Part I:
The Employer’s Guide to Onsite Clinics:
How to Optimize Healthcare Dollars

Stay tuned for Part II that includes an RFP checklist.
Contents

Introduction and the Changing Role of Onsite Clinics ................. 3-4
Trends in Onsite Clinic Adoption ........................................... 5-6

What Employers Want In an Onsite Clinic ........................................... 7
Onsite Clinic Benefits ............................................................................... 8-9
Measuring Success: ROI and More .................................................. 10-11

How To Select an Onsite Clinic Vendor ........................................... 12
Alternative Clinic Models .................................................................... 12
Vendor Identification and Selection .................................................. 13
Employer/Vendor Alignment ......................................................... 14-15
Essential Vendor Capabilities ........................................................ 16

Stay tuned for Part II that includes an RFP checklist.
Introduction

The Changing Role of Onsite Clinics

The 2016 Healthiest Employer® “Onsite Workplace Clinic Survey” of employers, brokers, and vendors reveals a new role for onsite clinics. Today’s clinic has outgrown its first-generation roots in the construction, shipyard and steel mill clinics that eventually became Kaiser Permanente.

While the strategic goals have remained the same — cost-effective healthcare that protects worker productivity and enhances job satisfaction—the latest onsite clinic trends have far more strategic value than Henry Kaiser may have ever imagined.

The Transition To Primary Care

Originally focused narrowly on occupational health and regulatory compliance, interest in onsite clinics surged in the 2000s. A response to dramatic health cost increases, this second generation of onsite clinics focused on primary care for employees. Their main goal was to shift expensive visits in doctor offices, retail urgent care clinics and ERs to the less-expensive onsite clinic, and improve productivity by eliminating related travel and appointment wait times.

Clinics demonstrate strong financial return on investment while increasing worker productivity and containing healthcare costs.

While an important step forward, these clinics often operated in isolation from employee wellness initiatives. Reliance on strictly clinical data with little visibility to carrier, pharmacy, biometric, and HR data constrained their impact. Moreover, limited historical reporting severely constrained how employers identified and targeted the highest-value health improvement opportunities for its workforce.

Beyond Primary Care

The third generation of onsite medical clinics is now emerging, characterized by:

- New models that reach employers with as few as 200-500 employees
- Expanded clinical services and capabilities focused on chronic disease management
- Full integration with existing corporate wellness and prevention initiatives
- Integrated carrier, clinician and employer data for real-time action
- Powerful predictive health analytics that enable targeted engagement

These clinics partner with employers to provide end-to-end stewardship of workforce health, fully integrating population health and risk assessment with evidence-based prevention and employee wellness programs. In addition to primary and urgent care, they provide specialty care and ancillary services. They’re positioned as medical homes and take the lead on disease management initiatives.
This evolution has been driven by the integration of claims, pharmacy, biometric, and payroll data through powerful cloud-based analytics and reporting platforms. These tools give employers and clinicians deep insight into workforce health and make it possible to intervene and invest when and where they’ll have the most impact.

Our survey also found that this transformative change is shaping important trends in clinic planning and implementation, and best practices in vendor selection, and ongoing evaluation of clinic results.

Achieving The “Triple Aim”

In the post-ACA world, onsite clinics play a critical part in achieving the employer’s triple aim: more health, less cost and greater productivity. To contain costs, most employers have doubled down on prevention, cost reduction and cost shifting rather than outright benefits reduction. Clinics demonstrate strong financial return on investment while increasing worker productivity and containing healthcare costs.

“Cloud-based analytics and reporting platforms [...] give employers and clinicians deep insight into workforce health and make it possible to intervene and invest when and where they’ll have the most impact.”
Trends in Onsite Clinic Adoption

Historically, clinics were affordable only by very large employers. However, today’s clinics are practical for employers with as few as 500 workers, which represent a market of about 17,000 businesses.¹

With current penetration of only 16% in this market and projected annual growth rates approaching 20%, onsite clinics are well on their way to becoming the healthcare provider of choice for over 10% of the U.S. adult population under age 65.²

