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- ▶ NAWHC is the nation's only non-profit association for employers and their vendor partners dedicated to the development and expansion of onsite, near-site, mobile, virtual health centers
- ▶ NAWHC provides a neutral forum for the exchange of information and experiences among employer health center sponsors and those supporting their efforts
- ▶ NAWHC hosts the nation's leading clearinghouse on data and information related to the design, implementation, management and measurement of worksite health centers
- ▶ NAWHC offers benchmarking, educational and networking opportunities focused on assisting employers in comparing, understanding and expanding the capabilities of worksite clinics into primary care and wellness centers

The Landscape of Worksite Health Centers

One third of all employers and over 60% of employers over 5000 workers offer a worksite health center



- While an onsite center is the predominant model, near-site and shared centers are the fastest growth area, with plans beginning to offer centers for fully insured clients
- Center services are determined by the employer, but can include:
 - ▶ Urgent, episodic, preventive, primary care, chronic disease, behavioral, occupational and population management services
 - ▶ Ancillary services, such as pharmacy, lab and x-ray are popular
 - ▶ Acupuncture and chiropractic services for MSK and pain mgmt.
 - ▶ Telehealth/virtual care a core part of centers today
- ▶ Most centers are led by mid-level practitioner (NP/PA) with MD oversight
- ▶ Center sizes range from 200 square feet to 25,000 sq. ft.
- ▶ Most provide services at little or no cost to workers/dependents
- ▶ 65% managed by 3rd party vendor; 20% by health provider and 15% self-managed

The Value Proposition for Onsite, Near-site, Virtual and Mobile Worksite Health Centers

Reduce lost time and absence from work

Improve productivity

Improve access and convenience

Offer primary care

Save money

Reduce trend, lower total benefit spend and deliver ROI

Improve health outcomes

Manage worksite injuries and illnesses

Lower workers' compensation costs

Boost employee value proposition

Reduce employee out of pocket in HDHPs

Lower family expenses

Drive greater engagement in health coaching and care management

Add important touch points

Offer higher quality and consistency of care than what is currently delivered in the community

Based on individual community medical system performance