

WORKSITE HEALTH CENTERS

LOWER COSTS, BETTER OUTCOMES,
STRONGER WORKFORCE



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Acknowledgments

The development of this white paper benefited significantly from the input and support provided by our trusted internal and external stakeholders. Your collective investment in improving healthcare makes our work possible, rewarding and gratifying.

We sincerely thank our employer partners for their openness to sharing their innovative and creative programs in this project. Your courage and willingness to think differently makes healthcare more accessible and affordable for all employees. We thank our entire InterMed family who supported this work and provided essential data, expertise and feedback throughout this process. Your investment in this work further strengthens our core commitment to “care without compromise, every patient all the time.” We thank our worksite health team for their daily dedication, compassion and drive to make the healthcare experience a positive one. Your kindness and care are felt by every patient that walks into our health centers. Lastly and most importantly, we thank our patients for putting the purpose in our work, trusting us with your care and sharing your personal stories with the world through this document.



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EXECUTIVE SUMMARY

Today's healthcare system is incredibly complex, confusing and costly. Healthcare costs are spiraling out of control, consumers are struggling to pay healthcare bills and forgoing needed care. As a nation, we are getting sicker. A system that was once designed around patients is now designed around maximizing profits, resulting in higher costs and poorer health. Ninety percent of healthcare dollars in the United States are spent treating chronic conditions.ⁱ This sobering statistic indicates that Americans access healthcare too late. Conversely, it sheds light on the critical need to shift the paradigm from focusing on the sick to keeping people healthy and reducing chronic conditions through prevention, infusing millions of dollars back into our economy.

Employers are the largest purchaser of healthcare in the United States, providing benefits to 153 million people and 58.1% of the American population under 65-years-old.ⁱⁱ Year-over-year unsustainable annual premium and deductible increases are hurting employers and their employees. Despite spending more, their employees are less healthy, which disproportionately impacts their lower wage earners. These factors, along with a renewed investment in recruiting and maintaining top talent, have employers mobilizing to take control of how healthcare is delivered to their employees.

Employers are increasingly turning to worksite health centers as a solution. A collaborative partnership between employers and healthcare organizations is a natural fit, sharing the same goal: to deliver better, more accessible care at an affordable price. Given healthcare expenditures now exceed \$15,000 per employee —78% of which is paid by employers—employers can find savings in direct payment for services that emphasize preventive care.ⁱⁱⁱ Thirty-three percent of U.S. employers with 5,000 employees or more offer worksite health clinics with an anticipated 13% rise by 2025.^{iv} Worksite health centers result in an average of \$4 in cost savings for every \$1 invested,^v via lower-cost visits, decreased absenteeism and improved productivity. Additional short-term savings are realized in reduced utilization of high-acuity, high-cost care, such as emergency rooms. Long-term savings are captured in early identification and management of chronic conditions and in guiding patients to the right resource at the right time, reducing overall healthcare costs.

Worksite health centers foster high employee satisfaction. Overwhelmingly positive, feedback from employees who visit worksite health centers demonstrates appreciation for an employer who is invested in their health, as shown by employee utilization of the health center. Healthcare clinicians practicing in worksite health centers also experience high job satisfaction as they can measurably impact and improve the health of an entire workforce by focusing on patients, allowing their hearts and skills to align.

Employers and healthcare clinicians are ideally positioned to partner in creating innovative solutions for the millions of people who have employer-sponsored health insurance. The worksite health center approach is one such solution and one that just makes sense. Worksite health centers benefit employers by saving money and improving productivity and benefit employees who can engage more easily with healthcare, given the additional time and attention they are provided in the worksite health model. As employers and healthcare clinicians, we can work together to drive forward the changes needed to improve the health of our state and our nation.