Projected Clinic Adoption Rates by Employer Size

<table>
<thead>
<tr>
<th>Company Size # of FTEs</th>
<th>Employers w. Onsite Clinics 2009 Actual</th>
<th>Employers w. Onsite Clinics 2015 Actual</th>
<th>Employers w. Onsite Clinics 2020 Projected</th>
<th>% Penetration of Total Market 2020 Projected</th>
<th>Compound Annual Growth Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>500—4999</td>
<td>800</td>
<td>2207</td>
<td>5,049</td>
<td>33%</td>
<td>18%</td>
</tr>
<tr>
<td>5000+</td>
<td>400</td>
<td>521</td>
<td>633</td>
<td>35%</td>
<td>4%</td>
</tr>
<tr>
<td>Total 500+</td>
<td>1,200</td>
<td>2,728</td>
<td>5,682</td>
<td>32%</td>
<td>15%</td>
</tr>
</tbody>
</table>

Estimated from Healthiest Employer, U.S. Census Bureau, Fuld & Company, and Mercer data.

Growth rates are naturally lower for the largest employers who were the earliest adopters. Yet, even they plan to add more clinics. In addition, near-site and shared services models provide yet more options for both larger employers with satellite locations and for businesses as small as 200–300 employees.

While the IRS has said that clinic costs will be considered in the ACA’s “Cadillac tax” calculations, ongoing clinic growth supports employers’ view that clinic payback outweighs any potential ACA penalty.
“Clinics are becoming the quarterback of the patient’s healthcare team [...] integrating every aspect of patient care...”

Expanded Scope, More Healthcare Savings

Don’t confuse today’s onsite or near-site clinic with yesterday’s occupational health clinic.

More and more employers are designating their onsite clinics as in-network primary care providers and as medical homes. They’re becoming the quarterback of the patient’s healthcare team, responsible for integrating every aspect of patient care into a comprehensive treatment plan.

The scope of services provided by clinics launched in the last fifteen years is exceptionally broad, and includes:

- **Wellness**: health risk assessments, exercise and weight loss initiatives and other population risk management services
- **Preventive care**: health screenings, flu shots, annual physicals and other activities designed to prevent illness or provide early detection
- **Acute care**: short-term treatment of illnesses or injuries like colds, flu, minor infections, sprains and cuts, and urgent care for acute symptoms related to chronic conditions
- **Condition and disease management**: ongoing treatment of chronic health concerns like diabetes, heart disease and sickle cell anemia
- **Specialty and ancillary care**: ob-gyn, pediatrics, orthopedics, imaging, pharmacy, dietetics, physical therapy, dental care, etc.

In fact, most onsite medical clinics offer biometric screenings, and about 60% offer condition and lifestyle interventions. About 40% also offer onsite prescriptions.³

Some employers include occupational health in their onsite clinics. Others feel that the doctor/employer communication that routinely occurs in occupational health undermines the trust necessary for successful primary care. They prefer to maintain a separate occupational health function.

Once employers make the initial investment necessary to launch a clinic, the cost of adding incremental services drops substantially. Moreover, each new service incrementally improves absenteeism. This phased approach makes it even easier to achieve a higher ROI while minimizing risk.

What Employers Want in an Onsite Clinic

What’s driving such dramatic growth in onsite clinics? Our June 2016 research finds that employers place employee health and productivity at the top of their priority list, while clinic vendors report that the most common goal for their clients is healthcare cost reduction. The differences in ranking are small; however, our data reveals remarkably strong goal alignment:

Top Five Strategic Priorities for Workplace Clinics

<table>
<thead>
<tr>
<th>Employers</th>
<th>Clinic Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Build culture of health</td>
<td>Reduce healthcare costs</td>
</tr>
<tr>
<td>Reduce healthcare costs</td>
<td>Build culture of health</td>
</tr>
<tr>
<td>Manage chronic conditions</td>
<td>Manage chronic conditions</td>
</tr>
<tr>
<td>Earliertreatment</td>
<td>Reduce absenteeism, reduce ER/urgent care visits (tie)</td>
</tr>
<tr>
<td>Improved retention, reduce ER/urgent care visits (tie)</td>
<td>Earlier treatment</td>
</tr>
</tbody>
</table>

The Healthiest Employer® survey also examined alternative priorities among employers who have not chosen to implement onsite clinics. In general, these employers focus primarily on healthy lifestyle activities, with 70%+ assigning top priority to nutrition and fitness initiatives. Risk assessment is a close second, with 60%+ prioritizing HRAs and biometric screenings.

