Alliant

Employee Benefits

NAWHC 2025
WORKSITE HEALTH CENTERS SURVEY REPORT

CONTENTS

CURRENT STATE

High-quality primary care is increasingly recognized as the backbone of a fair and sustainable health care system. With health care costs continuing to rise and so many people having trouble accessing care, evidence shows that robust primary care can make a difference. It helps improve overall health, lowers costs, and works towards closing equity gaps in health care access.

Focusing on great primary care gives people the chance to take control of their health. They can focus on prevention and tackle small health issues before they turn into big ones. Plus, it makes the health care experience smoother and easier for everyone. Because employers are uniquely positioned at the intersection of health coverage and worker well-being, their proactive involvement is essential. After all, they bear the brunt of rising health care costs, which eat into wage growth and business margins. In addition, having many employees absent from work or not fully focused on their tasks costs employers billions annually. As one-fourth of adults and nearly half of adults under 30 don't have a primary care provider, unaddressed health issues translate directly into increased costs and lower productivity in the workplace.

High-quality primary care isn't just about managing annual physicals, it results in better chronic disease management, enables early intervention through preventive care, and supports improved mental health. Employees with regular access to coordinated primary care incur lower overall health costs and remain healthier and more productive. Onsite and nearsite health center models allow the employer to design a best practice primary care model, customize it for their unique environments, and deliver it directly to their members. Companies that invest in these models also report higher employee retention and satisfaction, as health benefits increasingly influence where people choose to work.

The primary care crisis continues to worsen due to a combination of chronic underinvestment, a health care market that favors secondary and tertiary care, and rising employee expectations. **Employers can no longer sit back and do nothing.** It's crucial to act now, before issues like workforce shortages and increased health care costs escalate further. By embracing new primary care solutions, such as health centers, and making them a key part of their health benefits, companies can better manage costs, improve employee health and productivity, and stay competitive in the long run. Ignoring these challenges could lead to continued escalation of health benefits spend and a decline in employee health, putting organizations at greater risk in today's tough job market.

Employees with regular access to coordinated primary care incur lower overall health costs

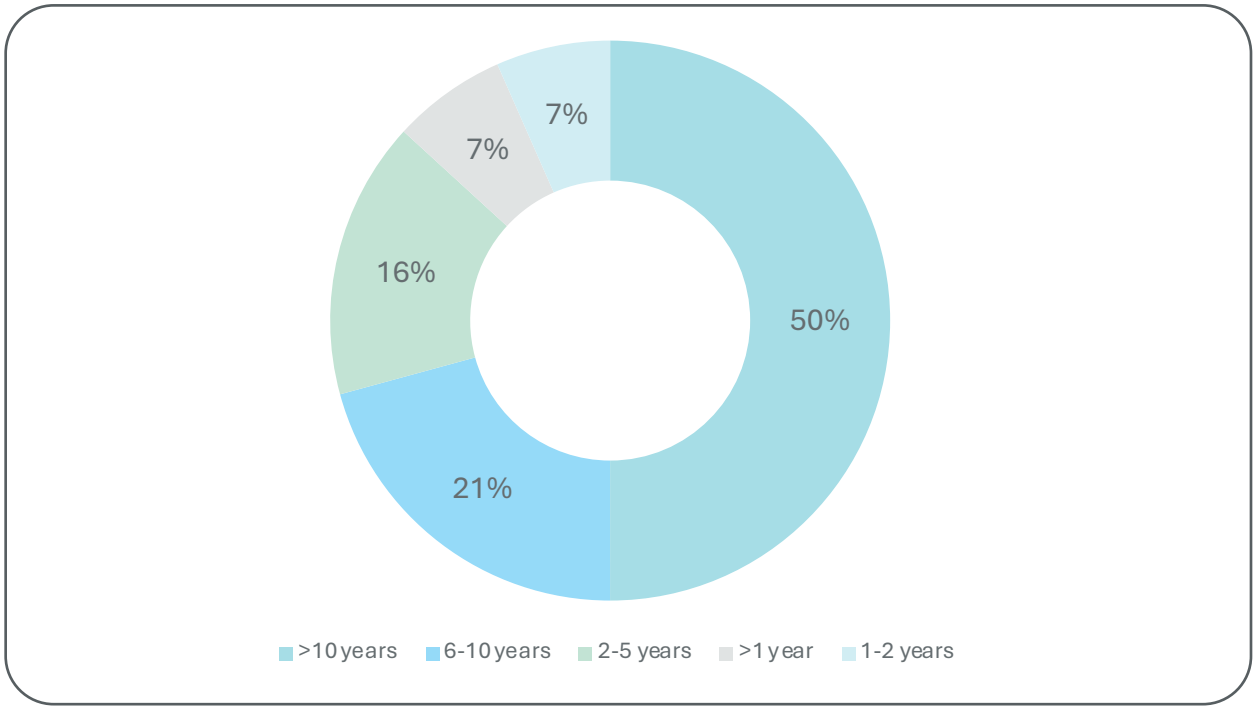
ABOUT THE SURVEY

In addition to a survey of the members of the National Association for Workplace Health Care (formerly National Association of Worksite Health Centers), Alliant worked with the following clinic management companies to distribute the survey to employers for whom they provide services. The clinic management companies are:

- CareATC
- Concentra
- Crossover Health
- Evernorth
- InHouse Physicians
- Marathon Health
- Medcor
- One To One Health
- Pivot
- Premise Health
- Progressive Health
- Vera Whole Health (apree health)

The survey was fielded from April – June 2025, and 108 employers with clinics provided information. Responding employers represented over 2.1M employees and 466 clinics. 50% of survey participants have offered their clinic for 10+ years. Industries represented in the report include manufacturing (38%), health care (12%), financial services (11%) government (10%) and other (29%). Average employer size was 8,992.

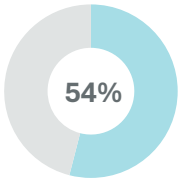
FIGURE 1: How long have you offered clinics?



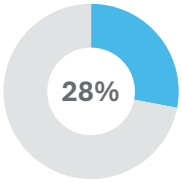
This survey is administered by Alliant's Employer Health Center's specialty practice every two years. For more information, please contact David Keyt, National Director, at David.Keyt@Alliant.com.

KEY FINDINGS

Employers are **increasing** their **investment** in worksite health centers in the **next two years**:



54% of respondents say they will increase the services or staff in the health center.



28% say they will add health centers in other locations.

WHY HEALTH CENTERS?

Access, Patient Experience, and Quality are why employers sponsor health centers.

POPULATION HEALTH

60% of employers now offer care coordination, a role focused on integrating services across health care providers and settings. **Use of care coordination services is up from 37% in 2023.**

HDHP/HSA

For employers with High-Deductible Health Plans with HSAs, **administering a single flat fee for services is the most common approach to meeting fair market value compliance requirements.**

STAFFING

Nurse practitioners (76%) continue to be the most common health center staffing model.

FINANCIAL MODEL

Cost-plus (44%) continues to be the preferred financial model of employer onsite clinics.

INCENTIVE STRATEGIES

Elimination of co-pays (52%) is the most common incentive strategy used to drive health center utilization.

TECHNOLOGY

97% of employer onsite clinics now utilize electronic medical record systems, up from 93% in 2023.

PATIENT EXPERIENCE

Online appointment scheduling is the #1 feature of patient portals/mobile applications.

ACCESS

68% of survey respondents report same day access when booking an appointment.

RETURN ON INVESTMENT

Employer clinics consistently deliver strong ROI. Over 52% of survey respondents reported an ROI of greater than 2:1.

