t a member, your choice to sit on the sidelines of what we all want to accomplish is impacting our ability to advocate on your behalf. Your choice to only let others pay membership dues has a negative impact on you because your absence impacts UCA’s national credibility.

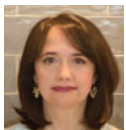
So yes, this is a plea for all of our non-members to join UCA. You don’t have to buy anything, go to a single webinar, access a single free resource, or come to the convention—though I hope you will. If you do nothing else besides maintain an ongoing membership for your center, you are performing a critical duty to empower change on a national scale that will ultimately benefit your business and your clinicians and your employees and your community.

If we fail as an industry, it will be because we failed to come together and use our collective power. Our members know this, and it’s why they belong to UCA and will continue to be part of our progress.

Poet John Donne said it best:

*No man is an island,
Entire of itself.
Each is a piece of the continent,
A part of the main.
If a clod be washed away by the sea,
Europe is the less.
As well as if a promontory were.
As well as if a manor of thine own
Or of thine friend’s were.
Each man’s death diminishes me,
For I am involved in mankind.*

What’s in it for you to be a member? Ensuring the long-term success of our industry. UCA is going to do the advocacy work no matter what, but our odds improve with every additional voice. Let’s make sure Urgent Care is never overlooked again. ■



Lou Ellen Horwitz, MA is the chief executive officer of the Urgent Care Association.