Alternative Priorities Employers without a Clinic:

- 70%+ Nutrition & fitness
- 60%+ HRAs & biometric screenings

Fewer than half have invested in:
Disease management, smoking cessations, health coaching or weight loss interventions.

Fewer than half of employers without onsite clinics have invested in disease management or smoking cessation, and barely half have invested in health coaching or weight loss interventions.

In summary, employers who lack onsite clinics have preferentially invested in wellness and prevention activities, and less in optimizing healthcare utilization and improving chronic condition management.

Since utilization and chronic conditions account for most healthcare spending and for the greatest loss of employee productivity, serious consideration of onsite clinical services is worthwhile for any employer that wants to maximize ROI on its health and wellness investment.
Onsite Clinic Benefits

Our survey indicates that onsite clinics offer benefits in seven distinct areas that closely align with employer priorities. The relative importance of each area varies by employer based on the risk profile of its unique workforce and the strategic role of employee health for the organization.

1. Lower health costs

Onsite clinics help reduce primary, specialty and chronic healthcare costs in several ways, including:

- Reductions in the number of large or long-term claims by preventing full-blown chronic disease and initiating earlier treatment for serious health issues
- Enabling new plan design options that reduce cost while providing the same or better care
- The ability to more easily implement value-based payment strategies for providers
- The ability to tailor more cost-effective and efficient provider networks

2. Increased employee productivity

Typical onsite clinic visits take only 30 minutes, compared to an average of 2.5 hours of lost time for off-site clinic visits.² Employees spend fewer business hours:

- Locating a provider for appointments
- Scheduling an appointment
- Traveling to and from the off-site provider
- Waiting at the clinic for the appointment to start
- Anxious awaiting results from diagnostic procedures

3. Optimized access to primary care

Many patients complain about limited appointment availability and dysfunctionally short appointments averaging no more than 20 minutes in traditional primary care settings.³ In many cases, these hurdles trigger expensive and avoidable visits to retail urgent care clinics and emergency rooms. On-site clinics offer a solution to this problem via:

- Better access to primary care providers, particularly in regions with primary care shortages
- Greater availability of convenient appointments
- Longer appointments with providers when helpful
- Fewer urgent care and ER visits due to poor primary care appointment availability
- Fewer hospitalizations due to primary care treatment delays

---

³ “The Duration of Office Visits In the United States” Shaw, et al.
4. Optimized specialty care

Specialist referrals significantly impact employer healthcare budgets. Onsite clinics offer a patient-friendly opportunity to reduce unnecessary or premature specialist referrals:

- Less pressure to compress appointments reduces the provider’s incentive to quickly refer to a specialist
- Coordination of specialists by clinic providers prevents gaps, overlaps and duplicate procedures
- Clinic providers can ensure that diagnostic and treatment data are timely and fully communicated to all stakeholders
- Part-time or full-time onsite specialists can better meet unique workforce needs (e.g., a cardiologist for an older workforce or an ob-gyn for a largely female workforce)

5. More cost-effective ancillary services

Once baseline primary care services are in place, strategic expansion into selected ancillary services offers even more opportunity to improve ROI, usually for much less incremental cost. For example, one clinic vendor reports time savings ranging from 30 minutes for pharmacy visits to 60 minutes for lab visits. Common ancillary services offered by onsite clinics include:

- Outpatient diagnostics and procedures, including labs, X-ray and other imaging procedures
- Pharmacy and medication management
- Physical therapy and exercise prescriptions
- Nutrition counseling by registered dietitians
- Health and lifestyle coaching by licensed healthcare professionals

6. End-to-end population health management

A highly capable onsite clinic enables far more strategic population health management. For example, employers can reduce healthcare costs while improving employee health by:

- Using health analytics to direct vendor interventions toward key opportunities for cost-effective health improvements
- Integrating wellness and healthcare initiatives into end-to-end initiatives
- Comparing the relative efficacy of different vendor interventions and initiatives
- Reducing gaps in care that contribute to healthcare costs and risk
- Improving prescription adherence and use of generic substitutes for brand-name drugs
- Improving patient compliance with a recommended treatment plan
- Increasing use of high-performing network providers
- Increasing provider adherence to standard-of-care treatment guidelines
- Ensuring consistent chronic disease treatment and increasing enrollment in disease management programs

7. Greater employee & dependent utilization and satisfaction

Onsite clinics can drive greater employee and dependent engagement and clinic utilization while enhancing employee satisfaction through multiple factors including:

- Perceived clinic responsiveness, convenience and efficiency
- Clinic effectiveness and quality of provider interactions
- Confidence that private information will remain private
- “Carrots and sticks” that incent employees to choose the onsite clinic over other alternatives like office visits or retail urgent care visits

Measuring Success: ROI and More

Onsite clinic performance typically captures employee satisfaction, clinic utilization, and cost and productivity metrics.