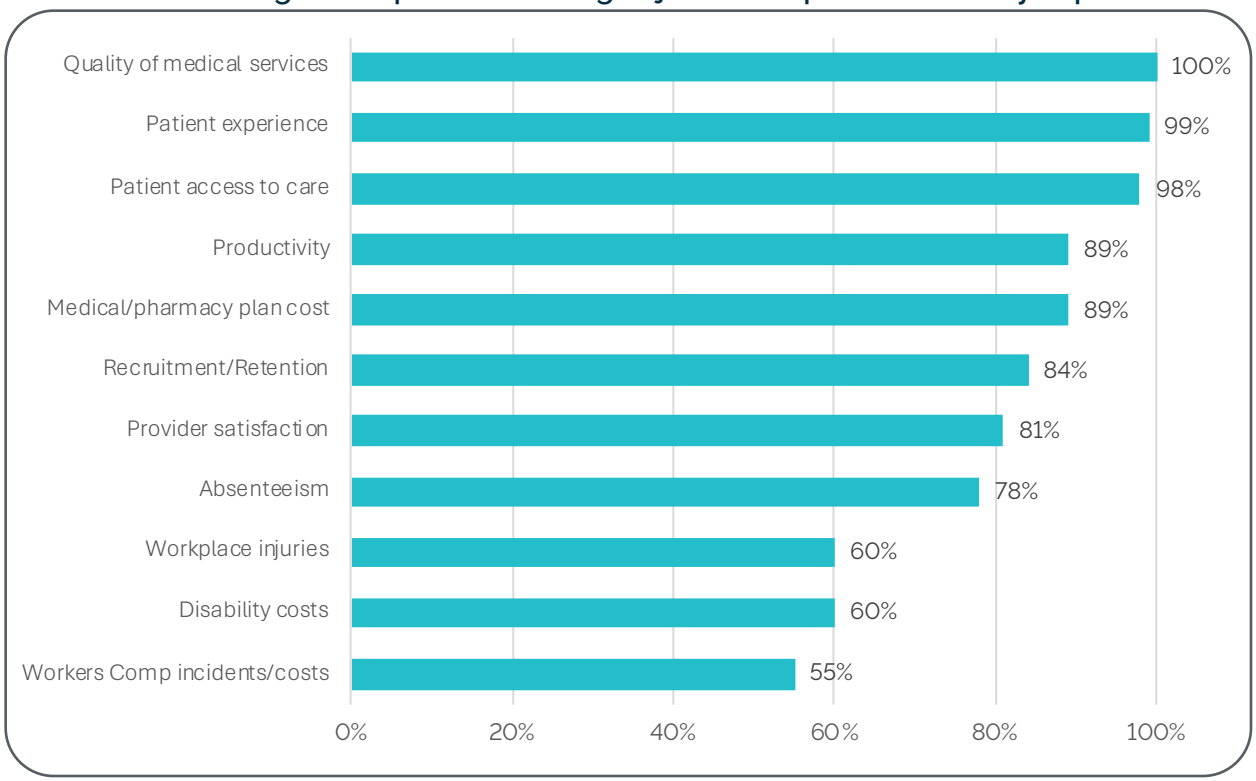
STRATEGY

Employer Clinic Objectives

While medical/pharmacy plan cost is often thought of as the main employer objective, it actually ranks 5th among survey respondents. Employers' top objective for their clinics is to provide high quality medical services. Almost all also report "Patient Satisfaction/ Experience" and "Patient Access to Care" as an objective for implementing their clinic. Productivity remains a top priority with 89% rating it as "Important" or "Very Important". This is consistent with the 2023 NAWHC survey, where 91% ranked productivity as a key objective. Reducing workplace injuries, workers' compensation, and disability costs are important objectives for over 55% of respondents.

> Employer health centers target cost, quality, access, and satisfaction

FIGURE 2: Percentage of respondents rating objective "Important" or "Very Important"

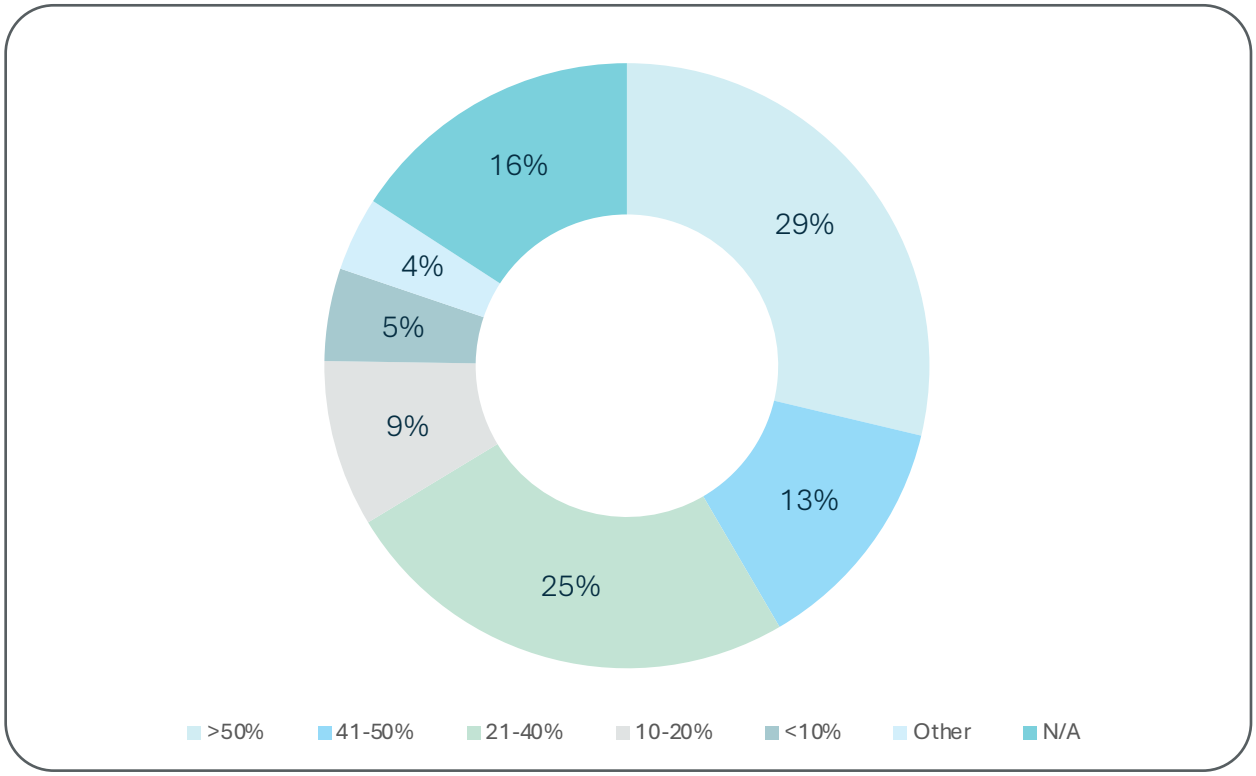


Use as Medical Home

Many employees either do not have a primary care provider or have problems accessing a provider. Offering a worksite health center as a primary care medical home provides significant value by offering a patient-centered, comprehensive, and coordinated approach to health care that results in better health outcomes, improved patient experience, and reduced health care costs. Medical homes foster strong, continuous relationships between patients and their care teams, leading to more accurate understanding of individual health needs and more personalized care over time.