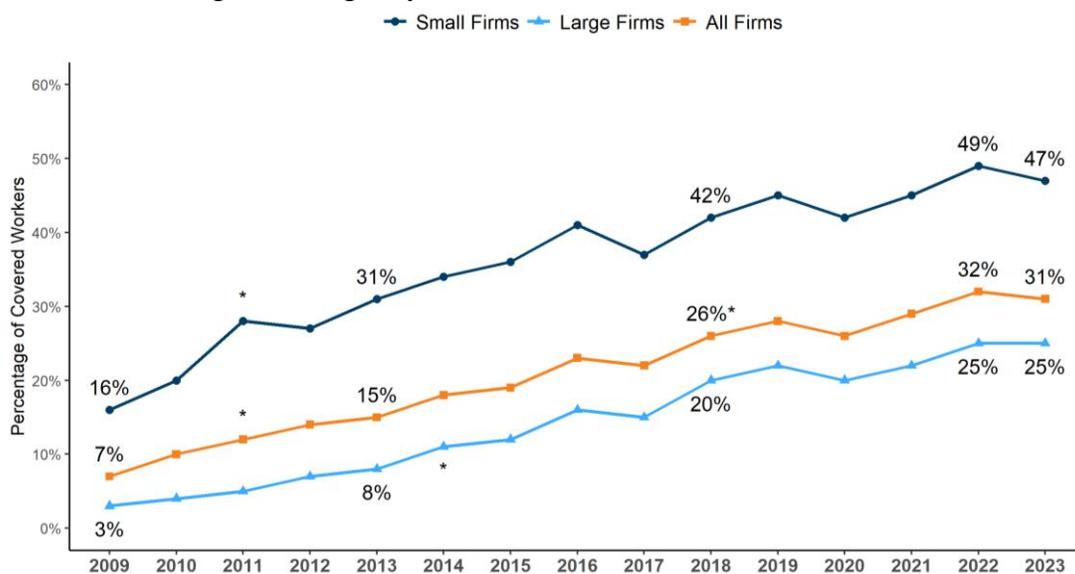


TODAY’S HEALTHCARE LANDSCAPE: INEFFECTIVE AND EXPENSIVE

Today’s healthcare system is costly, confusing and complicated. Healthcare costs are spiraling out of control, consumers struggling to pay healthcare bills are forgoing needed care and as a nation, we are getting sicker. ^{vi} A system that was once designed around patients is now designed around maximizing profits, resulting in higher costs and poorer health. The U.S. spends nearly 18% of gross domestic product on healthcare,^{vii} yet Americans die younger and are less healthy than residents of most other high-income countries.^{viii} The U.S. has the highest rate of people with multiple chronic conditions and one of highest rates of suicide.^{ix} Ninety percent of healthcare dollars in the United States are spent treating chronic conditions.^x Seventy percent of U.S. adults feel the healthcare system fails to meet their needs.^{xi} These sobering statistics indicate that Americans are engaging less with healthcare, avoiding healthcare and subsequently accessing healthcare too late, all at a staggering cost.

Healthcare premiums, deductibles and out-of-pocket healthcare costs are rising^{xii} (Figure 1), faster than all other goods and services.^{xiii} Medical expenses directly cause 66.5% of bankruptcies, making it the leading cause for bankruptcy.^{xiv} Loss of work due to medical problems causes 44% of bankruptcies.^{xv} It is estimated that 100 million Americans currently carry medical debt.^{xvi} In 2021, 58% of debts recorded in collections were for a medical bill, according to the Consumer Financial Protection Bureau.^{xvii}

Figure 1. Percentage of covered workers enrolled in a plan with a general annual deductible of \$2,000 or more for single coverage, by firm size, 2009-2023^{xviii}



* Estimate is statistically different from estimate for the previous year shown (p < .05).

NOTE: Small Firms have 3-199 workers and Large Firms have 200 or more workers. These estimates include workers enrolled in HDHP/SOs and other plan types. Average general annual deductibles are for in-network providers.

SOURCE: KFF Employer Health Benefits Survey, 2018-2023; Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 2009-2017

Due to rising costs, 38% of Americans report they or a family member postponed medical treatment in 2022 due to cost.^{xix} This was a 12-point increase in one year, the highest in Gallup’s 22-year trend.^{xx} Mainers are also struggling with debt. According to tabulations from the August 2021 Urban Institute Credit Bureau, in Maine, the average median amount of medical debt is \$857. The share of the Maine population in collections for medical debt is 16.7%.^{xxi}

It is well-documented that people in the United States are not seeking care primarily due to cost. However, there are several additional barriers to healthcare that are more nuanced but equally impactful. Limitations on access to care are at the core of health disparities. If patients cannot access timely and appropriate medical care, their health outcomes suffer. Initially conceived by Penchansky and Thomas^{xxii} in 1981 and still acutely relevant today are the five A’s of access to care: affordability, availability, accessibility, accommodation and acceptability. Building on Roy Penchansky and William Thomas’s seminal article, “The Concept of Access,” Master of Healthcare Innovation faculty member Kevin Ahmaad Jenkins offers a 7-point framework for assessing and expanding access in healthcare organizations^{xxiii} (Figure 2).

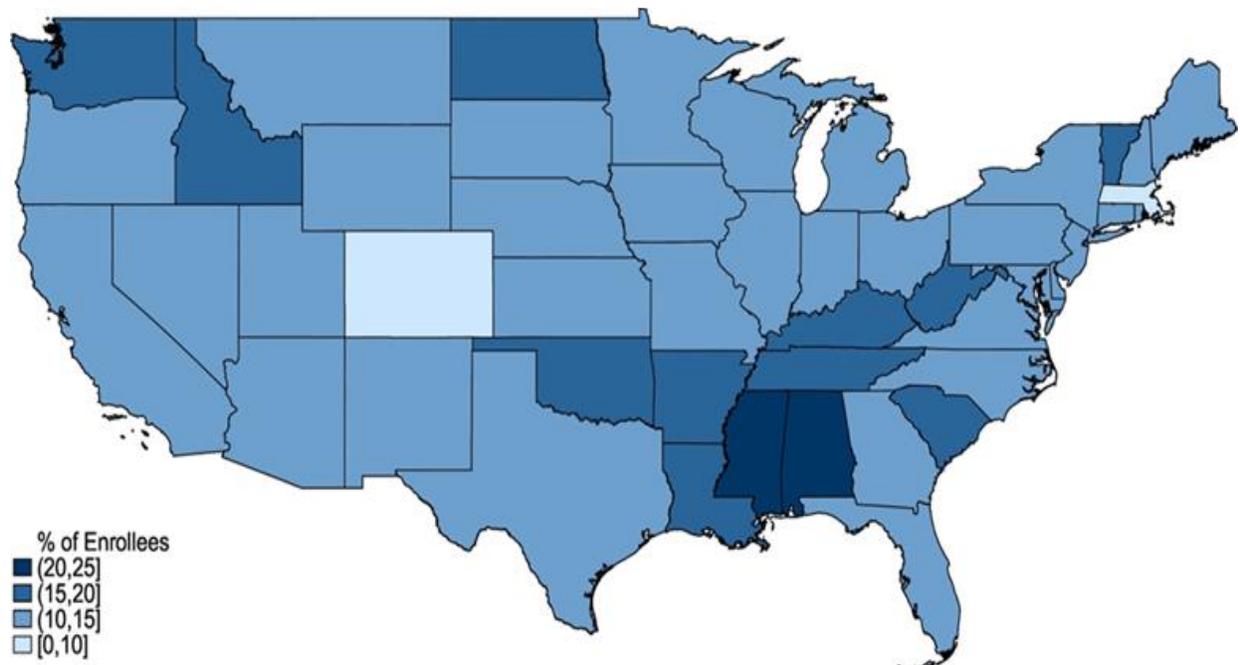
Figure 2. Employer health centers address 7As of access to healthcare



When patients do access care, the system is confusing, complicated, paternalistic and distant. Patients experience long waits, short appointment times and exorbitant bills. An examination of the U.S. healthcare landscape sheds light on a critical opportunity to shift the paradigm from sick-based care to focusing on disease prevention. A reduction in healthcare costs would return millions of dollars to our economy.

