



OCTOBER 2026 NEWSLETTER

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EDUCATION AND NETWORKING ACTIVITIES

Upcoming Programs:

View descriptions of the programs below and register [at this link:](#)

- ▶ ***BEFORE THE CRISIS: How Trust, Teamwork, and Proactive Care Will Change Your Company's Future By Offering Advanced Primary Care***

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NOVEMBER 2, 2026 – WEBINAR

- ▶ ***Driving Engagement and Incentivizing Employees to Use the Health Center***

DECEMBER 7, 2026 – FIRST MONDAY ROUNDTABLE ONLINE

- ▶ ***2027 Onsite Employee Health & Wellness Center Summit***

JANUARY 14-15, 2026 – CAESARS PALACE, LAS VEGAS, NV

- ▶ ***Innovative Approaches to Cancer Care at the Worksite Center***

JANUARY 20, 2027 – WEBINAR

- ▶ ***NAWHC's 15th Annual Forum: Direct Contracting and Worksite Centers***

APRIL 14-15, 2027, HILTON POST OAK HOTEL, HOUSTON, TX

As a benefit of NAWHC Membership, all webinars and Roundtable programs are **FREE for NAWHC members**. Most programs are recorded or have materials for later viewing.

Below are links to recordings of earlier webinars:

- ▶ October 5th - ***To Improve the Work Outcomes of Employees with Common Mental Health Problems-Focus on Functioning***

<https://www.youtube.com/watch?v=lde-DgZaVQ4>

- ▶ August 26th - ***Recovery at Work: Moving Beyond Stigma into Support for Substance Use*** <https://youtu.be/XeFVP--h-zE>

- ▶ July 6th - ***Burnout in Worksite Health Centers: What We Know, How to Measure It, and What to Do About It*** <https://youtu.be/-mx-kteeOhQ>

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- June 11th - ***Integrating Occupational Health and Primary Care in Your Health Center*** <https://youtu.be/xKKeuiUHbXM>

BENCHMARKING/SURVEYS

Surveys Reveal Employer Health Benefit Costs to Rise 9-11% in 2027 Unless Actions are Taken

Recent surveys, by Marsh (formerly Mercer), WTW and Aon paint dismay pictures of the increases in health benefit costs for 2027 unless employers take aggressive actions in key areas. Analysts project cost could rise 9-11% unless actions are taken to mitigate the increases. This will be the fifth consecutive year of increased costs after a decade of moderate increases, as well as the highest increase in the five-year period.

Survey Reveals 40% of Employers Not Engaged in Value-Based Care

Beckers Hospital Review reported on a new publication of results from an EY survey of employers which found four in 10 employers have not linked any of their medical spending to value-based payment models, highlighting how slowly value-based care has expanded in the commercial market despite years of industry focus, Key findings and recommendations:

- Value-based care adoption remains limited in the commercial market. Forty percent of employers said none of their medical spending is tied to value-based or at-risk arrangements. Another 27% said less than 10% of spending is

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tied to those models, while 22% said 11% to 30% is. Just 3% said more than 31% of their medical spending flows through value-based arrangements.

- Specialty-specific models are the most common form of value-based care among employers. Thirty-two percent reported using arrangements focused on areas such as oncology or musculoskeletal care. Advanced primary care or primary care capitation was used by 21%, followed by bundled payments at 19%.
- Employers are shifting toward more targeted value strategies. EY said the commercial market is moving away from broad population-level risk and toward condition-specific programs, bundled episodes, care navigation, alternative sites of care and curated provider networks.
- 66% of employers offering onsite or near-site clinics reported them to effective in generating a positive ROI on cost costs
- More than half of employers are steering workers to lower-cost settings. Fifty-six percent said they encourage use of alternatives such as telehealth and home health. Half said they shift additional costs to employees and 50% offer health and wellness incentives.
- Employers are taking a more active role in value-based care design. EY said companies are increasingly moving beyond being passive purchasers and are instead curating networks, selecting high-value providers and targeting conditions where outcomes and savings can be measured more quickly.

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- Employers increasingly view advanced primary care as a foundational value-based strategy. These models combine enhanced access, care coordination, longitudinal patient relationships and proactive chronic condition management to improve outcomes and reduce downstream utilization. Unlike many stand-alone point solutions, advanced primary care models aim to provide a single entry point into the healthcare system, helping employers reduce fragmentation while creating a platform for broader value-based initiatives.
- Providers may face greater pressure to prove performance at the service-line level. EY said future commercial value-based networks are likely to emphasize outcomes, cost variability and patient experience, with condition-specific performance becoming more important than systemwide scale alone.

Read the full report [at this link](#).

WORKSITE HEALTH CENTER AND DIRECT CONTRACTING DEVELOPMENTS

City of Wauwatosa (WI) Celebrates its Workplace Clinic's 10th Year

The City of Wauwatosa (WI) is celebrating the 10th year of its Workplace Clinic. The Clinic offers free services to its eligible employees. The City offers a wide variety of wellness initiatives, including one-on-one wellness coaching (with wellness, fitness and nutrition sessions available), fitness classes and wellness challenges covering



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physical activity, nutrition, hydration and stress management. The City partners with Froedtert & the Medical College of Wisconsin Workforce Health to offer the Workplace Clinic and its wellness services.

State of West Virginia Selects First Organizations to Receive Employee Clinic Grants

The state of West Virginia will award \$2.4 million of its federal Rural Health Transformation Program funding to three organizations to expand worksite and employer-based health services.