> Many clinic utilizers are using the clinic as their medical home

FIGURE 3: Percent of clinic utilizers who use health center as a medical home



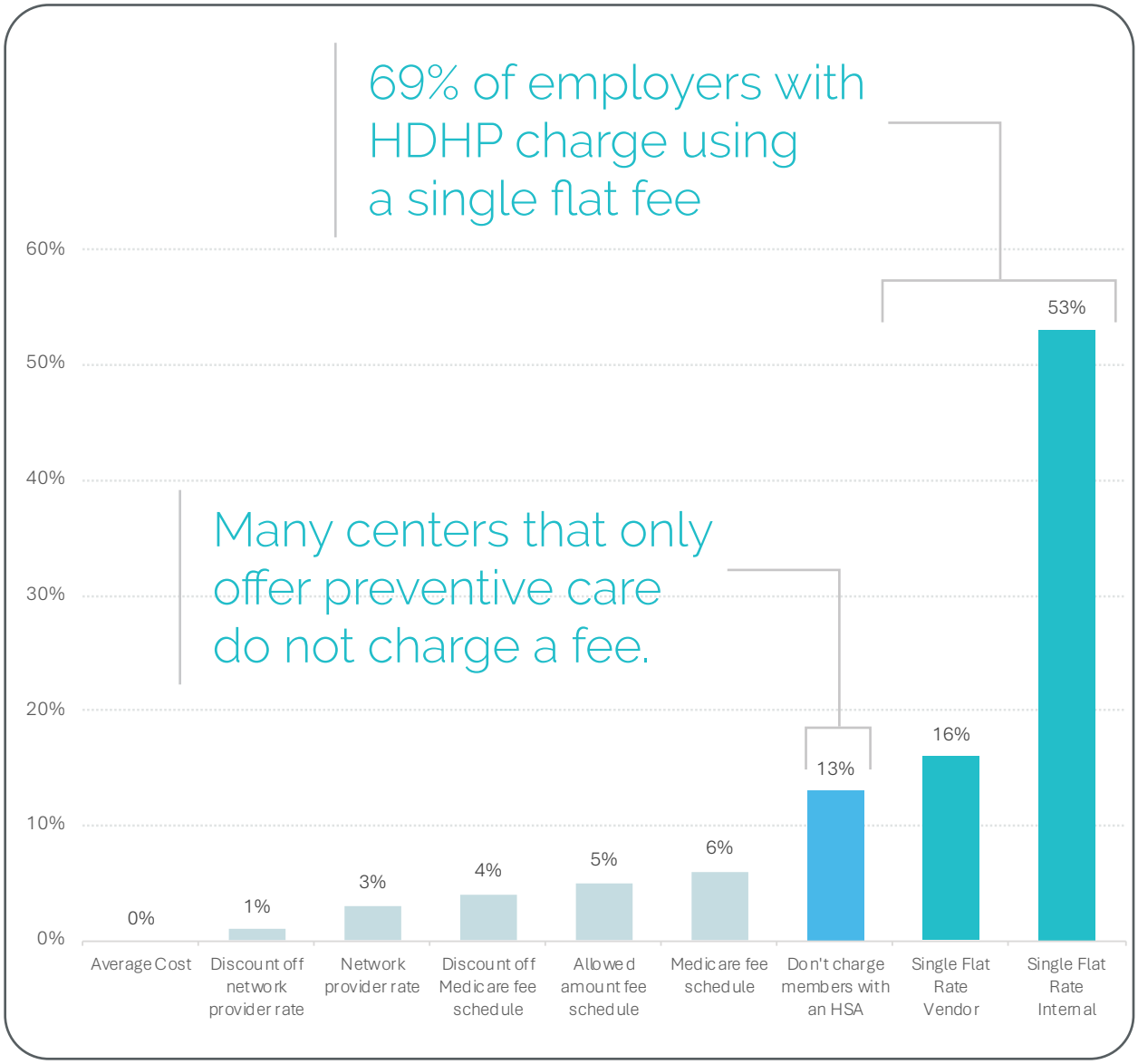
Evidence shows that this model reduces unnecessary emergency room and hospital visits, mitigates health disparities, and achieves substantial cost savings for both patients and the employer by emphasizing prevention, proactive management, and timely intervention. Patients benefit from enhanced access to care, involved decision-making, and a structured care environment that supports long-term well-being. 29% of survey respondents reported that half of their clinic utilizers were using the clinic as their medical home.

HDHP with HSA

Because of IRS rules, members enrolled in a high-deductible health plan with a health savings account (HSA) are required to pay a fee for using an employer onsite clinic if the clinic provides more than preventive care, first aid, treatment for onsite injuries, and wellness services. If a member with an HSA uses an onsite clinic without paying for more comprehensive care, they can lose their HSA eligibility. In order to comply with the IRS requirement, an employer must determine the "fair market value" to charge clinic users for more comprehensive clinic services.

The majority of employers (69%) chose a single flat fee that complies with IRS regulations. 13% choose not to administer a fee.

FIGURE 4: How do you charge Fair Market Value?

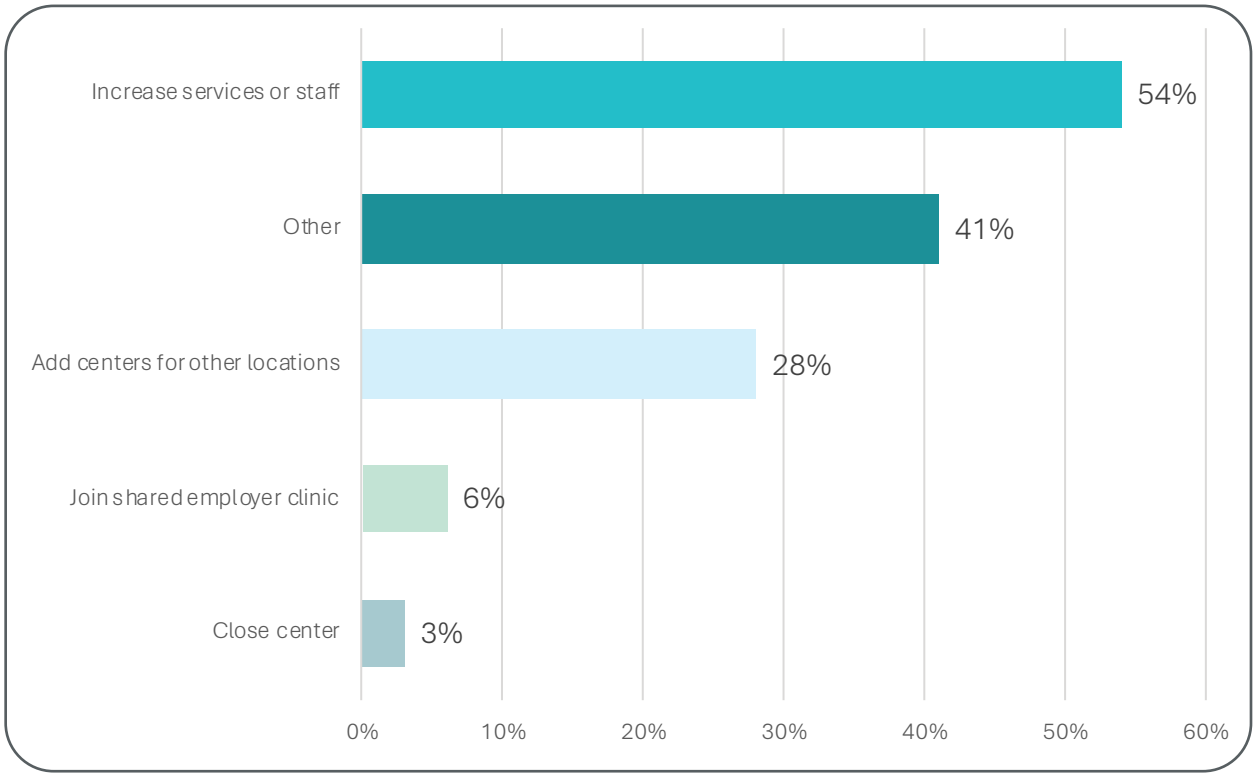


Future Plans

Employers are rapidly embracing and expanding their employer health center solutions, including onsite, near-site, and virtual modalities. The resurgence from COVID years has been driven by primary care access shortages, demand for preventive care, mental health support, as well as employer's focus on cost control and worker well-being. Today, employers are rapidly evolving models to optimize engagement and performance.

