Meeting Summary

National Association of Worksite Health Centers (NAWHC) members and other interested stakeholders gathered on September 8 to hear from employers and other industry experts about how to create, expand and measure the performance of onsite health and wellness centers. The event was offered in partnership with The Alliance, a Madison, WI-based, employer owned and directed health care cooperative. Below are key take-aways from the speakers’ presentations.

Creating an Onsite Clinic or Multi-Employer Clinic

Bruce Hochstadt, MD, National Lead for Employer-Sponsored Health, Willis Towers Watson

- Willis Towers Watson is seeing a spike in interest and activity around the country in the establishment of shared site/near site clinics serving multiple employers as an alternative to an onsite clinic serving an individual employer
- Other models gaining popularity are clinics with limited/part-time hours, clinics in partnership with local providers and clinics with telemedicine options that are not onsite
- Often the decision to go it alone or collaborate with other employers comes down to headcount. Does an individual employer have sufficient headcount to make a clinic economically viable or do they pool their populations and resources?
- Shared models come in many different “flavors:”
  - One employer is the sponsor and offers other employers to join
  - A “coalition” model: Several employers coming together to establish a clinic
  - Landlords establishing a clinic in a building or office/industrial park as an amenity
  - A “membership/subscription” model: A clinic operator establishes a clinic and offers memberships to employers to access the clinic
- Pros and cons of onsite vs near-site vs shared centers:
  - Onsite: Higher costs for buildout and operations, but greater convenience, access and utilization
  - Nearsite: Lower costs if in established or shared facility; less convenient for employees but greater access for dependents; avoids concerns about confidentiality and privacy
  - Shared: Low costs as expenses are shared among several employers or by property or clinic operator; Convenient to most workers and dependents; enables mid-size (<1000 employees) firms to offer center; less control than if offered solely by employer
Janette Berry, Benefits and Compensation Manager, Miniature Precision Component

- Initial questions employers should consider when planning to open an worksite clinic include the following:
  - What is the size of your workforce (shared clinic or go-it alone?)?
  - What is the average age of your workforce (what services should be offered and how do we communicate with them?)?
  - Employee risks factors and chronic conditions (what services should be offered?)?
  - Are you looking for cost controls (claims spend)?
  - Workforce proximity to care (where to locate the clinic)?
  - Organization's commitment to wellness (how will wellness efforts align with the worksite clinic)?
  - Has your workforce been asking for it (what the demand will be?)?

- According to a 2015 Mercer survey of employers the top eight reasons to open an a worksite clinic were:
  - Controlling total health spend (91 percent)
  - Reduce lost employee productivity (77 percent)
  - Enhance health/wellness leadership image (74 percent)
  - Managing employee health risk and chronic conditions (72 percent)
  - Improving member access to health care (68 percent)
  - Better quality/consistency of health care (61 percent)
  - Means of attracting and retaining valued employees (59 percent)
  - Managing work place injuries (47 percent)

- Assuming an employer wants to proceed with establishing a worksite clinic there are numerous key considerations to address in the planning process:
  - Own and manage the clinic vs. hiring outside vendor or a health system?
  - Determine staffing model (physician-led, nurse practitioners, physician assistants?)
  - Dispense medication?
  - Offer additional services (physical therapy, chiropractic care, occupational therapy, dietician, etc)?
  - Location decision (onsite, offsite, shared site with other employer[s])
  - Determine clinic policies (hours of use, access, cost, employees only?)

