Healthcare Is the New Retail™: How to Think Through Your Consumer Strategy with a Retail Approach

Lessons from the retail industry that can help your health system develop the right strategies to engage your patients, drive revenue, build barriers to entry, and capture market share

Chad Pinnell, JLL Healthcare Solutions, Managing Director
Benefits of Adopting a Consumer-Centric Retail Strategy

- Expand market share
- Drive more revenue per patient
- Reach the right consumers at the right locations
- Give consumers and patients more choice
- Give consumers and patients more transparency in price and quality
- Decrease your healthcare organization’s overall capitation risk
- Potentially engage healthcare consumers through less traditional points of entry, such as annual wellness visits, employer-sponsored wellness programs, smoking cessation programs, exercise and nutrition education, and more

If you’re like most senior healthcare executives, you’re in the process of determining what your system will look like in the next five to 10 years. Along with the current focus on the consumer experience, patient-centered care and population health is the need to determine the right retail strategy for your system.

In a healthcare context, the term “retail strategy” is often narrowly interpreted to mean a retail-chain model, such as Walgreens or CVS. That’s one retail strategy, however this article concerns a much broader concept: **How to think through your system’s consumer strategy with a retail approach—to engage your patients, build barriers to entry, drive revenue, and capture market share.**

It’s an aspect of consumer-centric healthcare that’s exciting and complex. Although each plan will be unique, formulating and executing your system’s retail strategy starts with recognizing your patients as consumers and your need to engage with them as such. Healthcare systems can employ many different means of engaging, including digital channels such as apps, but a major way to engage with consumers physically is through your ambulatory strategy. This requires your organization to think like a retailer.

It probably wouldn’t surprise you to know that with the right tools and analytics the best minds in retail can tell you whether a Subway, for instance, will work on this corner or a Walmart will work in that neighborhood. Those expert analysts can determine if a store needs to be four miles or six miles away from the last store they built. Or that you will be successful in this particular location because a certain competitor is not located nearby—even though other competitors are. Healthcare systems need to reach the same level of sophistication, and as we’ll see, many of the tools and analytics to help already exist. It’s a big challenge, but the opportunities are larger for healthcare than in retail. While the U.S. Census Bureau and ICSC research shows U.S. shopping-center inclined sales for 2014 of $2.52 trillion—and tracking at about the same pace through July 2015—1—the Centers for Medicare & Medicaid Services data project national health expenditure to be $3.2 trillion in 2015 and $5 trillion by 2022.2

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1. U.S. Census Bureau and International Council of Shopping Centers research.
2. “Table 2: National Health Expenditure Amounts with the Impacts of the Affordable Care Act, and Annual Percent Change by Type of Expenditure: Calendar Years 2006-2022,” Centers for Medicare & Medicaid Services, Office of the Actuary.
### Coming to Terms with Retail Healthcare

Many of the current buzzwords in healthcare are interrelated and can be confusingly employed by organizations to mean different things. This discussion is focused on the physical delivery of health services through a bricks-and-mortar channel designed to drive value through a consumer-centric retail healthcare strategy, as defined here.

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<tr>
<th>Tends to Focus on</th>
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<tr>
<td><strong>Consumerism</strong></td>
<td>A patient’s involvement in his or her own healthcare decisions</td>
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<td></td>
<td>Physical access and structures as well as electronic access, including patient portals, connectivity, social networks, experience, and perception of quality of care.</td>
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<td><strong>Retail Healthcare</strong></td>
<td>Community-based locations for service delivery</td>
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<td>In-store clinics, urgent care, standalone ED’s, multidisciplinary facilities, medically integrated wellness facilities, and ASC’s.</td>
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<td><strong>Population Health</strong></td>
<td>The health outcomes of a group of individuals</td>
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<td>Health disparities, insurance products and affiliations, payment models, community engagement and wellness programs, quality, access, and outcomes. Driven by data analytics.</td>
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<tr>
<td>Patient-Centered Care</td>
<td>Patient preference, values, needs involvement, engagement, and outcomes</td>
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<td>Patient-consumer experience at every level of care, design, and implementation.</td>
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*Formulating and executing your health system’s retail strategy starts with recognizing your patients as consumers and your need to engage with them as such.*
Adopting a Retail Strategy Begins with Changing How You Think About Your System and What You’re Selling

In the commercial real estate industry there are several categories of expertise, with professionals focusing on office, retail, or, sometimes, healthcare-specific offices (these used to be referred to as medical offices). Historically, when a health system needed market assistance locating a new facility, it would employ an office broker to help with this work. In the pre-ACA environment of medical office buildings (MOB’s) being located off the beaten path on cheap land, this model worked well. However, in the post-ACA environment of engaging consumers and increased competition, the office expertise model is antiquated. Forward-thinking health systems now know the analytical-minded, consumer-focused methods of a retail professional are best suited for understanding where to place new ambulatory health centers.