54% of respondents say they will increase the services or staff in the health center. 28% say they will add health centers in other locations. Employers responding as "Other", mostly reported they are not planning to make any changes in the near future.

FIGURE 5: What are your plans for the worksite health center in the next two years?



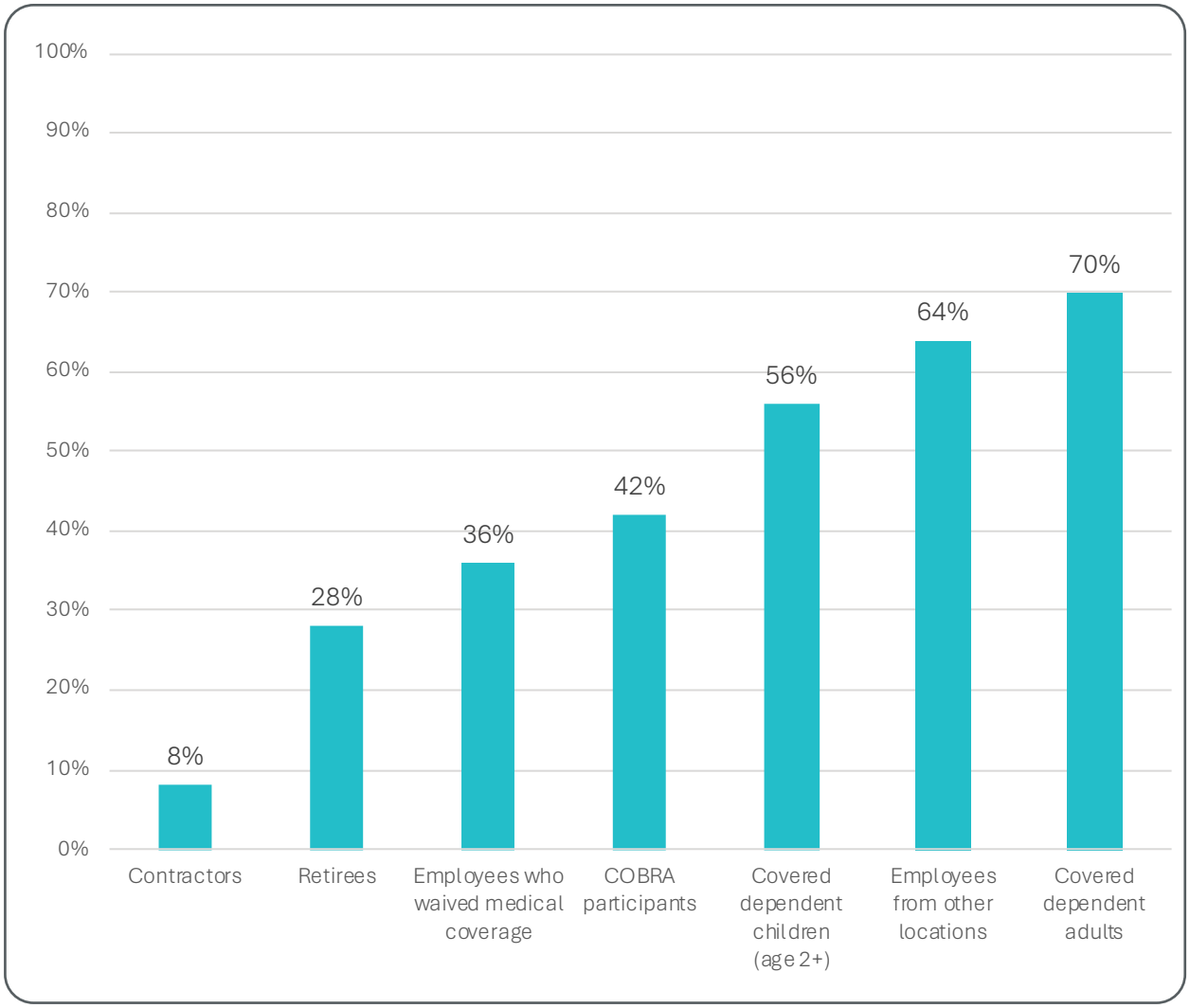
MODEL OPTIONS

Employer clinics are the foundation for an effective worker well-being strategy. One of their many strengths is the ability to be customized to meet the specific goals and objectives of the employer sponsor. Customization includes a number of dependent design decisions.

Eligibility

In addition to employees, 70% of employers offer health center access to plan enrolled dependents, with 56% offering access to children 2+.

FIGURE 6: Who is eligible for general medical services?

