

2015 CLE Marathons

Addressing Employee Health and Wellness:

Employer Options for On-Site Care

January 13, 2015

The Pillsbury logo is displayed in a white rectangular box. The word "pillsbury" is written in a lowercase, red, sans-serif font. The background of the slide features a close-up of a speedometer with a needle pointing towards the 30 mark, and the word "MINS" is partially visible at the bottom. The right side of the slide has vertical green and blue stripes.

Overview

- What do workplace clinics look like in 2015?
- What are employers trying to accomplish?
- How are cost savings being realized?
- What is in it for employees?
- How are employees incentivized to use workplace clinics?
- What operational issues do employers encounter?
- What legal issues do employers encounter?

How are work place clinics being re-invented?

- Historically
 - Industrial injuries
 - Executive perks
 - Occupational health
 - Kaiser model
- Current trends
 - Health promotion (encouraged by ACA)
 - Primary care
 - Pharmacy
 - Dental
 - Chiropractic/massage
 - Employee assistance

What are employers trying to accomplish?

- Control direct medical costs
 - Specialists visits
 - Use of non-generic drugs
 - Emergency room visits
 - Avoidable hospitalizations
- Improving population health by better managing chronic conditions
- Boost productivity
- Reduce absenteeism
- Prevent disability claims and work-related injuries
- Improve access to and quality of care
- Attract and retain a competitive work force
- “Best Places to Work” recognition

How are cost savings derived by employers?

- Ability to influence drug prescribing
- Oversight of tests and procedures
- Oversight of specialist referrals
- Early diagnosis and treatment
 - Avoid ED visits
 - Avoid hospitalizations
 - Reduce costly downstream complications

What benefits are being derived by employees?

- Shorter wait times for appointments
- Shorter waiting room times
- Longer clinician-patient encounters
- Managing wellness rather than responding to incidents of sickness
- Ability of clinicians to bond with patients to create trusted relationships
- Evidence based care
- Electronic health records
 - internal coordination
 - improved quality
 - cost containment

How are employees incentivized to use work site clinics?

- Financial incentives
 - Lower or waived co-payments
 - Lower deductibles
 - Fixed prices for specialist visits
 - Reduced premium sharing
- Quality of life
 - Get a text message when its time for your appointment
 - See the same clinicians
 - Feel part of the care family

What are operational issues that employers face?

- How “company” is the clinic
 - Privacy of information
 - Impermissible uses of health care information
- Selecting clinical vendors and equipping clinics
 - Buying services and equipment not traditionally procured
 - Dealing with standardized procurement procedures
 - Coordinating disparate service offerings
- Developing appropriate scale and scope of services
- Oversight of clinical services
 - Standardizing policies and procedures
 - Internal oversight – the company medical director
 - External oversight – another cadre of consultants

What are the legal issues employers face?

- Clinic licensure
- Corporate practice of medicine prohibitions
- Regulation of mid-level providers
- Drug storage and dispensing
- Privacy and security of personal information
- Disposal of bio-medical waste
- Handling of laboratory specimens
- Workplace wellness programs and the ADA
- Telemedicine regulation
- Deducibility/excludability from income if services not medically necessary

What are the labor related implications?

- Clinic workforce safety rules for clinic staff
- Clinics as employee welfare benefit plans under ERISA
 - COBRA continuation coverage
 - Summary Plan Description, which describes the benefits provided by the clinic
 - Claims and appeals
 - Privacy of the health information of clinic patients
- HSA implications if medical coverage is not a qualified high-deductible plan
- Clinic operations/services may need to be the subject of collective bargaining

What are some lessons learned?

- Employers who are not already health care providers face myriad unfamiliar issues
- The “make” versus “buy” decision may have to be addressed more than once
- Medical leadership can be a key ingredient
- When you have seen one employer-based clinic, you’ve seen one employer-based clinic

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