Consider the exercise real estate office professionals undertake when they are working to place a new corporate headquarters for companies like Hewlett-Packard, Shell Oil, AT&T, or your health system. That project team understands the headquarters office is over-head and has no expectation of generating revenue, thus planning accordingly. Now consider your next ambulatory project: All clinical “offices” are purposefully built to provide health services to the public, and with that comes the need to generate revenue over the long run to ensure its sustainability. Your project team should be focused on the same metrics that the most sophisticated retailers in the industry are focused on—supply/demand, competition, building barriers to entry, and revenue generation. You are building a retail center that sells healthcare services and your team should be thinking like a retailer.

Within the retail industry, you expect to find differences in strategy for different brands and different types of businesses. For instance, the strategy for Nordstrom is different from the strategy for Dairy Queen. Albeit, they are both retailers, they are entirely different entities with different products, employing different methods to reach their target consumer group. You might think of how your health system’s acute strategy is different than its urgent care strategy, for example.

The Importance of Targeting and Tailoring

“One lesson from retail that can’t be emphasized enough is the need to understand different segments of your market and different segments of the population and consumer base,” notes Jarrett Lewis, Executive Director of Consumer Research at the Health Management Academy. “With a retail strategy you can target and tailor to each of those segments.”

For example, a large system in the southeast was having emergency-room overflow issues and planned to build some outpatient centers staffed with midlevel providers to expedite the care process. The goal was to help the system’s primarily uninsured, lower income and minority populations receive care more quickly and divert them from emergency rooms. “Because in a lot of cases the patients didn’t need ER,” explains Lewis. “They needed to be in an urgent care setting.” The overflow in ER was creating issues with cost, care delivery, and patient satisfaction. But when HMA conducted surveys to determine if the system’s patients were supportive of the trend towards being treated by a nurse practitioner or a physician assistant in lieu of a doctor, the research results reinforced the importance of segmentation in understanding the different needs and wants of different patient populations.

“We found that the overall market was in support of the trend by 55 percent or 56 percent,” Lewis says, “but the three groups which the system was really targeting were among the strongest against the concept. When we went deeper with the research and did some qualitative work, we found that those patient populations felt that they weren’t seeing a ‘real doctor’ or a real care provider. It felt like a slap in the face to them. So segmentation is critical. By doing some focus-group work, we came up with communication strategies to engage those populations.” The healthcare system was able to reach patients with education and messaging about shorter wait times, lower costs, and the presence of a physician overseeing the other care providers and reviewing patient records and health issues.
The Rise of the Healthcare Shopper

It makes sense for healthcare systems to start behaving like retailers when patients are increasingly behaving like consumers. Recent research conducted by The Health Management Academy (HMA) found that “consumers recognize differences in provider cost and quality and are seeing an average increase in out-of-pocket spending that far outpaces inflation.” Factors such as these are contributing directly to the rise of the “healthcare shopper.” “Patients haven’t behaved like ‘consumers’ before, but what we’ve seen in the data is that we’re getting there, because they believe there are differences in cost and quality, they’re spending more of their own money every year for medical care, and they’re starting to adopt more of a shopping mentality when they go to purchase or receive healthcare services,” explains Jarrett Lewis, Executive Director of Consumer Research at HMA.

Lewis points out that convenience and location are key factors for healthcare shoppers. “That’s really becoming more and more important,” he says, citing recent retail data from HMA showing that more than four in 10 patients who consider themselves “very loyal” to their doctor would change physicians if they could see someone in a more convenient location. The research also showed a significantly higher number of people who would change physicians because of location than who would change because of price. This is consistent with a July 2015 Moody’s report finding that the key to capturing consumer-oriented patients is convenience, both physical and virtual: “Expansion of lower-cost retail clinics and the increasing shift of patient care to outpatient settings is changing the competitive healthcare landscape. Median outpatient revenue has increased to nearly 50 percent of net patient revenue. Hospitals are responding by establishing outpatient sites in geographically convenient locations and investing in new technologies to facilitate physician-to-patient communication.”

