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Is There A Doctor in the House?

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Fifty years ago, a sick or injured worker in a manufacturing plant did not have to leave work to get health care – the worker simply went to the plant clinic and saw the company doctor. Today, the idea of the company clinic is making a come back, but with a new emphasis on wellness and prevention.

As employer health plan costs continue to increase by double digits annually, more employers are recognizing that healthier employees produce lower medical claims. These employers are implementing company wellness programs that encourage employees to adopt and maintain healthy lifestyles. Employer wellness programs range from providing healthier alternatives to vending machine snacks, to subsidizing gym memberships, to providing reduced health plan premiums to employees who achieve stated health benchmarks.

Some employers are going farther.

Prominent Indiana employers such as Eli Lilly and Company, Vectren Corporation, and Monarch Beverage maintain onsite medical clinics for their employees. According to a recent survey by the National Business Group on Health, 23 percent of surveyed employers with more than 1,000 employees reported offering on-site medical services in 2007, while 29 percent plan to offer a program in 2008.

Staffed by physicians, nurse practitioners, and health advocates, an onsite clinic's convenience can increase the likelihood of an employee seeing a health care provider for their medical needs. Employees can visit the clinic on their lunch break to get a flu shot or be treated for minor illnesses such as a sore throat instead of taking a half day off of work to visit their family doctor. Maintaining the clinic can reduce the employer's health plan costs for physician and emergency room visits, while reducing absenteeism associated with minor illnesses that go untreated.

In addition, patient loads in onsite clinics are usually lower than in a family doctor's office, allowing onsite clinic providers to spend more time with their patients discussing health recommendations and concerns.

In some cases, these routine visits can lead to the discovery of potentially serious conditions that might have otherwise gone unnoticed and could have resulted in significant claims to an employer's health plan.

A routine urinalysis at the clinic to diagnose a urinary tract infection might reveal serious kidney problems that should be treated by a specialist.

The convenience of onsite clinics to employees can promote the prevention, detection, and early treatment of serious conditions.

Clinics in the manufacturing plants of the past concentrated on workplace injuries and treatment of minor health conditions.

Today's clinics certainly offer these functions and provide value through primary care, onsite return-to-work programs, disability and worker's compensation programs, and coordination with employee assistance programs.

But today's onsite clinics go farther and are an integral part of employers' larger wellness initiatives. These clinics can provide wellness screenings, administer tobacco cessation programs, develop personalized health coaching plans, and might offer lunchtime seminars on diabetes management or stress reduction.

Employees at high risk for disease can receive onsite preventative coaching and have their health conveniently monitored.

For example, a diabetic employee could have a standing weekly appointment during her break to have her blood sugar checked.

An employer might even offer a premium discount to employees who visit the clinic once per quarter for regular cholesterol, blood pressure, or other wellness screenings, or charge a lower co-pay to employees under the employer's health plan for onsite clinic visits than for visits to their family physician's office.

The current conventional wisdom holds that employers with at least 500 to 1,000 employees at a work site and that are self-insured may benefit from an on-site clinic that is integrated with a robust wellness program.

An employer might see as much as a three to one return on investment through lower health care costs and increased productivity within three years.

When setting up onsite clinics, employers should be aware of potential legal risks. First – and foremost in many employees' minds – is the privacy of employee health information. The privacy and security regulations of the Health Insurance Portability and Accountability Act may apply to the onsite clinic's health data, as well as confidentiality restrictions under the Americans With Disabilities Act. Extreme care must be taken to ensure that the clinic's health data is confidentially maintained, is used only for clinic and wellness program purposes, and is not disclosed to the employer to make employment-related decisions such as hiring, termination, and promotion decisions.

Second, the employer must determine how to staff the clinic. If the employer intends to employ the clinic staff, it must be aware of the medical malpractice liabilities and regulatory burdens it might face. Often employers will contractually engage a clinic vendor or independent health care provider to staff and manage the clinic and to take the risk for these liabilities.

Ensuring that the clinic's providers are properly licensed and credentialed, are screened, and maintain appropriate medical malpractice insurance are critical issues. In addition, the employer must ensure that non-physicians are properly supervised by a physician medical director and that a physician is on-call to handle emergencies.

Furthermore, any agreement should clearly set forth hours of operation, the scope of services to be provided at the clinic, and the health care providers' indemnification obligations to the employer in the event the employer is liable for the providers' negligence.

Onsite medical clinics can be a tool for medium to large employers to encourage employees to receive timely and appropriate care, while promoting wellness and healthy lifestyles. As health care costs continue to rise, more employers are coming to understand the benefits of investing in their employees' health and are moving the "company doctor" into the twenty-first century.

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