



Implementing an On-Site Health Clinic that Allows a Company to Ensure Employee Satisfaction, Maintain Competitive Benefits, and Significantly Reduce Costs

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Implementation – Legal Perspective

- **Employer managed v. Onsite clinic provider**
- **Service offerings**
 - **Primary care**
 - **Mental health services**
 - **Worker's compensation**
 - **Occupational health**
- **Staffing model and capabilities**
 - **Who is at your clinic: MD, NP, PA, RN, LPN, MA, etc.**
 - **State-by-state analysis**

Implementation – Legal Perspective

- **Transition of clinic managers**
- **Pharmaceuticals**
 - **Dispensing**
 - **Prescribing**
 - **Administering**
 - **Controlled substances v. non-controlled substances**
 - **Opioid/Schedule II issues**

Implementation – Legal Perspective

- **Telehealth and telemedicine**
- **Multi-state clinics**
 - **Interstate medical licensure compact**
 - **Cross-border arrangements**
- **Healthcare records**
 - **HIPAA/HITECH**
 - **State law privacy issues**
 - **Mental health/psychotherapy notes**
 - **Worker's compensation records**
 - **Occupational health records**
 - **Integration with EMR and telehealth platform**
 - **Patient text-messaging, patient emails and patient portals**

Implementation – Legal Perspective

Employee Benefits Perspective

- **Is an onsite health clinic subject to: ERISA, COBRA, HIPAA, Internal Revenue Code, Affordable Care Act??**
YES!
 - **What does that mean?**
- **Other compliance issues**
 - **Coordination with current benefit plan design**
 - **Example: If employer sponsors a HDHP w/ HSAs, if so the employer needs to charge certain employees for using the clinic.**



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