There is an opportunity for established systems to leverage their brand by being an early-adopter of a retail strategy. “We’ve worked with a health provider on the West Coast that is a very strong brand in its market and is really trying to leverage that brand strength and some of its smaller retail-type settings to get people in the door,” Lewis notes. “These types of systems have the upper-hand on generic retail-space clinics and standalone urgent-care clinics. They’re becoming bigger and bigger, and they’re becoming strong brands in their markets.”

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3. Based on retail data from a national survey of 1,500 adults conducted by The Health Management Academy in November 2014.

Learning from Retail

The most successful retailers spend a great deal of resources to understand their consumer’s demographic and psychographic make-up, resulting in a consumer profile with astonishing accuracy. These profiles allow the retailer to identify potential expansion markets, evaluate current store profitability, predict consumption and revenue, evaluate competition and analyze changing consumer trends, thereby affording executive management the ability to deploy a dynamic distribution model, incorporating accurate and timely business intelligence specific to their operations.

The same lesson applies to healthcare. As the leader of a health system, you might begin to better understand your healthcare offerings by looking out at the larger retail landscape and asking, “What type of retailer does our system mirror?” or “Which retailer has a consumer profile that is most similar to our patient profile?” Your answer could shed light on how best to reach and influence your own patients.

As you begin to understand your patients’ profile, characteristics, and their desire to be involved in their health outcomes, you will then be ready to think through how your organization can utilize its physical assets to convey the appropriate message regarding your system’s approach to healthcare delivery. For instance, if your strategy is to provide care to underserved rural populations you may find it beneficial to locate, or even partner with, Walmart. In rural communities, a single Walmart will often serve a five- or six-county region, attracting a retail-consumer profile nearly identical to a health system’s rural patient-consumer profile.

Another lesson from retail is that you are managing a physical experience as well as a digital one. A good example of this is Starbucks. Before the chain came along, coffee was coffee, a commodity. But when Starbucks focused on how coffee was physically distributed—the design of the retail environment and the customer experience within that environment—it created powerful differentiation for the product and the brand. That focus on delivery changed the consumer’s perception of coffee thereby creating a branded industry from a commodity.

Until recently, healthcare was similarly commoditized, and most hospitals and healthcare systems saw themselves as being all things to all people. Now, due to a number of converging factors (see “Trends Driving the Need to Adopt a Retail Strategy” on pg. 10), not only do you need to brand yourself as a system, you need to determine a physical-location strategy and consequent retail strategy based on that brand.

For example, if your system strategy is to deliver highly specialized tertiary and quaternary care, perhaps your retail strategy should be leveraging relationships and the brands of those relationships to deliver your message. Think of how the highly specialized chip maker Intel has leveraged the brands of Hewlett Packard, Dell, Lenovo and others to get the message to their consumers that they are the best chip to have inside.

Perhaps your system strategy is to be the best in women’s health, orthopedics, pediatrics, cardiology, or other primary and secondary care modalities. Your system focus is then on the local community and being ever-present and available when the need or desire for health and wellness services arises. A well placed in-store clinic, urgent care, free-standing emergency department, or multi-disciplinary health center network designed to afford your patient-consumer convenience, comfort, and quality care is appropriate. This is similar in design to how Bank of America, JP Morgan Chase, Citigroup, or Wells Fargo address their markets. These banking systems locate inside community grocery stores, build free-standing banking centers on out parcels of grocery-anchored shopping centers, and provide more specialized attention to their high-touch financial services customers.

Thinking like a retailer, then, means asking new questions of your system such as: “How do we define ourselves as a ‘store’? What are we selling? Who are we selling it to? What’s the best way for consumers to engage with us?” Once you figure out who you are and what you’re selling, you can begin to understand your consumer and construct a consumer profile based on those characteristics. Then you will be better able to determine strategically and tactically how to engage your consumer through your physical assets, your technology, and other brand differentiators.

Thinking like a retailer means asking new questions of your system such as: “How do we define ourselves as a ‘store’? What are we selling? Who are we selling it to? What’s the best way for consumers to engage with us?”
Part of what determines a consumer-centric retail strategy is your answer to the question, “What level of acuity is my project team addressing?”