Within these dimensions, our 2016 survey found that employers assign essentially equal importance to these ten criteria:

1. ROI
2. Clinic utilization
3. Prescription adherence
4. Fewer gaps in care
5. Medical claims reduction
6. Projected cost reductions
7. Reduced absenteeism
8. Access to preventive care
9. Improvement in health status
10. Employee/patient satisfaction

A very high proportion — 75% — of employers who offer onsite clinics specifically measure clinic ROI, whereas our most recent Healthiest Employer® Strategic Assessment finds that only 23% of employers say they measure ROI for traditional employee wellness initiatives like fitness.

88% report a positive clinic ROI, with 41% reporting a $1.50 to $2.99 payback for every dollar invested. 12% report returns greater than $3 for every dollar spent.

Diverting appointments from traditional outpatient venues—primary and specialist office visits, retail and urgent care clinics, emergency rooms, etc.—to the lower-cost on-site clinic typically generates the most immediate savings.

Longer-term savings typically come through increased screenings and improvements in chronic disease management, including treatment plan adherence. Soft dollar savings from improved absenteeism, while valuable to employers, are more difficult to quantify.

The rapid adoption of health analytics has fueled hard dollar savings. Tools like Springbuk® provide a window into future savings opportunities. Meaningful and accurate ROI evaluation requires the use of objective, third-party analytics platforms to:

- Analyze clinic data and uncover actionable trends in utilization
- Integrate and analyze clinic data with data from other stakeholders including carriers, pharmacies and employers
- Periodically update ROI to reflect actual clinic performance as distinct from the ROI impact of other benefits changes
- Ensure inclusion of all expenses associated with the clinic’s launch and ongoing operation
- Capture and quantify relevant KPIs like before/after PEMP health costs
- Measure reduction in gaps in care including medication adherence and physician standard-of-care compliance
- Identify geographies and worksites to implement additional or expanded clinic services

8 Mercer, 2015
88% report a positive clinic ROI.

41% report $1.50 to $2.99 payback for every dollar invested.

12% report returns greater than $3 for every dollar invested.
How to Select an Onsite Clinic Vendor

Alternative Clinic Models

While the earliest adopters of onsite clinics had to hire and manage their own clinical staff, few do so today. Two-thirds outsource clinic operations to a third-party management company, health system or group practice, and the rest staff and manage the clinic with company employees and/or local contracted providers.⁹

Outsourcing to a clinic vendor who provides a turnkey solution including clinic managers and staff is by far the most common choice. However, multi-clinic employers sometimes implement different models at different locations depending on vendor capability and local provider availability.

The case for outsourcing is compelling for most employers, primarily due to regulatory complexity and the challenge of staffing an organization with recruiting requirements that fall far outside the employer’s core business.

Clinics are subject to a long list of complex federal and state regulations that can include everything from clinic operations to physical facility requirements, data privacy, the employment status of clinic staff, dependent eligibility to use the clinic, and much more, making employer-staffing of onsite clinics a less attractive option than outsourcing.

Even if an employer-managed clinic is appealing despite these constraints, finding the right providers to staff the clinic can be a challenge. Employers may find that providers who do well in an urgent care or retail clinic setting, oriented around short single-purpose visits, may not be suited to an on-site clinic model that’s positioned as a medical home for employees. Providers accustomed to traditional clinic operations may lack the responsiveness and customer service skills that employees expect.

Near-site shared services and part-time models are especially appealing options for remote locations and employers with as few as 200—300 employees. For example, several employers in a single business park may jointly sponsor a conveniently located clinic exclusively for employee and dependent use. Others may contract with a registered nurse or nurse practitioner to visit their facility one or two days/week.