The well-intended incentive to increase preventive care by covering 100% of preventive visits has fallen flat. Although the ACA was instrumental in removing cost-related barriers to preventive care, patients still have about a one in four chance of receiving a bill for care that likely should have been free. Estimates suggest that patients are still paying between \$75 million and \$219 million annually, nearly a decade after implementation of the ACA and its cost-sharing exemption for preventive care.^{xxiv} The Affordable Care Act requirement covering preventive services does not always mean a preventive visit will have no cost (Figure 3).^{xxv} The American Medical Association has guidelines on how to bill for problem-based codes that incur costs during an annual preventive visit.^{xxvi} Although these clinicians should be reimbursed for their additional work, the lack of consistency, communication and understanding between the patient, insurance company and healthcare clinician creates confusion and dissatisfaction for patients and clinicians. For fear of surprise bills, many who engage with the healthcare system choose not to return.

Figure 3. Percentage of employee-sponsored enrollees who faced out-of-pocket costs for preventive care, 2018



Source: Hoagland, & Shafer, P. (2021). Out-of-pocket costs for preventive care persist almost a decade after the Affordable Care Act. *Preventive Medicine*, 150, 106690–106690. <https://doi.org/10.1016/j.yjmed.2021.106690>

It is nearly impossible for patients to decipher the complexities of health insurance. Also, it can be difficult to trust a confusing and complicated system. Patients often find themselves caught in a complex web, navigating among insurance companies, pharmacies and healthcare clinicians, leading to frustration and lack of answers. This is further compounded by the fact that the patients are often sick and at their most vulnerable. Trust in primary care physicians, specialist physicians, other primary care clinicians (nurse practitioners and physician assistants) and alternative medicine practitioners have all declined since 2019^{xxvii} by “a great deal or a lot.” Clinicians who only have time to tell rather than discuss in a 10-minute visit cannot build trust or truly accommodate cultural and spiritual preferences. Patients who can neither access, afford, or trust a clinician will not return.^{xxviii} The shortage of healthcare clinicians also plays a role in limiting access.

These barriers to healthcare that lead to delayed care and exacerbation of chronic disease can be seen in the United States health statistics when compared with other industrialized nations. The United States has the highest rate of people with multiple chronic diseases and among the lowest for physician visits, illustrating that Americans wait until disease and illness cannot be ignored to address them.^{xxix} At late stages of illness, treatment costs are significantly higher. Two-thirds of chronic conditions are preventable or reversible in early stages with lifestyle modifications.^{xxx} Lifestyle modifications take time, something today’s healthcare system does not have. However, 90% of all healthcare spending is to treat chronic and mental health conditions,^{xxxi} so less time upfront results in more costs and more time down the line leaving healthcare as a system largely used by and designed for the very sick.

Clinicians feel they spend more time on the computer, checking boxes for insurance companies and processing pre-authorizations than treating patients, driving physician dissatisfaction.^{xxxii} Care dictated by checking boxes robs clinicians of their autonomy, feeling they are treating for the record rather than treating the patient. A recent survey from the American Medical Association reported an alarming 62.8% of physicians experienced symptoms of burnout in 2021, up from 38% the previous year.^{xxxiii} This follows similarly concerning studies that indicated one in every five physicians—and twice as many nurses—planned to leave practice within two years, while one in three doctors anticipated cutting back their hours.^{xxxiv} Physician rates of death by suicide are double that of the general population.^{xxxv}

HEALTH

A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

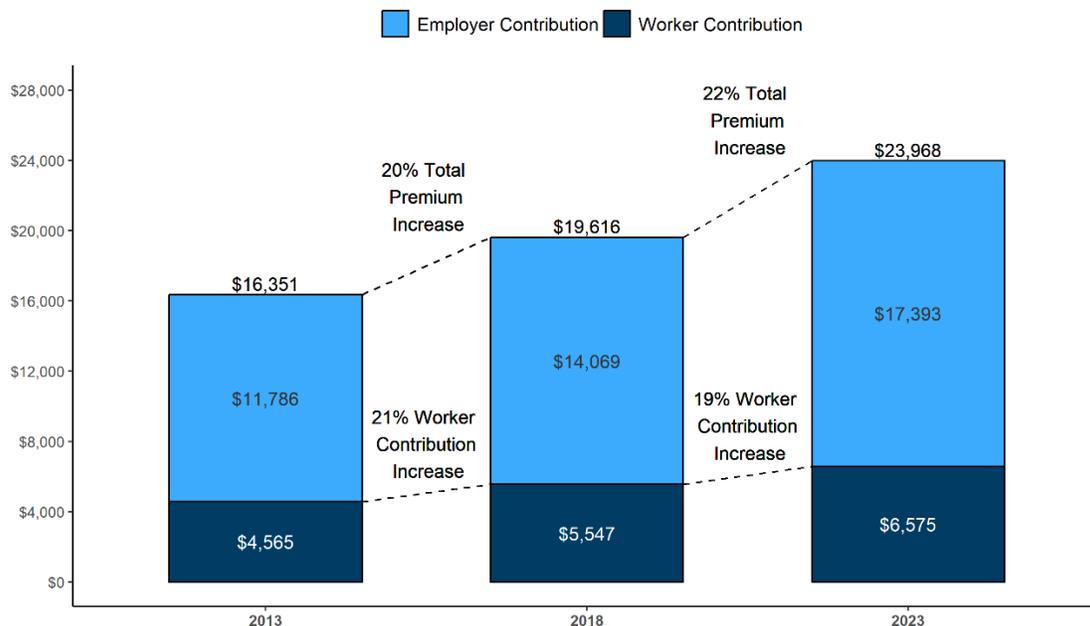
(World Health Organization)