Is your goal low, moderate, or high acuity? Are you most like an urgent care system, with low-dollar transactions driving a need to accommodate high volume and multiple touchpoints? Or are you focused on specialization to the extent that the patient views you as a destination and will seek you out and fly halfway across the country to get to you?

Your delivery model is critical in determining your retail strategy. Some systems do still want to be all things to all people. Most will become more narrowly focused. Regardless of where your system is on this continuum, it is important to think about where you intend to be in the future, design a plan around those intentions, and execute your physical distribution model.

With this awareness, you can begin to think about the more tactical pieces, such as, “How do we look at our ambulatory network? Do I need 50 urgent-care facilities or do I need 10 standalone emergency departments spread throughout the market? Or, do we focus on an acute-care hospital, with no network of stores and a strategy of leveraging others who will potentially drive business to us?”

### Low Acuity
- **Characteristics**
  - Moderate level of education required
  - Least complex health problems
  - Least variety of health problems
  - Strong competition from Retailers

- **Example**
  - Aspen Dental
  - LensCrafters
  - CVS Minute Clinic

- **Complexity**
  - Relatively simple business model
  - Low barrier to entry invites more competition
  - Easily scalable
  - Market may support 100 outlets

### Moderate Acuity
- **Characteristics**
  - Specialized education
  - Increasingly complex health problems
  - Increased variety in health conditions
  - Low competition from Retailers

- **Example**
  - Community Care Centers
  - Medical Fitness
  - DaVita

- **Complexity**
  - Increasingly complex business model
  - Moderate barrier to entry
  - Some scalability
  - Market may support a few dozen outlets

### High Acuity
- **Characteristics**
  - Advanced education/highly specialized
  - Most complex health problems
  - Greatest variety of health conditions, Co-morbidities
  - Highest sophistication
  - Almost no competition from Retailers

- **Example**
  - Multispecialty Clinics
  - Free standing ED’s
  - Ambulatory Surgery Centers
  - Oncology
  - General Surgery / Plastic Surgery

- **Complexity**
  - Highly complex business model
  - High barrier to entry
  - Limited scalability
  - Market may support a handful of outlets
As you frame your consumers’ profile and determine how to best engage with them through your system’s physical assets, technology, and so on, keep in mind that while 47 percent of patients are female, those patients are also deciding on and scheduling care for their partners, spouses, children and parents—and probably influence neighbors, schools, and the workplace.

According to Why She Buys: The New Strategy for Reaching the World’s Most Powerful Consumers by Bridget Brennan, women are either the purchasers or influencers in about 80 percent of consumer products sales in the United States. As with consumer products, health systems that ignore this fact are functioning at their own peril.

“There is no doubt: The companies who invest in understanding their primary consumer are winning,” Brennan notes. “The ability to understand [women’s] brain structures, priorities, worldviews, and demographic patterns can provide your organization with some of the most genuine competitive advantages it may ever know.”

It’s often a major “a-ha” moment for a health system to recognize and address this fact. It took retailers nearly 70 years to figure this out before they started marketing to women. You don’t have to wait. You can do it now.

**Top 5 Consumer-Centric Strategic Questions a CEO Should Be Asking**

1. **System Strategy**: What acuity level does my health system serve?
2. **Service Lines**: Which medical modalities drive the revenue my system is seeking?
3. **Consumer Profile**: What are the 10 key characteristics of my desired patient population?
4. **Physical Distribution**: How and where can my system best engage my consumer?
5. **Partnerships**: Should my system seek strategic partnerships with traditional retailers?
Quality means many different things to consumers—providers are wise to understand this.

There is a perception gap between how providers think patients view quality of care and how patients actually define quality of care, further supporting the need for market segmentation. In both market-based and national surveys, HMA polled patients on the question, “When you think of quality in healthcare, which one of the following first comes to mind?” The results (see graph) consistently showed that “timely and efficient care” nearly matches “good outcomes.” As HMA’s Jarrett Lewis notes: “For parents, timely and efficient care becomes the number-one factor. That 22 percent rises to 34 or 35 percent for people with children under 18 in their household, and ‘good outcomes’ drops to second place.”

Slightly more than one-quarter of consumers define quality as “good outcomes.”

When you think of quality in healthcare, which one of the following first comes to mind?