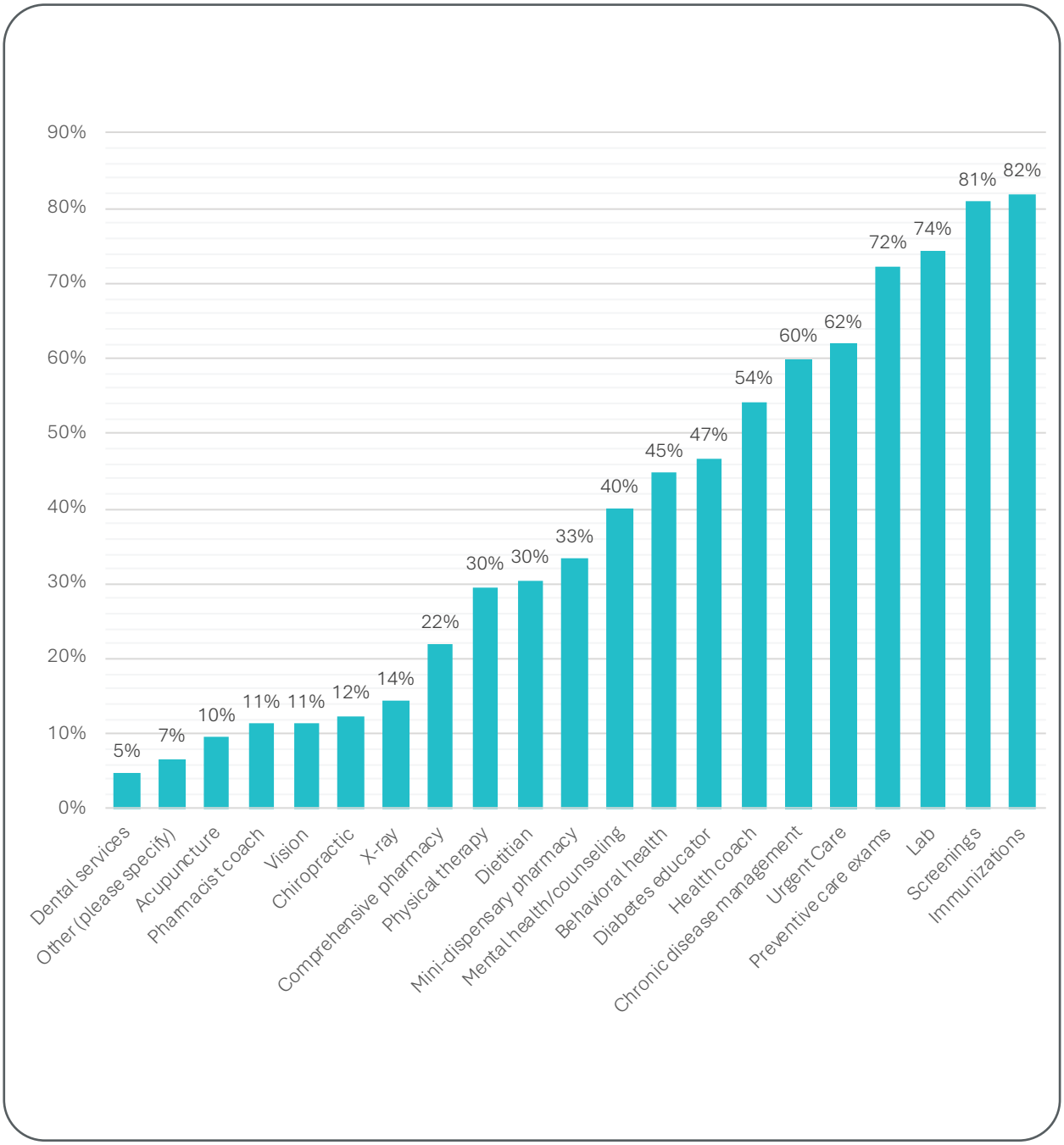


Services

Primary Care Services Provided

Immunizations and screenings are the most common primary care services provided, offered by 81% of employers. Behavioral health services are offered by 45% of employers, up from 33% in 2023. 60% are offering chronic disease management services. 11% offer onsite vision services, up from just 2% in 2023.

FIGURE 7: What non-occupational services does your health center offer?



Health Management

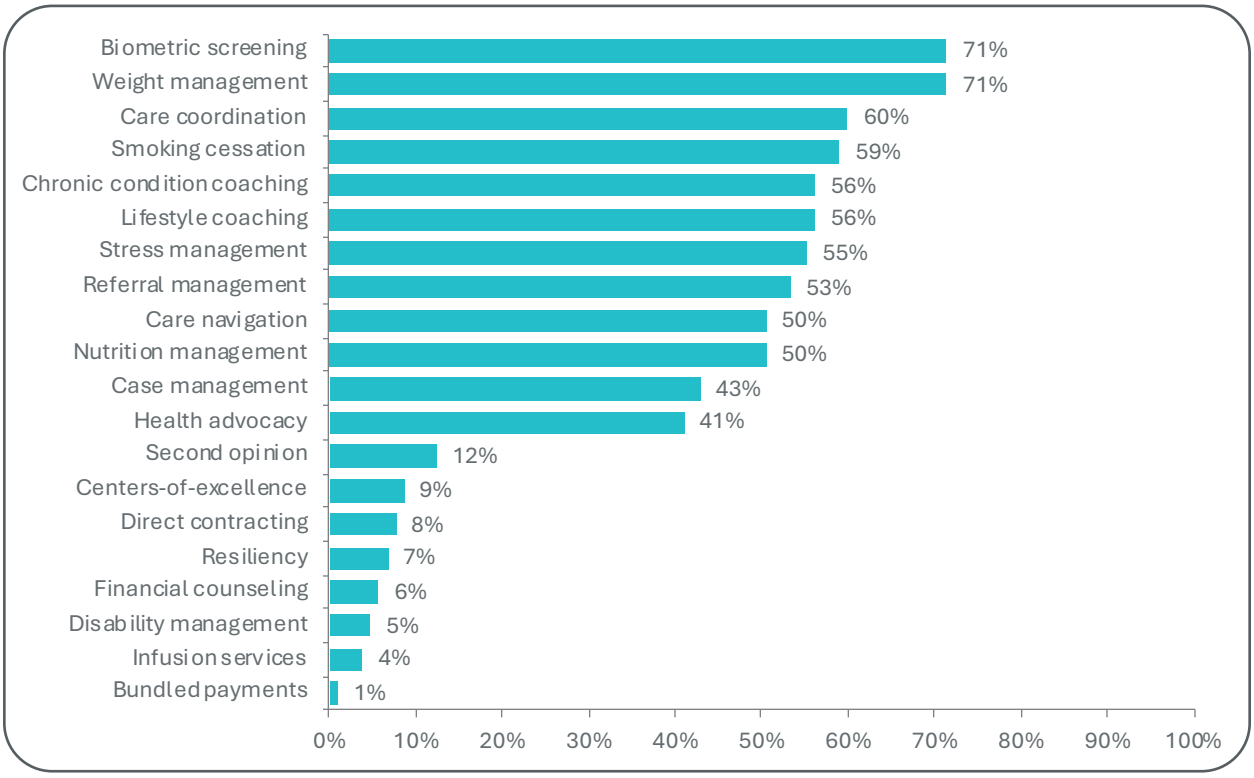
Adding health management services, like biometric screenings, weight management, and care coordination, to an employer onsite clinic offers substantial value by making resources easily accessible within the workplace. These integrated services help remove barriers related to time, cost, and access that often prevent employees from seeking timely care. Health management services support employee well-being and cultivates a culture of health that promotes productivity.

Biometric screening and weight management services are the most common health management service, with 71% of employers offering today. And 60% of employers now offer care coordination, a role focused on integrating services across health care providers and settings. Use of care coordination services is up from just 37% in 2023.

> 60% of employers offer care coordination

Only 8% of employers have implemented direct contracting for other services, like surgeries, through their clinic manager. This represents a significant opportunity to lower costs and improve the patient experience.

FIGURE 8: Do you offer any of the following health management services at the clinic?



Occupational

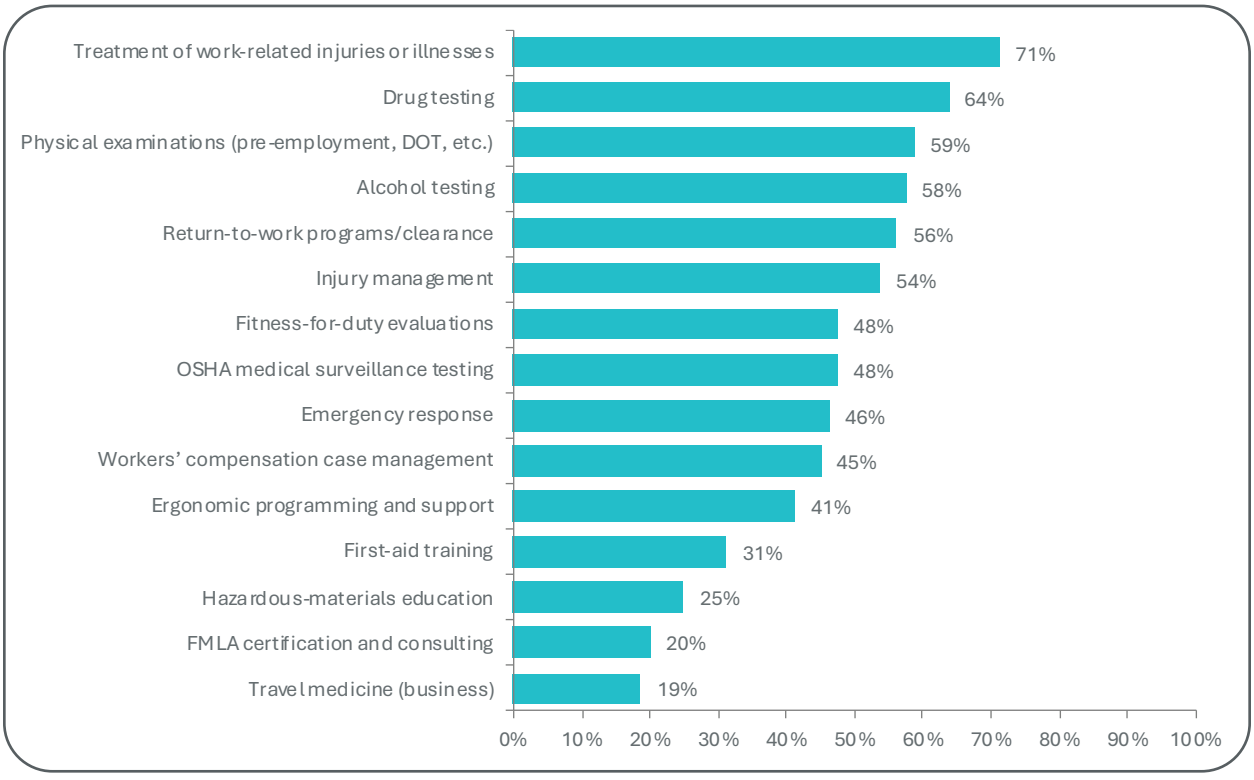
Having health professionals available onsite enables timely intervention for worksite injuries, illness, or health emergencies. Access to occupational services also facilitates preventive measures, like health screenings, vaccination programs, and ergonomic assessments. These services help deliver a safer work environment, more effective case management and follow-up care.