As a system designed to care for the sick, healthcare clinicians are incentivized to write prescriptions instead of taking the time needed to engage in a meaningful conversation with patients to promote and support lifestyle changes. Lifestyle medicine, a medical specialty that uses lifestyle change as a primary modality to treat chronic conditions, is hindered by a reimbursement policy that supports traditional fee-for-service payment,^{xxxvi} incentivizing brief appointments, medications, surgeries and procedures.

EMPLOYERS IN THE HEALTHCARE GAME

Employers are paying for the increasing costs of healthcare in exponential and unsustainable ways. Employers are the largest purchaser of healthcare in the United States, providing benefits to 153 million people and 58.1% of the American population under 65-years-old.^{xxxvii} Employers are questioning why premiums have increased 22% in the past five years and employees' portion has increased 19% over 5 years^{xxxviii} (Figure 4). Healthcare costs are often the second largest expense for most organizations after payroll.^{xxxix} Many employers transitioned to high deductible health plans with the expectation that moving more of the cost share to employees would result in employees becoming better consumers of healthcare. In actuality, the system is too complex and not designed for patients to compare costs, leaving employees confused and subsequently taking on unexpected debt or avoiding care altogether.

Figure 4. Average annual worker and employer premium contributions for family coverage^{x1}



SOURCE: KFF Employer Health Benefits Survey, 2018 and 2023; Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 2013.

Employers are recognizing that despite paying more, their employees are less healthy. They are looking for creative ways to reduce costs for their employees, address inequalities in the healthcare system and improve the health of their workforce. Employers are no longer interested in passing more costs along to their employees. Not only because they recognize that employees can no longer financially bear these costs, but displacing costs to employees is no longer financially advantageous. Successful employers recognize that the wellbeing of their employees must be part of the business strategy. In fact, there is a direct correlation to stock prices and employee engagement.^{xli} Employers are competing for talent. To grow in the future, they need skilled, healthy employees. They are looking for opportunities to be a differentiator in the labor market.

Employers are at an inflection point. They want a productive and engaged workforce. They are looking for creative alternatives to take a proactive rather than reactive approach to affordable healthcare for their employees. Their employees want to feel well and lead fulfilling lives. Employers want to invest in a healthy workforce, and they will no longer tolerate rising costs with diminishing returns.

Historically, employers have relied on their brokers, health plans and third-party administrators to provide the data and guidance on employee benefits. The passing of the Consolidated Appropriations Act of 2021^{xlii} requiring health insurance agents and brokers to detail services and direct and indirect commissions to current and potential clients, now allows employers to take a more active role many have been looking for. Employers are now equipped with the data to take a more operative role in designing their health plans, in how healthcare is delivered and are demanding better results for their employees. One such alternative delivery model is providing worksite care to employees at no or low cost. This is a model that has demonstrated cost-savings and positive employee experience.

BUILDING A STRONG MAINE WORKFORCE

Maine employers are seeking to attract and retain talent and are supported in their efforts by the Maine Economic Development Strategy^{xliii} that emphasizes driving innovation and investing in new and established Mainers to achieve the 75,000-person workforce growth by 2029. Employees are also more likely to stay with their employer if they like the health plan and programs offered.^{xliv} Unengaged employees cost U.S. companies between \$450 billion and \$605 billion a year in lost productivity.^{xlv} Employers are driving engagement by investing in programs that address health concerns, promote wellness and support equity and inclusion, attract and retain the best talent, becoming employers of choice.

People who choose to live and work in Maine should have the ability to access affordable healthcare. Doing so will work in tandem with the many employer-sponsored wellbeing programs, where the focus is on employee total wellbeing; creating a culture that supports a

healthy, engaged and thriving workforce. Employers recognize that investing in their employees extends to their families as well, improving the health of the communities we live in.

EMPLOYER HEALTH CENTERS: AFFORDABLE, ACCESSIBLE AND SIMPLE

Innovative and creative employers find worksite health centers to be an impactful solution to the rising costs and low-value paradigm dominating the current healthcare landscape. Employers see worksite health centers as an opportunity to shift focus from treating the sick to promoting people being well. They know that it's good for business. Healthy employees equal a healthy bottom line and a consistent workforce with company loyalty (Figure 5).

Figure 5. Benefits of worksite health centers



Worksite health centers are as varied as employers, but typically designed as urgent and primary care health centers—often including additional services like lab, health screens, vaccinations and physical therapy—located within the workplace and are dedicated to the employees of the self-insured organization. Near-site health centers are employer-supported but are located outside of the company's campus. Near-site health centers allow better access for companies looking to extend on-site services to include spouses and families. Near-site health centers allow smaller employers to partner together, taking advantage of economies of scale, to offer healthcare to employees in organizations geographically close together.