<table>
<thead>
<tr>
<th>Perception</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Good Outcomes</td>
<td>27%</td>
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<tr>
<td>Timely and Efficient Care</td>
<td>22%</td>
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<tr>
<td>Reputation of the Doctor</td>
<td>18%</td>
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<tr>
<td>Staff and Doctors Use the Latest Technology</td>
<td>12%</td>
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<tr>
<td>A Pleasant Experience with Friendly Staff</td>
<td>7%</td>
</tr>
<tr>
<td>A Warm and Comfortable Environment</td>
<td>5%</td>
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<tr>
<td>A Modern Facility</td>
<td>4%</td>
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Data from an HMA national survey of 1,500 adults, conducted November 19-23, 2014

Forty-seven percent of patients are female, and those same patients are deciding on care for their partners, spouses, children and parents. They may also influence neighbors, schools, and the workplace.
Many of the Tools and Analytics You Need Are Already Available

The sophisticated business intelligence and tools available to retailers to analyze their real estate portfolios and execute their strategy are available to healthcare systems. They can be used to help you quantify and examine your current performance – what kind of volume are you getting? What do your patient profiles look like? How will this input assist in strategic capital planning?

Available tools include:

- The ability to look at maps/locations with digital tools to select metrics, filter data and access street views
- Patient and community profiles to aid in targeting the right populations and locations to most effectively implement your strategy
- Analysis of current facility operations to uncover key determinants in building a predictive model for future locations
- Facilities Maintenance systems that offer features such as:
  - **Move management** – move coordination, communication, vendor management, tactical space planning, project moves
  - **Space management** – space data management, space functions and types, quality assurance, site validations, space allocation/chargeback, site data audits, occupancy metrics/benchmarking
  - **Strategic planning module** – scenario planning, business unit programming, adjacency planning, restack/test-fits/migration planning, growth planning and forecasting
  - **Asset management module** – track multiple asset classes, link assets to CAD symbols on floor plans, graphical queries
- Facilities management user-configurable dashboard and graphic views, real-time, web and mobile accessible reporting to foster collaboration with your team, base reports to promote informed decision-making (e.g., space utilization % capacity by site, etc.)
- Portfolio analytics tools that offer the ability to view key analytics, number of locations, rental obligations, occupancy and mapping, and can filter based on any location, business unit or property type, and more

Top 5 Strategic Location Factors

1. Who are my consumers and how will they benefit from my location?
2. Does my consumer spend time outside of healthcare at this location?
3. Will the adjacent or neighboring retail stores help my strategic objectives?
4. Are my competitors able to out-position me?
5. Is this location sustainable?

Note: the price of the land is not necessarily a determining factor.
**Putting Retail Lessons into Action**

Hospitals are already learning from retailers. The Ohio State University Wexner Medical Center’s (OSUWMC) 30,000-square-foot CarePoint facility is located strategically within a Kroger-anchored shopping center in one of the fastest growing communities in Ohio. OSUWMC also operates, in coordination with The Little Clinic, a health clinic inside of the Kroger store at the shopping center. The Kroger Company, The Little Clinic, and The Ohio State University Wexner Medical Center forged an affiliation across all 13 Little Clinics in central Ohio.

“We are very proud of our partnership with The Kroger Company’s Little Clinics to improve the health and wellbeing of the citizens of our state,” says Gail Marsh, Chief Strategy Officer, The Ohio State University Wexner Medical Center. “As a land-grant institution, Ohio State is committed to bringing our healthcare experts and discoveries out into the many communities we serve.”

Ohio Health and Nationwide Children’s Hospital each occupy space in two separate 30,000-square-foot facilities located on-site with a new Giant-Eagle-grocery-anchored shopping center in Hilliard, Ohio.

There are many other examples of health systems deploying urgent care networks, community care facilities, partnerships with groups like the YMCA, YWCA, and other organizations focused on health and wellbeing.

As you reflect on the changes that took place over the past 10 years in healthcare, understand the increasing pace of change today, and begin to look forward at the changes to occur over the next 10 years, take the time now to understand your health system’s role in care delivery. How will you define yourself? How will consumers perceive your brand? How will your competitors react to your model? Will you have the impact on the population’s health you desire? How will you use technology and bricks-and-mortar locations to engage and fulfill your patients’ ever-increasing desire to be healthy? And most importantly: How will the community benefit from your investments in their neighborhoods?