Emerging Vendor Payment Models

Currently, several models compete in the onsite clinic environment. Some clinics use a fee-for-service model and submit claims to the employer’s carrier, just like traditional clinics and providers.

Others bill the employer on a cost-plus or fee basis, and a smaller number use a capitation (PEPM) model. Clinic costs—labor, facilities, licensing and insurance, equipment and supplies, etc.—are marked-up by an agreed-upon percentage and billed to the employer. This approach requires extensive joint planning by the employer and provider to project clinic capacity, utilization, staffing needs and ongoing operational expenses. It’s critical that the employer and provider share expectations on how to best incent provider efficiency.

Consistent with trends in the broader healthcare market, we expect true value-based payment models to emerge rapidly in the onsite clinic space. This approach aligns the goals of the employer, patient and provider and is well suited to the comparatively controlled environment of an onsite clinic.

⁹ Willis Towers Watson, 2015.
Vendor Identification & Selection

Our survey revealed that employers typically rely on a formal RFP process and peer recommendations to identify a short list of potential clinic vendors from which to make a final selection.

They often seek out broker and consultant counsel, and are less likely to rely on recommendations from wellness vendors. They find conferences, trade shows and web searches least helpful.

They offer the following tips to employers considering an onsite clinic:

— Choose a vendor whose expertise matches the employer’s goals for the clinic
— Look for vendors with a track record of both good care and good reporting
— Closely manage clinic vendor contract compliance and reporting
— Use an objective and experienced third-party, like a broker or consultant, to assist with feasibility analysis
— Fully engage employees in clinic design and implementation to maximize utilization
— Ensure all stakeholders are continually looking for new ways to maximize the clinic’s impact

Determining the right answers requires a multidisciplinary team that blends knowledge of the employer’s organization with the clinic vendor’s expertise, supplemented by outside broker or consultant expertise as needed.

Employers considering onsite clinics typically face an array of complex decisions during the vendor selection and implementation period, including:

— What will the initial scope of services be?
— How will the clinic report success metrics?
— What are the analytical capabilities to gain a complete view of the population health program?
— Will the clinic serve only employees, or dependents as well?
— Will co-pays and deductibles for clinic patients be waived or reduced?
— Will the employer require workers to clock out while visiting the clinic?
— Will prescriptions be filled onsite? If so, which ones will be maintained in inventory?
— Will any lab procedures be performed onsite? If so, which supplies will be maintained in inventory?
— How will the clinic interact with any existing occupational health resources?

Determining the right answers requires a multidisciplinary team that blends knowledge of the employer’s organization with the clinic vendor’s expertise, supplemented by outside broker or consultant expertise as needed.
Alignment between the employer and the clinic vendor must exist in six critical areas:

1. **Insight into the Employer’s Strategic Goals**

Clinic vendors and employers must have a shared vision of the role of workforce health in the employer’s business strategy. This insight goes far beyond a simplistic focus on claims, cost reduction and enhanced employee convenience.

For example, a retailer whose stock price depends on a successful December holiday season may prioritize clinic services that keep call center and fulfillment workers healthy during the cold and flu season.

2. **Insight into the Employer’s Unique Workforce**

Clinic vendors and employers must also understand the risk profile and health status of the employer’s unique workforce. Onsite clinics are emphatically not “one size fits all.”

For example, a comparatively younger workforce may benefit from expanded on-site pediatric and ob-gyn services, whereas closing care gaps for employees with chronic health issues may offer more bang for the buck in an older workforce. A long-haul trucking company may prioritize telehealth and dietetic services for drivers to minimize the risks of a sedentary job with limited food alternatives while on the road.

Even different locations within a single employer may have different needs. A facility in a more rural area may need better access to primary care and urgent care services to avoid ER visits. A headquarters location in a large city might benefit from better management of expensive specialist care.

3. **Management and Employee Buy-In**

Successful clinics partner with employers to maximize employee awareness of clinic capabilities and policies designed to encourage its use. This typically includes implementation of a comprehensive internal marketing campaign.

Employee-friendly features help maximize utilization and ROI by making the onsite clinic the provider of choice for non-emergency care:

- Drop-in, same-day and/or same-week appointments
- Extended evening or weekend hours
- Extended 30-60 minute appointments rather than rushed 20-minute slots
- Onsite prescription refills
- Availability of other ancillary services like common lab tests or imaging
- The ability to avoid waiting at a retail urgent care center
- Reduced or waived co-pays
- Permission for hourly workers to visit clinic without clocking out

4. **Commitment to Privacy and Confidentiality**

Employers and vendors must also explicitly acknowledge employee concerns about privacy and reinforce the company’s commitment to protect employee privacy, including employee health data.