An important distinction exists for worksite health centers – they are not just medical clinicians located on-site at a company. Unlike the existing healthcare model, worksite health centers are less focused on traditional fee-for-service or value-based reimbursements. Instead, they invest

their time into being creative, nimble and innovative healthcare solution partners with their employer-clients. Worksite health centers partner with employers to build original programs to influence hardest to reach employees, to design services and outreach to directly impact the employers' highest claims and to provide ongoing consultation about plan design and healthcare investment based on utilization and diagnostic trend data from the health centers. How worksite health centers approached the COVID-19 pandemic is an example of this collaboration, innovation and nimbleness. While the country was gripped by an unprecedented health crisis, employers were grappling with how to keep employees working and business afloat. Rather than shutter their doors, “worksite clinics proved their value, ramping up virtual care offerings, providing testing and vaccinations and serving as an important resource to employers struggling to assimilate complex and evolving health information” (National Association of Worksite Health Centers, 2021).^{xlvi}



Worksite health centers are not new. Instead, they have been providing reliable returns to employers for decades. It is the current healthcare landscape of rising premiums, poor health and subpar patient experience, combined with a job market changed by the Great Resignation that culminates in a growing number of employers – of increasingly smaller sizes – to invest in worksite health centers. The Business Group on Health’s annual survey of 136 large employers reported 36 of its respondents offer worksite health centers in 2023 with an additional 13% considering adding a worksite health center by 2025.^{xlvii} Meaning that by 2025, nearly half of all large employers in the United States will have worksite health centers for their employees.

CONTROL COSTS

All these employer-supported health centers offer organizations the opportunity to take greater control of healthcare spending and have greater influence on the quality of care provided to their employees. On-site health centers can lead to an average savings of 25% on the total cost of care for employees.^{xlviii} With the ability to provide some services through a direct-contracting model with a worksite health center partner, employers can design their health plan to support affordable, reliable and accessible care.

IMPROVED ACCESS

Worksite health centers eliminate significant access burdens by bringing healthcare to the places where people work. Unlike traditional healthcare that requires time off to travel to and from appointments, worksite health centers save total time away from work by up to four hours a visit. This co-located proximity reduces absenteeism and productivity loss significantly. Employees do not need to calculate the impact of lost wages to care for their health nor do employers lose precious productivity time they cannot afford. Further, employers can align their worksite health center programs and services with other wellbeing programs to create a wellbeing and health strategy, gaining greater return on their efforts.

Offering worksite health centers improves access to care by significantly reducing wait time. Worksite health centers have smaller patient panels and offer no or dramatically reduced wait times. This quick access becomes even more remarkable when compared with the only 51% of patients who can access same or next-day appointments in the general population.^{xlix}

HIGHER-QUALITY CARE

Worksite health centers do not feel the same fee-for-service constraints felt by community-based clinics. Instead of productivity driving the pace of visits,

workplace health centers operate in partnership with employers based on outcomes. This paradigm shift promotes worksite healthcare teams to build trusting relationships over time. This shift allows clinicians to focus on prevention and the health journey of each employee patient. Health is a story over time, not a point in time and it is a story that is best built through relationships.

Building trusting relationships not only improves the patient experience but helps employees and health practitioners move the needle together on chronic disease

Brian came to the health center to get his blood pressure checked. A comprehensive workup revealed high blood pressure, high cholesterol, prediabetes. We worked with Brian on lifestyle changes and repeated labs every three months. Brian's labs are now normal.*

In Brian's words, "I'm much happier and healthier now. Thank you for everything and making me feel seen and cared for!"

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InterMed worksite clinic
patient
*named changed

control, which require lifestyle changes and ongoing coaching and support to curb or reverse.¹ Trusting relationships build loyalty, using the health center for more than one preventive service and coming back for both urgent and chronic care.^{li} Through the investment in building trusting relationships, worksite health centers support increased access to and utilization of the healthcare system, creating entrée into the healthcare system, driving patients to the right services at the right time, especially for those—who without access to on-site care—would not access services at all.

REDUCED EMERGENCY VISITS

Worksite health centers make deep cuts in emergency room utilization through their emphasis on preventive care access. A John Hopkins study, for example, revealed 63% drop-in emergency room visits for companies with worksite health centers.^{lii} With lowest paid workers paying a greater portion of their incomes toward healthcare,^{liii} offering care with the fewest barriers and the greatest emphasis on prevention makes a significant impact on the lives of employees and their communities. Uninsured and underinsured employees are also more likely to access healthcare when offered on site through their employer. Care provided to employees who typically would not access care results in less trips to the emergency department when, without intervention, their symptoms worsen.



DECREASED INJURIES

Occupational health programs, offered through worksite health centers, save companies significant dollars, also. Using the same principles of early identification and early intervention applied to occupational health, companies experience significant cost savings on workplace injury and lost time. Worksite health centers alleviate the burden to U.S. companies, who currently spend more than \$55 billion dollars per year on disabling workplace injuries.^{liv} InterMed worksite clients achieved occupational health Days Away, Restricted, or Transferred (DART) rates less than half the industry standard and overall lost workdays less than a third.

BETTER RETURN ON INVESTMENT

Lastly, worksite health centers decrease overall healthcare spending. Worksite health centers return \$4 in cost savings for every \$1 invested,^{lv} including savings from increased employee engagement, access, utilization, patient experience and productivity. The on-site and near-site worksite health center models allow employers to use their healthcare data to make organization-specific health plan choices to reinforce preventive care, address trends before they exacerbate and build programs that tackle the largest claims. The worksite health center model allows more time for clinicians and patients to thoroughly explore more conservative interventions first before using costly advanced imaging or referring to specialists prematurely. For employers, the result is an engaged, healthy workforce and overall lower cost of healthcare. For employees, the result is improved health and easy access to affordable healthcare. Healthier employees equate to less time away from work and lower costs for both employees and employers.