- Some of the key attributes for success include:
  - Building trust with employees – privacy is key; must be HIPAA-compliant
  - Gain buy-in from all stakeholders – senior management, employees, spouses and dependents and local providers
  - Continually communicate with all stakeholders
  - Measure results, including:
    - Bioscreen scores
    - Bioscreen & health risk assessment participation
    - Clinic utilization
    - What other services should be offered?
    - Return on Investment

- Advantages and savings are clear:
  - Improving access to care, at no or low cost
  - Increasing productivity, as people don’t need to leave the worksite for care
  - Offering care based on evidence, not revenue
  - Restored patient-provider relations, removing scheduling and revenue pressure, and connecting workers with primary care providers who may not have a relationship
Managing chronic conditions with face-to-face coaching, improving medication adherence
Tying into other worksite benefits and programs, using the center as the hub of the benefit and wellness activities
Increased preventive and screening engagement
Workers compensation, pre-employment physicals and other occup health savings as care is available onsite, at lower cost to employer
Improved retention and recruitment, as prospective and existing employees see value of benefit

The Journey into Onsite Care
Renee Joos, Director of Health Benefits, City of Milwaukee
- The City opened its worksite clinic in January 2015:
  - Staffed by a nurse practitioner
  - Services offered initially included diagnosis/treatment of minor illnesses/injuries, some vaccinations, basic onsite lab tests, coordination of care of chronic disease conditions and proactive outreach for prevention/early detection. Added physical therapy in 2016
  - Open 20 hours a week initially; now open 40 hours
  - Free to all employees and spouses regardless of insurance coverage with the city
  - Used existing space at City Hall with minimal investment needed
- Impact of the benefit plan changes and the opening of the worksite clinic included:
  - Emergency room visits decreased while urgent care visits increased
  - Office visits decreased while preventive care visits increased
  - Hospital admissions decreased by 6%
  - Workplace clinic utilization on track for 3,500 - 4,000 visits in 2016, up from 1,900 visits in 2015
- Key factors in the worksite clinic’s success included:
  - Gaining support of key stakeholders and city leaders
  - Selecting a trusted, known clinic operator (used the same vendor as the one running their wellness program)
  - Gaining the trust of the employees
- The value of a worksite clinic includes:
  - Good will generated by offering free quality health care to employees and spouses
  - Convenient and immediate access to care
  - Access to high quality, confidential care
  - Ability to recruit and retain employees

The Key Elements in Measuring the Performance of Worksite Clinics
Mike Taylor, MD, Chief Medical Officer, Truven
- One size does not fit all when it comes to worksite clinics. Various models exist in terms of their focus including:
  - “Minute” clinic limited services
  - Urgent care/occupational medicine services
  - Primary Care Medical Home approach
  - Chronic disease focused
- According to a 2015 Towers Watson, 60 percent of employers use a vendor to operate the clinic, 20 percent use a health care system and 20 percent self-operate the clinic
- There are many challenges to measure outcomes of a worksite clinic. These challenges include:
  - Measuring the ROI
Reaching agreement on what should be measured in terms of utilization and quality outcomes
The lack of independent validation of vendor outcome data
The lack of integration with claims, Rx and disability data

There are several different metrics that should be used to measure a worksite clinic’s performance, including:

- Utilization, including the intensity of the visits and number of visits per person per year
- Type of services provided and by what provider type (MD, PA, NP, etc.)
- Number and type of referrals to outside providers
- ROI measured in several ways:
  - Direct medical savings (dollars saved by services performed by the clinic vs. in the community)
  - Indirect medical savings (estimate avoided emergency department visits and hospital admissions)
  - Productivity savings (estimate the dollar value of reductions in time away from work for medical care associated with clinic visits)

Another valuable measurement involves comparing users of the worksite clinic vs. non-users including:

- Demographic information
- Chronic conditions
- Health care services utilization
- Quality of care and outcomes

Recommended Metrics and Challenges for Clinical, Financial and Satisfaction Performance

Larry Boress, Executive Director, NAWHC

- One-quarter of NAWHC member employers do not measure the effectiveness of their worksite clinic(s)
- Measurement of a worksite clinic needs to be more than a ROI assessment. Instead it needs to assess VOI – Value of Investment. These factors include:
  - Lost time avoided
  - Reducing cost of delivering medical services
  - Improved health outcomes
  - Avoided emergency department visits
  - Reduced health risks
  - Avoided hospitalizations
  - Increased generic medication prescribing
  - Chronic disease cost reduction
  - Higher productivity
  - Employee satisfaction
  - Ability to attract and retain top talent
  - Perceived organizational support for one’s health and well-being