Treatment of work-related injuries or illnesses (71%) and drug testing (64%) are the two most common occupational services. 56% of employers offering occupational services support return-to-work programs.

45% of health centers with occupational health services support workers' compensation case management, enabling timely medical intervention, reducing claims and health care costs, and expediting return-to-work.

> 48% support workers' compensation case management

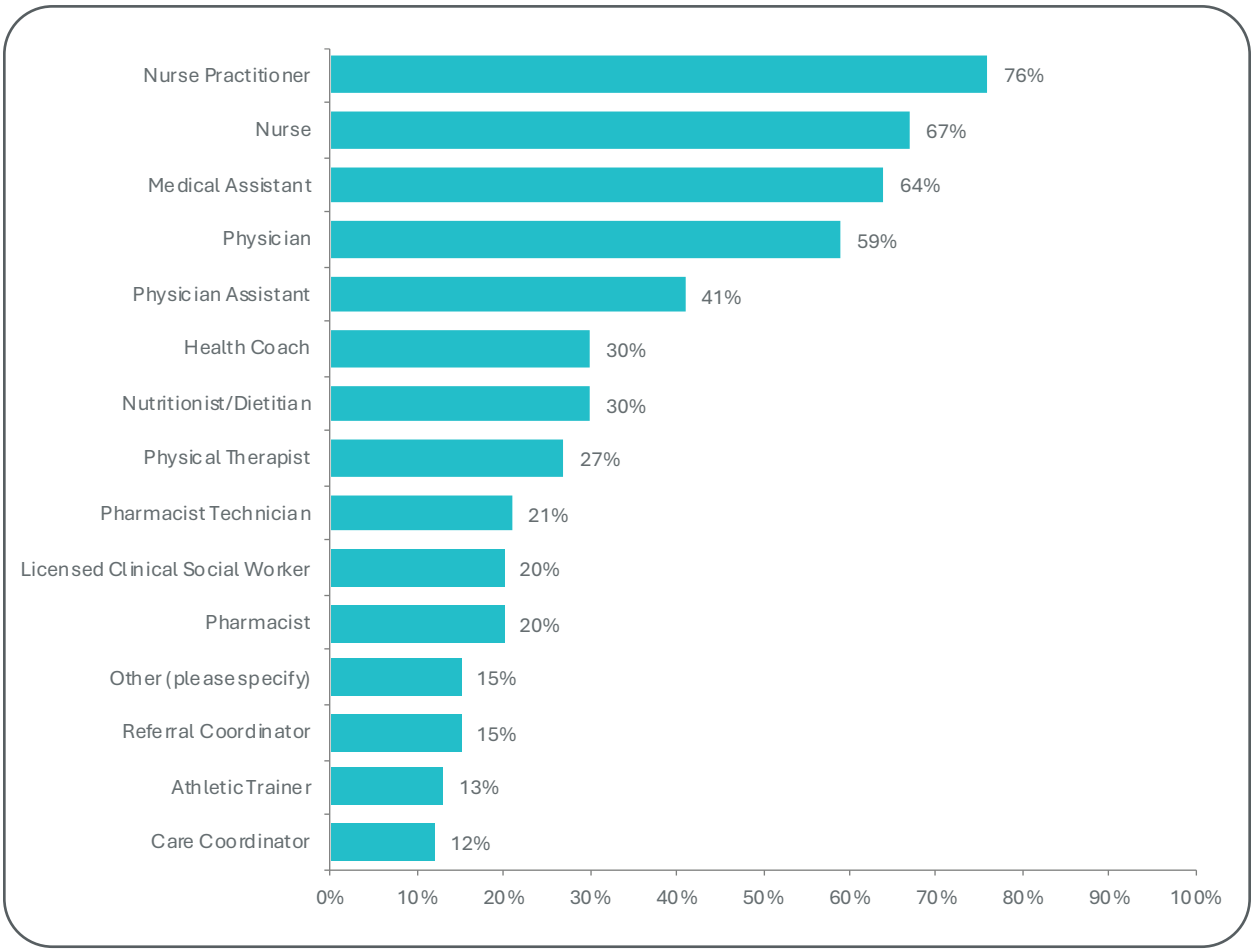
FIGURE 9: Which occupational services does your clinic offer?



Staffing

Consistent with past survey years, nurse practitioners (76%) continue to be the most common provider in health centers. Nurse practitioners can assess, diagnose, and treat patients. In many states, they can prescribe medication. Many employers choose a nurse practitioner over a physician due to cost, as well as their focus on prevention, patient education, and support. The majority (59%) of employers staff their health centers with physicians, which in addition to patient care, offers employers additional consultation and oversight support.

FIGURE 10: What staff work at the health center?