Mike called the health center saying he felt ill and weak. After a long call he agreed go to the hospital “only because I trust you guys.” He was discharged from the hospital without a clear diagnosis or plan. We called to check on him and still not feeling well, we scheduled him at the health center. Knowing he likes outdoor time with his dog, we ordered a test for Lyme disease. It was positive. We treated him for Lyme, which likely caused the symptoms that resulted in his hospitalization, and he had a full recovery.*

InterMed worksite clinic
patient
*named changed

HIGHER PRODUCTIVITY AND JOB SATISFACTION

The goal of worksite health centers is to provide better patient care. Worksite health center care teams focus on providing the right level of service at the right time without the pressure of traditional mechanisms of reimbursement. This more time-focused and relationship-based approach to healthcare results in clinicians and nurses who are more engaged and have higher job satisfaction. Though the number of new nurses in the United States is growing, more nurses are projected to leave the field each year through 2031.^{lvi} Similar statistics surround the shrinking physician population.^{lvii} Losing valuable medical professionals to low job satisfaction is something the nation and employers, cannot afford.

Clinical team collaboration,^{lviii} ability to deliver personalized care to patients, time to support patients accessing social services^{lix} and the time and autonomy to apply their knowledge and skills^{lx} are the top drivers of job satisfaction among physicians, advanced practice clinicians and nurses. Job satisfaction among medical professionals goes hand in hand with patient outcomes. Lack of engagement and job satisfaction among nurses has been correlated with poorer patient outcomes, higher costs and poor-quality nursing.^{lxi} Clinicians who are empowered to provide quality care, spend quality time with patients and have the time and autonomy to collaborate effectively on clinical care are more satisfied and engaged in their jobs. That engagement translates to improved patient outcomes.



Credit: Grand Canyon University

RESULTS FROM MAINE-BASED WORKSITE CENTERS

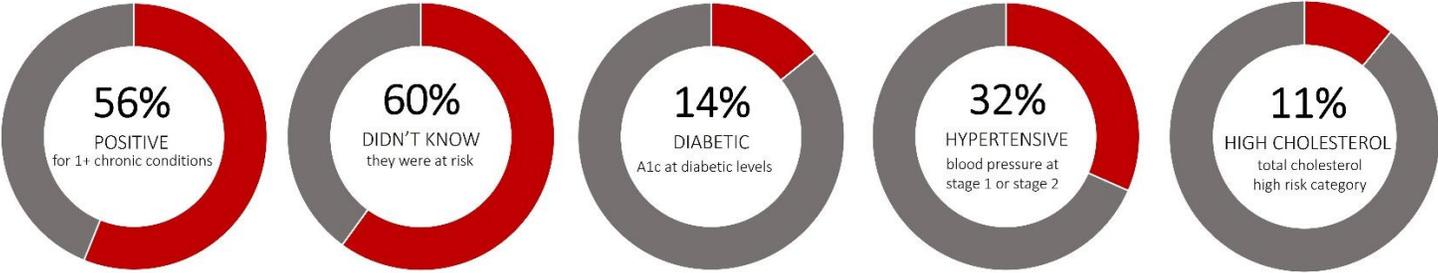
Worksite health centers improve patient experience, employee productivity, job satisfaction and time away from work, in addition to reducing healthcare costs and avoiding expensive interventions from untreated and undertreated chronic conditions. InterMed P.A. is a physician owned primary and specialty care organization with worksite health centers at some of Maine’s largest employers and whose partnerships with these Maine-based companies has resulted in impressive results congruent with the worksite health centers benefits detailed in the national research.

At InterMed’s worksite health centers, covering an estimated 7,000 lives, access is simple and quick. In fact, in 2023, the majority of patients were seen same-day or next-day and 98% of higher-acuity patients were seen on the same day. Current services include, but are not limited to, occupational health, ergonomics, same day care, chronic condition management, health screenings, vaccinations, behavioral health navigation, physical therapy and lab services. Services have evolved over time based on health plan data, employee population health needs, employer-client enterprise goals and opportunities for cost savings.

InterMed’s worksite health centers have helped our clients save money and reinvest in their employees. Based on client, health plan and internal data, in 2023, these companies saved over \$822,000 in productivity and an estimated \$900,000 in healthcare claims, alongside dramatic reductions in workers’ compensation premiums.