- NAWHC is forming a performance metric committee – open to any NAWHC member – to come up with a set of guidelines and a toolkit to measure worksite clinic performance
- Employers and their vendors must agree up-front on definitions (e.g., what is a clinic) and how performance will be measured
- Key, broad measurement areas should include:
  - Administrative
  - Financial performance
Clinical outcomes
Patient satisfaction
From these broad measures employers can drill down into a host of specific detailed analyses

- Patient engagement is more than just how many people sign up for a program. It is instead about how many complete it
- Lack of good providers is a key reason why worksite clinics fail. Providers must reflect the culture and embrace the goals of the employer
- Performance metrics use to measure direct medical savings involve assessing primarily medical cost avoidance
- Performance metrics used to measure work-related savings generally revolve around productivity gains
- Key lessons and steps in measuring performance of clinics:
  - Decide on your objectives for the center
  - Create the measurement approaches you need to gauge success
  - Define and get agreement on your numerators and denominators from those responsible for reporting
  - Make sure your vendor/provider has the understanding of your objectives, measurement needs and reporting requirements and has state of the art ROI and VOI tools to meet expectations
  - Create performance guarantees with contractors based on your objectives and targets
  - Set expectations of senior management on VOI, not ROI, as cost savings and behavioral change could take 3-5 years
  - Use results for reporting to support increased resources for expanding and improving center services
  - Monitor reports for areas of improvement frequently
  - Make changes as needed

Expanding the Services: Integrating Complementary and Alternative Providers
Curt Krause, DC, Clinic Chiropractor, Cerner Healthe Clinic

- Bringing chiropractic care into a worksite clinic setting has several advantages to the employer and the employee including integrating effectively with other worksite health care services and saving money
- The Patient Centered Medical Home (PCMH) is becoming the standard for the effective delivery of care in a variety of clinic settings, including worksite clinics. PCMHs are integrating health care disciplines outside of primary care including adding chiropractors to the care team. Chiropractors within a PCMH model at Cerner work with primary care providers, physical therapists, certified athletic trainers, dieticians, health coaches, behavioral health specialists and maternity program nurse navigators
- When hiring a chiropractor for a worksite clinic these general criteria should be considered:
  - Three to five years of experience
  - Able to create effective care plans based upon the diagnosis using evidenced-based outcomes
  - Experience working in an integrative clinic
  - Has outstanding patient service
  - Holds advanced certification
- Numerous studies have demonstrated chiropractic care is cost-effective by lowering the utilization of diagnostic imaging and spinal surgery and incurring fewer emergency department and urgent visits and hospitalizations
According to numerous studies, chiropractic care has very high patient satisfaction scores.

Carly Deer, Senior Benefits Leader and Britta Reierson, MD, Clinical Practice Leader, Target Health & Well-Being Center

- Target’s Health and Well-Being Center (HWBC), with care provided by Park Nicollet, includes primary care physicians and many specialty services including:
  - EAP
  - Physical Therapy
  - Massage Therapy and Acupuncture
  - Chiropractor
  - Dermatology
  - OBGYN
  - Telemedicine
  - Biometric screenings
  - Flu shots and immunizations
  - Travel vaccinations
  - Lab services

- Complementary and alternative medicine services (chiropractic care, acupuncture and massage therapy) were chosen based on team member (employee) demand, whether it was a good fit with the company’s wellness approach and strategy and analysis of the utilization data.

- The reimbursement structure for complementary and alternative medicine services:
  - Chiropractic medicine – billed through insurance at Park Nicollet contracted rates
  - Acupuncture – self-pay or Flexible Spending Account eligible
  - Massage therapy – self-pay or Flexible Spending Account eligible

- Outcomes of chiropractic care:
  - Less visits/episode of care than community standard, saving Target $14,000 in claims/year
  - Clinician is evidence based, integrates with wellness/primary care
  - Outcomes are much better with combination of manipulative, active care and soft tissue manipulation
  - High patient satisfaction

Expanding the Services: Combining Occupational Health and Wellness Programs

Sue Gartner, Director of OnSite Health, BTE and Beth Mrozinsky, Director of Workplace Safety & Health, Harley-Davidson Motor Company

- In January 2016 Harley-Davidson’s health centers were rebranded and are now called Lifestyle Centers with the focusing being occupational health and wellness. BTE manages these Centers.