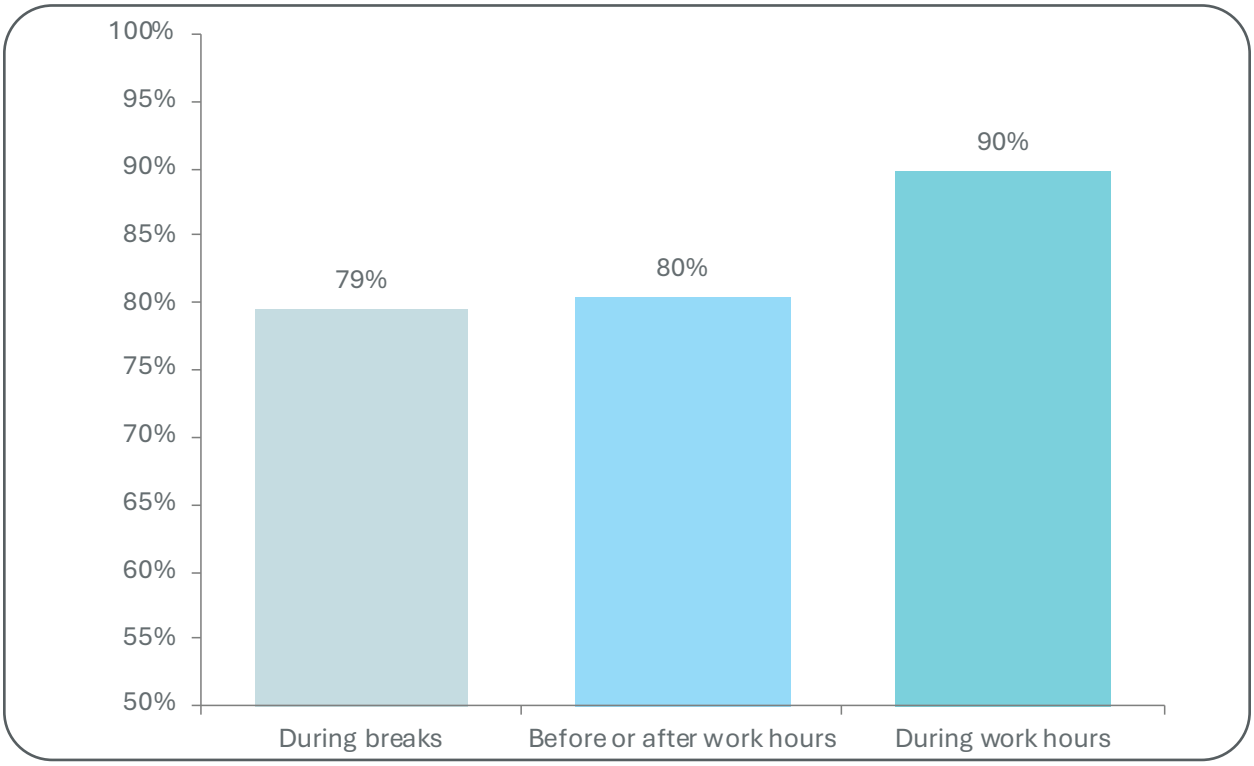


Employers offering larger health centers with broader service scope is increasing, with 30% now staffing a nutritionist/dietitian, compared to just 17% in 2023. And 20% of health centers are now staffed with a licensed clinical social worker to address behavioral health needs.

Hours of Operation

A critical employer decision point is what hours the health center will be open and what the managerial policy will be for allowing access in relation to job roles and responsibilities. Employees appreciate the opportunity to access care while at work and not need to take time off of work or use personal time."

FIGURE 11: Indicate when employees may access in-person health center services.

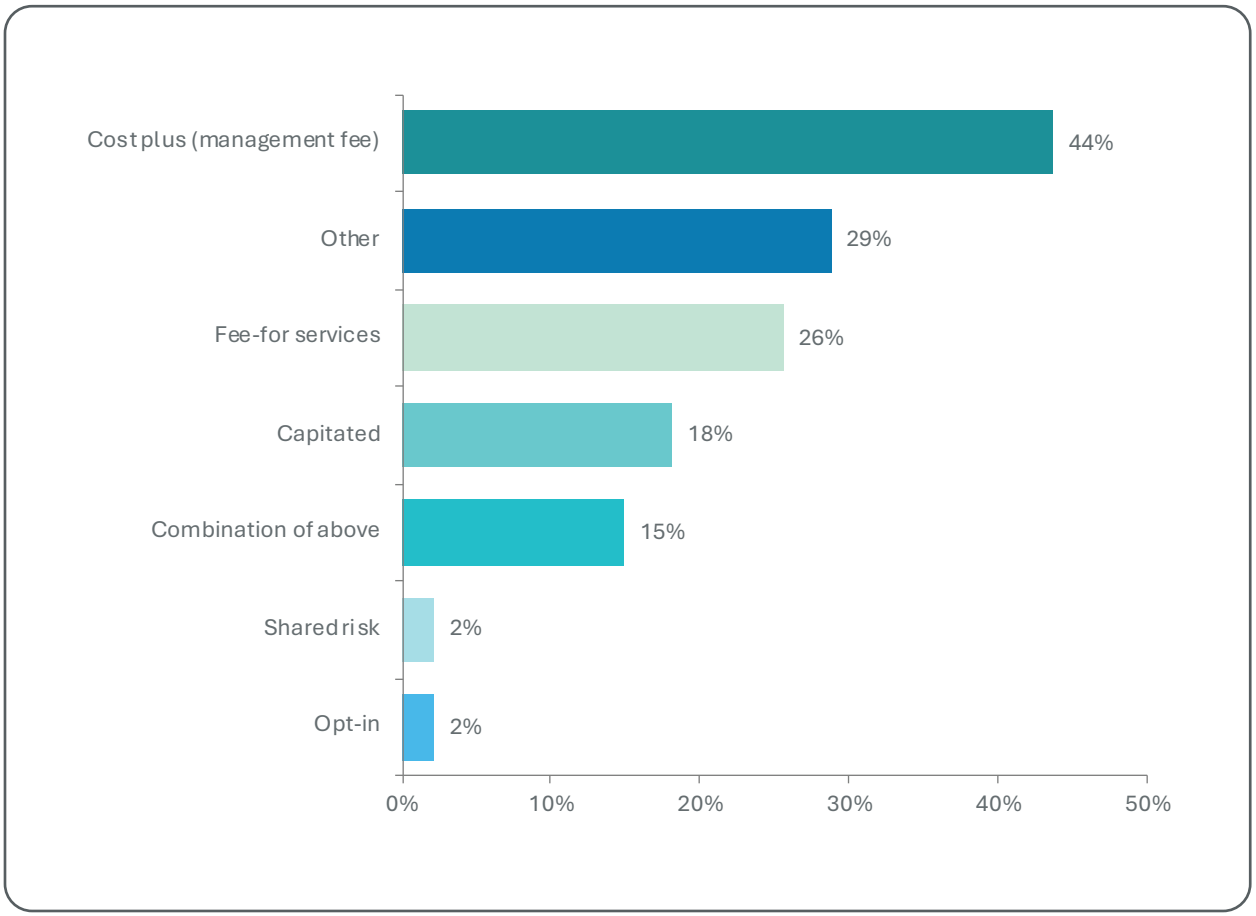


> 90% of employees allowed to visit the health center "During Work Hours"

Financial Model

A benefit of direct sponsorship of onsite health care is the customization of the financial model to align with employer objectives. Migration away from the community fee-for-service model improves alignment between the employer sponsor and the provider.

FIGURE 12: If you contract for an outside partner to manage your center, how do you pay for services?



Cost-plus has been preferred by employers in recent years due to it offering transparency. Payments are based on the actual cost of the service, plus an agreed percentage, making it clear what is paid and why. 44% of employers in 2025 are contracted under a cost-plus arrangement.