Employers must ensure that employee data is never inappropriately shared or used in employment decisions. However, privacy concerns extend beyond data security, and policies alone are not the answer.

Clinic operating procedures must also provide privacy for patients visiting the clinic. For example, some clinics use restaurant-style pagers rather than calling patient names aloud in waiting areas. Certain clinic departments may require physically separate entrances and exits. Clinic staff must be trained to never discuss patient matters in public areas like company restrooms and cafeterias.
The most successful employer/clinic partnerships result when strong HR teams simultaneously represent the employer’s strategic interests and serve as advocates for employee wellbeing.

5. HR Capabilities

As our 2016 Workplace HealthScan “What’s the HR Organization of the Future?” reported, the most successful employer/clinic partnerships result when strong HR teams simultaneously represent the employer’s strategic interests and serve as advocates for employee wellbeing.

HR teams with the following capabilities are best positioned to collaborate with vendors on successful onsite clinic implementations:

— Critical thinking and analysis skills to develop and test hypotheses about how to enhance clinic performance and achieve overall workforce health objectives

— Data-driven problem solving applied to both traditional and new data sources in order to identify population-level opportunities and risks that the clinic vendor can address by partnering with other wellness resources

— A “can-do” approach that supports innovation while helping the organization mitigate the potential risks of change

6. Consultation with Legal and Tax Advisors

Onsite clinics are subject to a variety of federal and state regulatory and statutory requirements, including OSHA, HIPAA, GINA, ADA, ERISA, COBRA, state privacy and data security requirements, workers’ compensation and other occupational health considerations, and more.

All medical clinics including onsite clinics are also subject to physical facility and operational requirements governing a variety of issues like biomedical waste disposal and secure drug storage.

Many states also regulate the employment and compensation status of clinic staff as well as credentialing and supervision requirements for mid-level providers like nurse practitioners and medical assistants. These requirements can affect both the legal structure and staffing model for your clinic.

Collective bargaining agreements may also affect clinic implementation decisions for unionized employers.

Including employment law counsel and if needed, healthcare counsel, in upfront project planning with the clinic vendor will ensure full consideration of these issues and others.

Employers should also include the executive responsible for company risk management to ensure appropriate changes to liability and property coverages.
Essential Vendor Capabilities

The most critical vendor capabilities include:

— Ability to staff with responsive, capable and service-oriented administrative staff and clinicians with excellent patient communication skills

— Integration of a population health management tool which identifies gaps in care and other actionable insights

— Integration of predictive health analytics which model opportunities to improve care and lower costs

— Integration of clinic, carrier, pharmacy, biometric, activity/wearable and HRIS data

— Interoperability of the clinic’s EMR with outside primary care, specialty and ancillary providers’ EMR platforms

— Formal onsite clinic protocols that ensure effective treatment and adhere to standard-of-care best practices

— Demonstrated success in communicating with carriers, TPAs, etc., to deliver cost and productivity improvements, improved health outcomes and comprehensive reporting

— Experience in implementing scalable operational models that successfully adapt to customers’ changing requirements

— Online patient resources including appointment booking, rescheduling, and cancellation, self-care, eHealth, secure provider/patient email, and patient education and support resources

— Online real-time employer access to population health data, clinic costs and actual savings, utilization and claims data, clinic productivity data, drug and supplies inventory data, and employee satisfaction data

— Implementation experience in each state in which you plan to open an onsite clinic, since state regulations for both providers and clinics can vary

Implementation Barriers and the Future of Clinics

As clinic adoption has grown, so has the importance of ensuring they are implemented successfully and in a manner to ensure future success for the employer. Stay tuned for “Part II: The Employer Guide to Onsite Clinics” where we address the future of onsite clinics and provide you with an RFP checklist.

Ready to Optimize your Healthcare Dollars?

Get Demo
info@springbuk.com

Learn More
springbuk.com

Stay tuned for "Part II: The Employer Guide to Onsite Clinics" where we address the future of onsite clinics and provide you with an RFP checklist.