Gov. Patrick Morrisey on Friday announced allocations of \$1.17 million to the Spotted Owl Health Care Organization and its partner the Chesapeake Healthcare Center, \$612,000 to Charleston Area Medical Center and \$612,000 to the Cabell Huntington Foundation. The money will be used to help expand worksite clinics and employer-based healthcare services to allow residents to access care where they work,

Vandalia Health, parent company of CAMC, will use the money to establish a statewide network by integrating employer-based access points with Vandalia's primary care locations, mobile clinical assets and telemedicine hubs. The program, called Vandalia WorkWell Connect, aims to identify chronic disease risk earlier, connect employees to timely primary and specialty care, support functional ability

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and work-status coordination, reduce avoidable health events, and generate standardized workforce and health outcome data for the State.

The grant to the Cabell Huntington Hospital Foundation will support Marshall Health Network in launching an innovative workforce health model focused on prevention and early detection to improve health outcomes, reduce barriers to employment and strengthen workforce participation across West Virginia.

Cabinetworks Group Opens Third Employee Clinic:

Cabinetworks Group, the country's largest privately owned cabinet manufacturer is expanding its investment in workforce health with the opening of its third free onsite health clinic in two years.

The new Minnesota clinic is in collaboration with Medcor and provides employees, spouses and dependents with convenient, no-cost access to primary and preventive care, chronic condition monitoring, vaccinations, testing and other services.

Read the announcement [at this link](#).

Hendry County School District (FL) to Open Two Employee Clinics

The Hendry County School District (FL) is planning a partnership with Henry Regional Medical Center to open two clinics — one in LaBelle and one in Clewiston

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— providing Hendry County School District employees access to on-site healthcare with a \$0 copay. Services could include same-day exams, imaging with pre-negotiated fees, pharmacy components and the potential for on-site medication delivery to schools.

Charles County (MD) Planning Primary Care Center for Employees

Charles County (MD) commissioners are moving forward with a dedicated primary care health center for county employees to save the county millions of dollars over the next five years without costing taxpayers anything upfront. The center, operated by Marathon Health, combines primary and preventive care, urgent care for minor injuries and illness, occupational health screenings for first responders and other job categories, on-site lab work, and dispensing of roughly 150 to 200 generic medications — all at zero out-of-pocket cost to employees, spouses and dependents enrolled in the county's health plan.

YUSA Clinic Saves Lives

An on-site health clinic that Adena Health operates at YUSA Corp. is being credited with catching serious heart conditions in two of the plant's employees before they turned into medical emergencies. Adena has staffed the clinic at YUSA's Fayette County facility since 2018. It handles 50 to 60 patient visits a week, including



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physicals, health screenings, mental health services and treatment for minor injuries.

Aramark and University of Pennsylvania Partner to Provide Employees More Affordable Care

The *Philadelphia Inquirer* reported that Aramark and the University of Pennsylvania Health System launched a partnership this year to offer the food service's Philadelphia-area employees health care in a test of a new model for reducing costs. Aramark negotiated prices and other terms of the contract directly with Penn, instead of relying on an insurer to negotiate prices.

Aramark employees who choose the benefit option, called the Penn Medicine Premier Plan, face no deductibles and lower copays when they and their dependents use Penn doctors and facilities. This is Penn's first direct contract, but Aramark's third with providers – previously in the Chicago and Dallas areas.

Read the full article [at this link](#).

Medcor Joining APM to Expand Occupational Health Across North America

Medcor, a provider of onsite and mobile occupational health services across the United States and Canada, announced it has entered into an agreement to join the APM Group, subject to Federal Trade Commission approval. Medcor and APM, an



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international health and human services organization operating in 11 countries, will work together to expand access for employers and their employees to high-quality, independent, advocacy-based occupational health care across North America.

Read the announcement [at this link](#).

New Coalition Promoting Direct Contracting By Employers

Employers, clinicians and health care companies have formed the Association for Direct Care, a Washington, D.C.-based coalition that will lobby for policies supporting direct contracting between employers and providers. The organization plans to work with Congress and the administration on its priorities: expanding direct contracting in commercial insurance and federal health programs, widening access to healthcare data, and reducing what it describes as regulatory and administrative barriers.

Its members include the American Academy of Family Physicians, the National Alliance of Healthcare Purchaser Coalitions, The ERISA Industry Committee and the Employers' Forum of Indiana. No hospitals or health systems are among the named members.

Read the full report [at this link](#).

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RESOURCES

Directions in Obesity Treatment and Management

A story in Medical News Today included a new statement from The Endocrine Society which says that obesity treatment success should include improvements in heart, metabolic, liver, sleep, mental, and physical health, not just the number on the scale. It suggests that researchers and clinicians should focus increasingly on whether treatment improves overall health, reduces obesity-related complications, and helps people maintain those benefits over the long term.

Newer drugs, such as semaglutide and tirzepatide, can support weight loss and may improve obesity-related conditions, but researchers still need to understand their long-term effects and optimal use. Due to possible complications from stopping treatment, researchers are exploring whether lower doses or alternative medications can help maintain benefits.

Read the full story [at this link](#).

NAWHC Resources

NAWHC members have access to the NAWHC website [Resource Hub](#) which includes reports, benchmarking surveys, research studies, toolkits, sample documents and other resources.