The sign on the door leading back to the exam rooms in Pipe Trades Services of Minnesota’s Family Health and Wellness Center in White Bear Lake is the first clue that this is no ordinary medical clinic: “No deductible, no co-pay, just a commitment to improve your health,” it reads.

Behind the door, a physician works alongside a chiropractor, appointments run 30 or 60 minutes, and patients can be seen for minor illnesses and injuries as well as preventive care. They also can receive generic prescriptions from a small pharmacy without having to pay a dime. “They’re safe under this roof. They know they won’t have any extra charges,” says Kim Turinske, M.D., currently the only family physician who works at the clinic.

The White Bear Lake clinic, housed in a nondescript medical office building, has been open for about a year and is one of two in the Twin Cities run by Pipe Trades Services of Minnesota, the organization that administers the pension, employee wellness program and self-insured health fund for many of the state’s pipe trades unions. Its sister clinic in Maple Grove opened in March of 2013. Together, they serve approximately 16,000 union members and their families. Jim Hynes, executive administrator of Pipe Trades Services, came up with the idea for the clinics after looking at the money they were spending on health care each year. “We process and pay $50 million to $60 million in medical claims. We looked at those claims and thought there had to be a better way for us to try to serve our participants,” he says.

He convinced his board of directors that the better way was to focus on preventing costly health problems. “I don’t think today’s system is based on values and outcomes; it’s based on volume,” he says.

The concept of trade unions opening hospitals and clinics for workers dates back to the early 20th century. In 1913, the International Ladies’ Garment Workers’ Union opened a health center in New York City. About the same time, the Western Federation of Miners established a network of hospitals in areas with significant mining activity.

In doing his research, Hynes found only a handful of union-affiliated clinics in existence today: one for teamsters in Milwaukee, another for commercial food workers in Chicago and one for culinary workers in Las Vegas. And the focus of those clinics, he observed, was not on preventive medicine. “They are there for convenience as much as anything,” he says. “They’re not trying to get ahead of chronic conditions and change behaviors.”
A unique population

Minnesota’s pipe trades unions represent plumbers, pipefitters, sprinklerfitters, gasfitters, and HVAC and service technicians. About 99 percent of their members are male. Most of them are middle aged, and many have followed grandfathers, fathers, brothers and uncles into their trade. Most join the union when they finish their schooling and apprenticeship and remain members for their entire career.

“It’s a perfect population for prevention,” says Turinske, whose uncle was a pipefitter. “These workers join the union, and they’re in the union for more than 20 years. If we start treating them when they’re young and coming out of school and prevent diseases, then 20 years down the road, they’ll have less diabetes, heart disease, cancers, etc., and their health care fund will be stronger, having saved thousands of dollars on treatment of these diseases. Most importantly, they will have a better quality of life.”

Although Pipe Trades Services began emphasizing healthful living and prevention several years before the clinics opened, many union members avoided the doctor’s office until a crisis brought them in. Hynes says many men view themselves as big, tough and healthy. “Then at age 55, they have a bunch of problems that are expensive and affect their quality of life.”

In order to get those patients in the door sooner, they had to address the reasons they stayed away. Co-pays and deductibles were high on the list. Hynes says when he presented his proposal for the clinics, they discussed a $10 co-pay for visits. “I like the idea of people having skin in the game,” he says. “But if we did it and someone comes in and says ‘I don’t have $10, can you bill me?’ you can quickly spend $10 to get that $10 back.”

Hynes also knew people wanted the experience of going to the doctor to be simple. “These guys aren’t big on paperwork and computers. They just want to show up and get treated fairly and appropriately,” he says. So in order to keep costs down and processes simple, they decided not to charge union members or their families for services. (Consequently, they don’t treat people on Medicare or Worker’s Compensation or auto insurance cases, where billing would be required.) They located the clinics in parts of the metro where a large concentration of union members live and work, allowing them to stop in when the clinic is open, even if they don’t have an appointment.

Adding to the clinics’ appeal are the longer appointments, which help patients to get to know and trust their physicians (who are salaried and not subject to production quotas) and enable physicians to address potential problems. “If someone comes in for a sore throat and their blood pressure is high … I actually have time to talk to them about a low-sodium diet and other things, such as weight loss, exercise and quitting smoking, that they can do to help their blood pressure other than taking medications,” says Turinske, who is also board-certified in bariatrics.

She says the problems that most affect the patients she sees are musculoskeletal injuries, obesity, heart disease and diabetes. “We have a lot of smokers, and we’ve been able to get more people to quit because we have the medications right here and they get them for free,” she says. “I can send them home with lozenges, patches and gum so they don’t have to go out and get them and pay for them. That makes them more likely to try to quit.”

In addition, all patients sign a wellness commitment in which they agree to establish a relationship with a primary care provider at the Health and Wellness Center, take a healthy approach to eating, exercise, cut out bad lifestyle behaviors, reduce stress and “find ways to create and find joy in life.” “It’s the cornerstone,” Hynes says. “They have to understand that their health is their greatest asset.”

Getting the job done?

Hynes says they appear to be winning people over. “From 99.9 percent of the people I talk to, if there are any negatives, it’s that we need more hours and more locations,” he says.

Pipe Trades Services is looking at opening two more clinics in the south metro and plans to hire a pharmacist early this year to offer medication reviews and counseling. (Hynes says several other local unions have expressed interest in sending their members to the clinics; in addition, representatives from labor unions elsewhere in the United States have asked to tour the facilities.)

Many of those who use the clinic are taking the wellness challenge to heart—and are starting to see results. Hynes tells of a 43-year-old man who showed up at the clinic for the first time because he woke up with pain between his shoulders. When the pain started radiating down his arm, 911 was called. “When the guy got to the hospital, we found out he hadn’t been to a doctor in 10 years. He had diabetes he didn’t know about and he was having a heart attack.” Since then, the man has lost 15 pounds, quit smoking and found a support network at the clinic, where he regularly comes for follow-up care.

“It’s changing behaviors,” says Hynes, who takes the long-term view on the preventive care being offered at the clinics. “And for this group, it means changing the culture. It doesn’t happen overnight, but it’s something we’re working on.”

Kim Kiser is an editor of Minnesota Medicine.

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—JIM HYNES