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**Trends Driving the Need to Adopt a Retail Strategy**

- The Affordable Care Act (ACA) has induced millions of previously uninsured Americans to purchase health insurance coverage, fueling demand for healthcare services and facilities. Many of these newly insured individuals are choosing higher-deductible plans with lower monthly costs. As consumers become responsible for a rising percentage of their healthcare costs, they are also becoming more sophisticated and demanding. To satisfy these heightened consumer expectations and remain competitive, providers will need to invest in new care models.5

- “Healthcare, like so many other industries these days, is being democratized. A survey published in April 2014 by PwC’s Health Research Institute (HRI) found that many consumers are willing to abandon traditional care venues for more affordable and convenient alternatives. Nearly one in two survey respondents said they would choose at-home or retail options for more than a dozen medical conditions or procedures such as self-diagnosing strep throat or administering chemotherapy.”6

- New delivery models are emerging and a primary-care revolution is under way with the participation of retail leaders such as Walmart, CVS and Target.

- Consumers, patients and potential patients want choice along with transparency in both price and quality. It is important for health providers to engage with them where they are most frequently. A major way for providers to expand market share and drive more revenue per patient is to reach consumers with the right facilities in the right location, taking a page from the retail delivery model.7

- “In 2013, 24 of the top 50 Fortune 500 companies were new entrants into healthcare. Of this group, seven were retailers and eight were technology and telecommunications companies. Both types arrived on the health scene boasting deep relationships with millions of customers and rich databases of information.”8

- A rise in wellness-based healthcare: “[The ACA] encourages preventative health initiatives and a transition from ‘sick care’ to actual ‘health care’ in an effort to both improve Americans’ quality of life and lower national health spending.”9

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5. “5 Major Opportunities to Harness Real Estate to Meet Your Strategic Priorities in the Coming 10 to 15 Months,” JLL healthcare trend analysis, 2015.


7. “5 Major Opportunities to Harness Real Estate to Meet Your Strategic Priorities in the Coming 10 to 15 Months,” JLL healthcare trend analysis, 2015.


About JLL

JLL (NYSE: JLL) is a professional services and investment management firm offering specialized real estate services to clients seeking increased value by owning, occupying and investing in real estate. A Fortune 500 company with annual fee revenue of $4.7 billion and gross revenue of $5.4 billion, JLL has more than 230 corporate offices, operates in 80 countries and has a global workforce of approximately 58,000. On behalf of its clients, the firm provides management and real estate outsourcing services for a property portfolio of 3.4 billion square feet, or 316 million square meters, and completed $118 billion in sales, acquisitions and finance transactions in 2014. Its investment management business, LaSalle Investment Management, has $55.3 billion of real estate assets under management. JLL is the brand name, and a registered trademark, of Jones Lang LaSalle Incorporated. For further information, visit www.jll.com.

About JLL Healthcare Solutions

JLL's Healthcare Solutions group partners with hospitals and healthcare systems throughout the nation to help fulfill their missions through the stewardship of real-estate based assets. We tap the unrealized potential of real estate to produce defined cost savings, manage risk, and improve the overall physician, employee and patient experience. Our perspective is based not only on the analysis of more than 375 hospitals but also management of facilities comprising more than 13,200 hospital beds and over 31 million square feet. With 135 hospitals managed, we are the largest provider of outsourced healthcare facility management in terms of numbers of hospitals managed. Consistently recognized as a top company in Modern Healthcare's annual rankings of real estate firms, JLL has also been ranked for eight years in a row on the Ethisphere Institute's World's Most Ethical Companies.

About the Author

Chad Pinnell brings deep executive-level business experience in the fields of healthcare strategy, finance, real estate, development and business consulting to help hospitals and health systems nationwide maximize their real estate’s financial performance. He specializes in the intricate relationship between real estate and healthcare operations, understanding that real estate can be the apparatus by which healthcare organizations hit their financial objectives and satisfy the mission of the organization.

Prior to joining JLL, Chad led consulting operations at Equity, Inc. where he was responsible for strategic market analytics, key integration points between health systems, food retailers and related healthcare facilities, and the resulting medical office development. He holds an MBA from the Fisher College of Business at The Ohio State University, a Bachelor of Science in Managerial Economics from Washington University, and has completed the Executive Education Course in Corporate Financial Strategies to Create Shareholder Value at The Kellogg School of Management at Northwestern University.

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