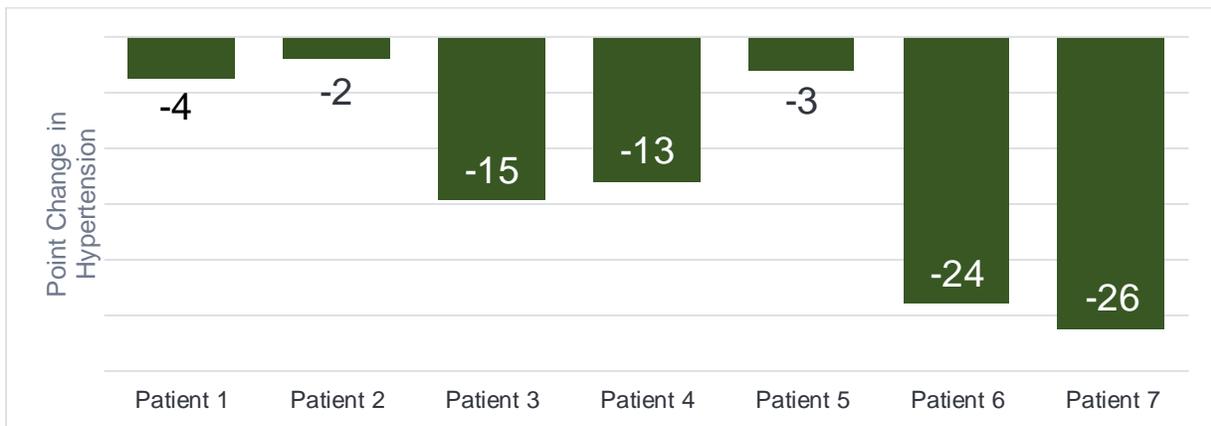
InterMed’s worksite health screening programs have saved clients dollars down the road, also, by investing in preventive care and low-barrier access health screens. In 2023, InterMed’s worksite health program screened 155 employees, discovering 82% of participants had positive, confirmed findings for diabetes, high blood pressure and/or high cholesterol. Fourteen percent of participants had dangerously high A1c, 11% had high risk total cholesterol and 32% had stage 1 or stage 2 hypertension (Figure 6). Sixty percent of those patients had no idea they were at risk. Efforts like InterMed’s on-site, team-based approach, supporting early detection and intervention reduced direct and indirect costs over the long term and improved employee wellbeing.

Figure 6. InterMed worksite screenings of 155 employees: positive results by chronic conditions



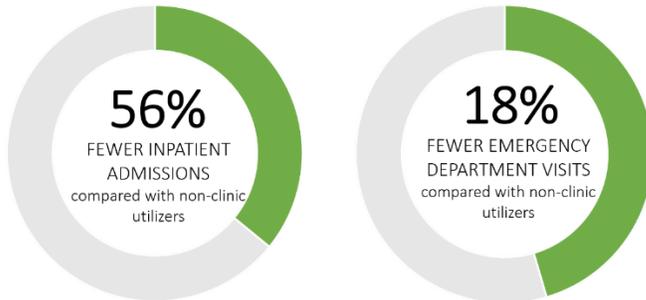
Nearly one in two people have hypertension, costing the United States \$79 billion in annual healthcare costs associated with high blood pressure.^{1xii} Lifestyle interventions – such as a low sodium diet – can save \$18 billion in healthcare costs alone. InterMed’s worksite Bridge Program—a program designed to support patients with at least one chronic condition through behavior modification and/or medication management until they can be established with or get an appointment with their primary clinician—yielded impressive results in hypertension management. All patients enrolled in the program saw a decrease in their blood pressure and half of participants were able to achieve desirable range results through the program (Figure 7), saving an estimated \$50,000 in avoided costs associated with uncontrolled hypertension.¹

Figure 7. Sample of hypertensive patients’ overall point improvement after Bridge Program.



¹ Estimated costs avoidance based on calculated based on data from the Medical Expenditure Panel Survey on the estimated annual healthcare expenditure for patients with hypertension (Kirkland, E. B., Heincelman, M., Bishu, K. G., Schumann, S. O., Schreiner, A., Axon, R. N., Mauldin, P. D., & Moran, W. P. (2018). Trends in Healthcare Expenditures Among US Adults With Hypertension: National Estimates, 2003-2014. *Journal of the American Heart Association*, 7(11), e008731. <https://doi.org/10.1161/JAHA.118.008731>).

Figure 8. Worksite health center patients compared with non-utilizers in one Maine-based worksite health center.



The InterMed worksite health center’s time investment, focus on early identification and prevention of chronic conditions and team-based approaches show positive results compared to employees who have not used the worksite health center. Compared with patients who do not use the health center, health center utilizers at one site saw half the inpatient admission rate, an 18% lower emergency department utilization rate (Figure 8), lower per member per month costs, 25% greater rate of preventive screens like cancer and were 25% more likely to have a primary care clinician. There were zero back surgeries for patients with low back pain seen in the worksite health center compared to 17 back surgeries for employees seen in the community (Figure 9). Studies indicate over 50% of back surgeries are deemed unnecessary.^{lxiii}

Since worksite health centers provide the time to get to root cause, they can avoid costly referrals and imaging. Instead, they can initiate conservative treatment first and check-in on patient progress frequently and only refer to a higher level of care when clinically indicated.

Figure 9. Results from Maine claims analysis comparing health center utilizers to non-utilizers.

25% more
preventive care visits and screens
Compared to all non-clinic utilizers

0 employees
required back surgery
Compared with 17 non-clinic utilizers

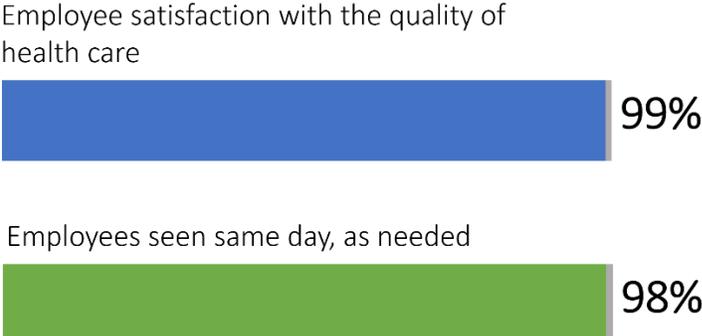
\$27 lower
per member per month medical costs
Compared with non-clinic utilizers

25% more
employees who use the clinic have a PCP
Compared with non-clinic utilizers

InterMed’s worksite health centers collaborate with employers to intentionally outreach and target hourly employees who, as lower wage earners, are less likely to engage in preventive health screens and have a primary care clinician. InterMed’s worksite center at one client attended front-line employee meetings on all three shifts, to introduce themselves, build trust and invite employees to use the services. This led to a 14% increase in new patients utilizing the health center in 2023, most from front-line departments.