- The Lifestyle Center includes a health center, a rehab center and a fitness center staffed by a variety of medical professionals offering numerous health, rehab and fitness services.

- Integrated programs, using components of all three centers, include a new employee process involving testing, evaluation and work conditioning and an Early Intervention Program to provide conservative care before they become more serious issues and reportable events under OSHA guidelines.

- Some key takeaways for having a successful worksite clinic:
  - If you’re not in the business of running clinics use an outside vendor to run them, but the company still needs to remain completely engaged in the process – can’t be hands-off
  - Need to be philosophically aligned with their clinic vendor
Expanding the Services: Offering Obesity and Weight Management Services
Kimberly Hutton, MD, Chief Medical Officer, CareATC

- Obesity is a prevalent disease in the U.S. with currently 78.6 million Americans considered obese. If current trends continue, 86 percent of adults may be overweight by 2030.
- In addition to the significant medical costs related to obesity there are indirect costs affecting employers such as:
  - Presenteeism
  - Absenteeism
  - Short-term disability
  - Workers’ compensation
- Employers are using wellness programs to address obesity, with 90 percent in a 2012 Optum survey saying wellness solutions are an important part of the benefit mix, but only 49 percent of employees participate in them.
- Many employers don’t believe obesity management programs are very effective. According to a 2013 Towers Watson survey of jumbo employers, over 2/3 felt they were somewhat effective to not effective at all.
- Obesity management needs to be more simply implementing a wellness program. Employers need to:
  - Collect and analyze all their costs related to obesity
  - Assess their benefits related to obesity (wellness program incentives, anti-obesity medications, bariatric surgery)
  - Develop and implement evidence-based obesity management offerings to help employees with the disease
- Novo Nordisk WORKS™ is a website to help employers manage obesity with shareable PDFs about different obesity-related topics

Expanding the Services: Providing Pharmacy Service
Thomas Sondergeld, Vice President Global Benefits & Mobility, Walgreens Boots Alliance

- Employees see their pharmacist 10 to 15 times more often than they see their physician. The pharmacist plays a key role in the health care delivery system.
- Bringing pharmacy services to a worksite clinic in the past did not make financial sense unless there were at least 3,000 employees in a location. This forced Walgreens to look at new ways to deliver pharmacy services to worksite clinics. Pharmacy kiosks are one such innovation.
- Kiosks have vastly improved recently. Patients can now talk in real time to a pharmacist.
- There are, however, three kiosk limitations that must be recognized and hopefully can be addressed over time.
  - Can only put a limited number of prescriptions in a kiosk
  - Can only dispense certain drugs – no Class 1 or Class 2 drugs
  - Kiosk has to be filled by a licensed pharmacist
- Some clinicians are dispensing certain medications in a worksite clinic setting.

Traci Rothenburger, Clinic Manager, Nordic PrivateCare

- Nordic PrivateCare operates and manages worksite clinics for Flambeau, Inc. in Wisconsin and Ohio, offering an array of health care services including medication dispensing.
- Key elements of the medication dispensing program include:
  - A-S Medications provides the drugs
• Over 130 medications on site available for dispensing (no narcotics)
• Physician-driven – a physician dispenses medications; no pharmacist is involved
• Medications are dispensed and inventory and dispensing is tracked using Easy Scripts
• Offer immunizations as well

• Benefits of onsite medication dispensing include:
  • For the employee – saves time and money, better adherence
  • For the employer – saves money, deceases absenteeism and allows for immediate treatment of worksite injuries with OTC medications as appropriate