InterMed’s worksite health centers have remarkably high patient experience scores. Ninety-nine percent of patients rated the health center experience a five-out-of-five (Figure 10).²

Figure 10. InterMed worksite health employee experience survey results



Maine worksite health centers are impactful solutions. They support employee growth in Maine, improve the overall health outcomes of our Maine community and decrease cost of care, leaving dollars for employees to improve their quality of life and for employers to invest back in their businesses, employees and the State.

THERE IS A WAY TO MAKE IT BETTER FOR ALL EMPLOYEES

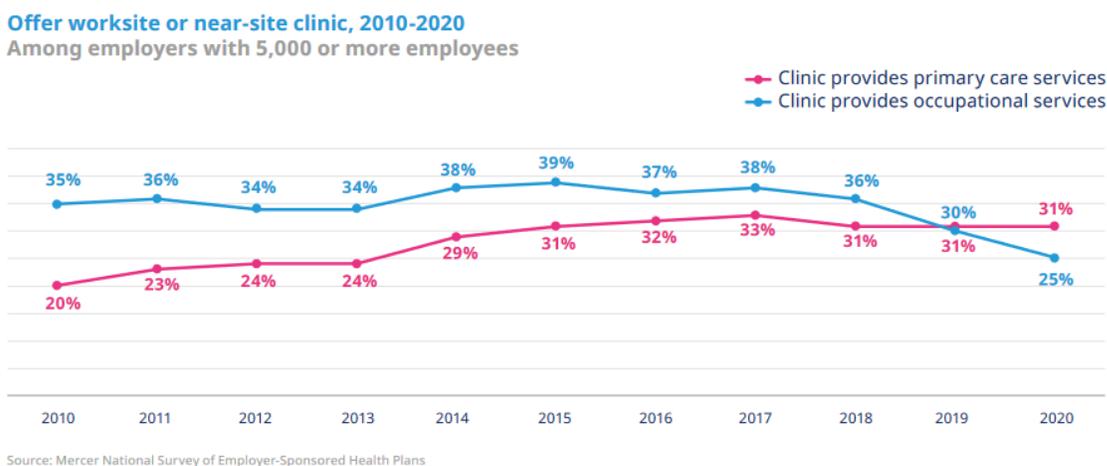
In our global world where employers are competing for talent, there is a focus and emphasis on diversity, equity and inclusion. Employers recognize that their lower wage earners are at a distinct disadvantage as their healthcare costs are disproportionately more than their higher wage co-workers and they are willing to do something about it.

Employers and healthcare clinicians, utilizing their combined resources, are ideally positioned to partner in creating alternative solutions to make healthcare more accessible, reliable and affordable. An established and effective solution to increase employee engagement, workforce productivity, population health outcomes all while saving dollars is through the establishment of worksite health centers. Worksite health centers save employers on average 25% on their

² Likert scale 0-5, 0 the worst rating, 5 the best rating.

healthcare costs, on reduced absenteeism and on improved productivity.^{lxiv} Offering healthcare where people work and with lower patient to clinician ratios results in reduced emergency department utilization and improved patient experience. Further, worksite health centers reduce absenteeism due to illness and help lower health expenditures through direct-contracting models with health systems that eliminate premiums and improve convenience.^{lxv} Given that healthcare expenditures now exceed \$15,000 per employee —78% of which is paid by employers— employers can find savings in direct payment for services that emphasize preventive care^{lxvi} (Figure 11).

Figure 11. Large employers who offer worksite health centers on- or near-site, 2010-2020^{lxvii}



Worksite health centers are an investment for employers but an investment they are willing to make to ensure a healthy workforce and take control of their healthcare spending. Smaller employers are investing in worksite health centers too. Employers, large and small, want more affordable, better-quality healthcare for all employees through worksite health centers. Yet, the most vulnerable employees with the highest risk from a social determinants of health perspective are excluded. This is because employees with high deductible health plans who can afford only low or zero weekly paycheck deductions must meet their deductibles before receiving no or low-cost care onsite. In essence, people are using their health insurance as a catastrophic policy – only utilizing healthcare in the event of a major illness or accident. This removes a large swath of people from the preventive services that are known to reduce the long-term impacts of undiagnosed and untreated conditions. Plainly speaking, employees, no matter the amount of education provided by their human resources departments, purchase health insurance based on the amount deducted weekly from their paychecks rather than based on their healthcare needs. This is particularly true for lower-wage, hourly employees who are already at greater risk for chronic diseases.

There are broader changes happening in the healthcare system. However, given the complexity and misaligned financial incentives in the current system, combined with new disruptors entering healthcare and emergence of Artificial Intelligence (AI), these changes will take decades to come to fruition. In the meantime, employers, empowered with transparency around their data, are ready to partner with healthcare organizations, like InterMed, in creating innovative solutions for the millions of people who have employer-sponsored health insurance. These solutions, such as worksite health centers, are not a one-size-fits-all but a tailored approach based on each employer's needs and goals. Improving health requires an individual approach. So must the solutions.

There is no question that changing the delivery of healthcare will take herculean efforts, requiring strategic vision, resources, flexibility and grit. Fortunately, employers and healthcare organization partnerships possess these qualities and are willing to lead the efforts. It all starts with a vision of a better future, where healthcare is accessible, affordable and reliable for all. Collectively, we have the ability and together we can drive forward the changes needed to improve the health of our state and our nation.

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