44% of employers contract using cost-plus

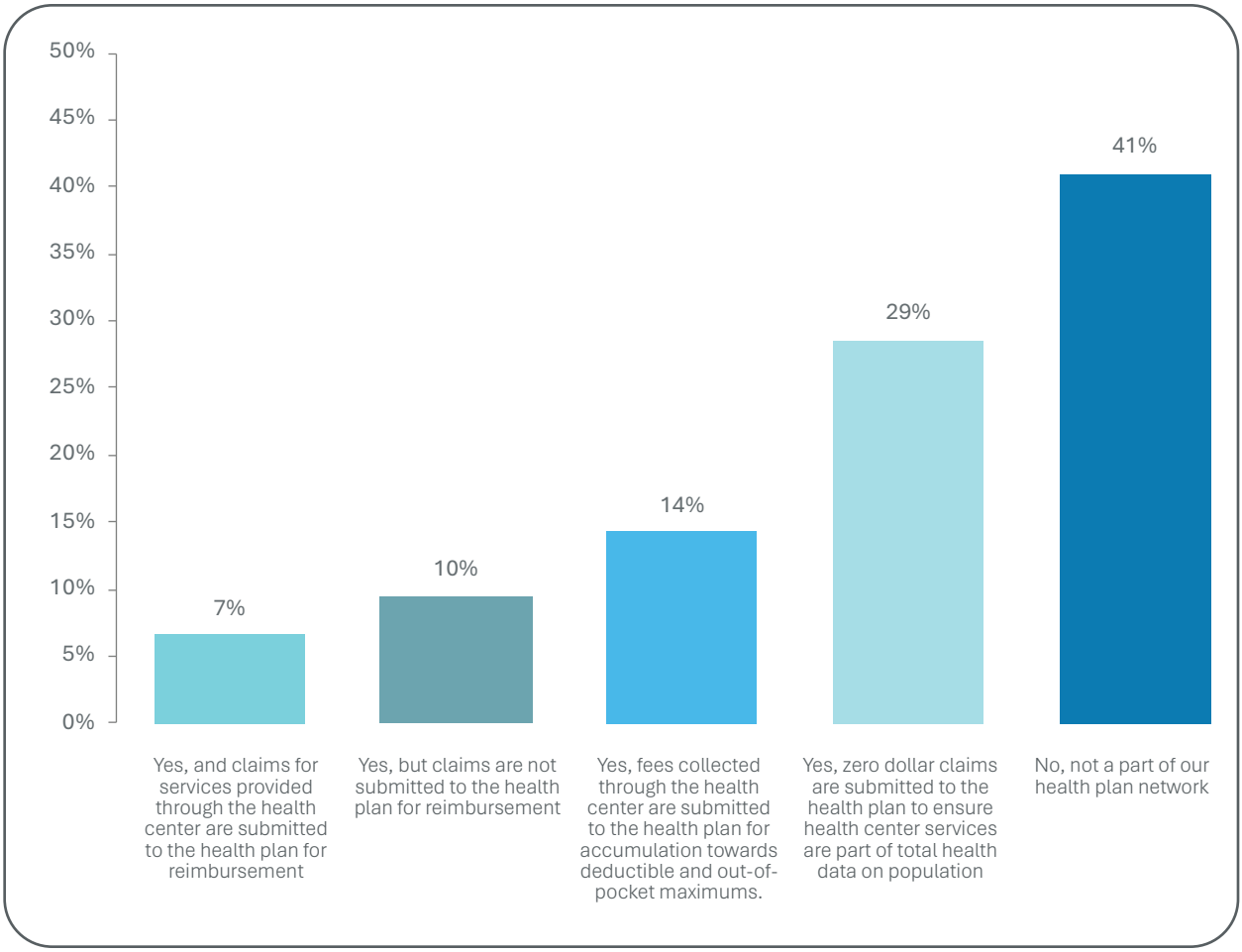
Network

Integrating benefit partners and point solutions delivers substantial value to employer sponsors, impacting cost management, operational efficiency, employee engagement, and clinical quality. It also streamlines HR processes, reducing manual work for employer HR and Employer Health and Safety staff.

The majority of employers (59%) view their health center as part of the health plan network. 87% of those employers integrate the data, either through standard adjudication, zero dollar claims, or flat file for accumulation.

> Only 7% of employers submit claims for reimbursement

FIGURE 13: Is your health center benefit part of your health plan network?



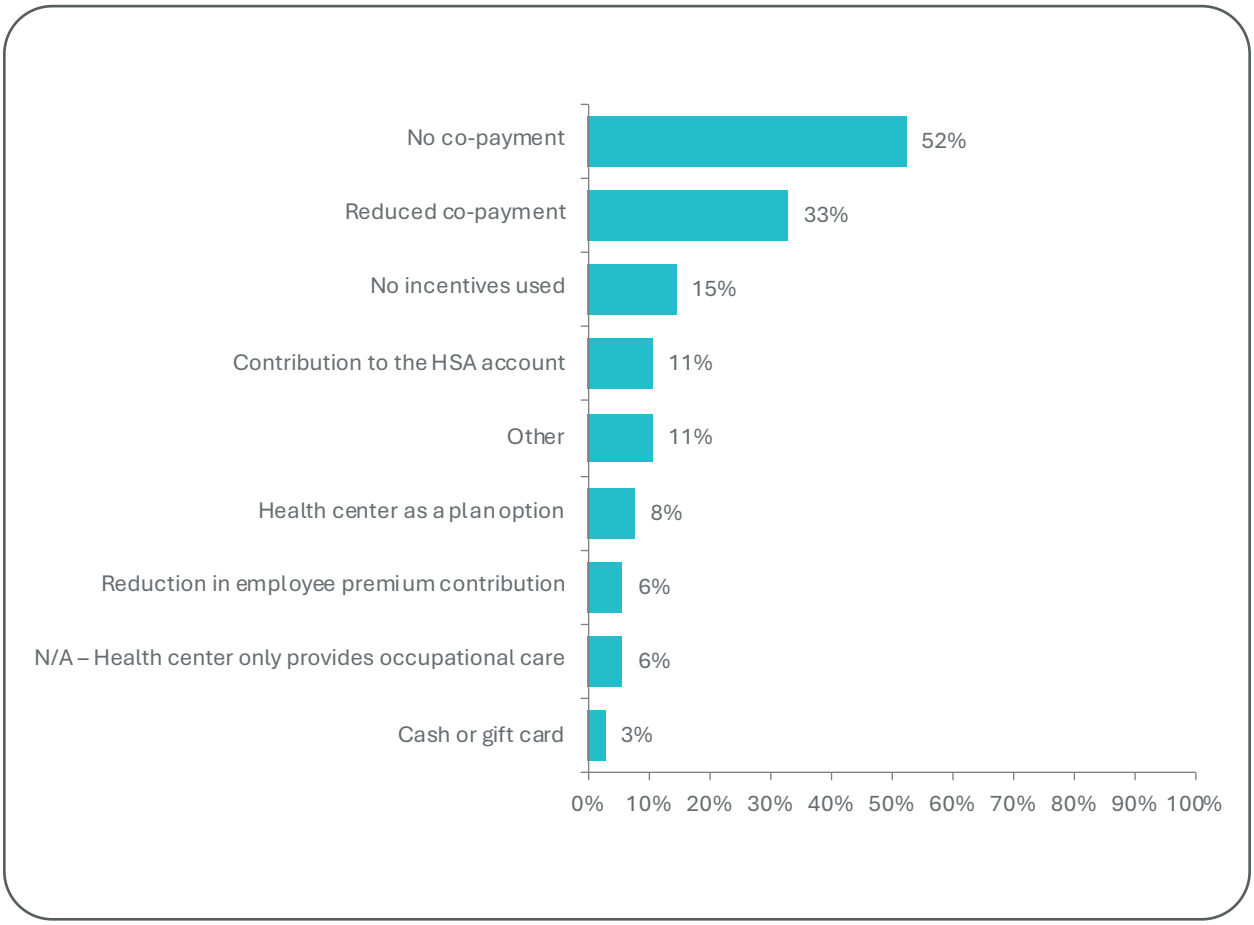
Incentives

Employers and employees experience significant value from the utilization of services made available via an onsite health center. But providing convenient access is frequently not adequate to reach the highest levels of potential utilization. Best practice design is based off a multi-faceted approach combining financial, non-financial, and social strategies.

The most common incentive strategy is to eliminate co-pays (52%) for services compared to community primary care options. More aggressive incentive programs include "education in employee premium contribution" (6%) or "Health Center as a plan option" (8%). These strategies are down slightly from 2023.

Over half of employers do not charge employees for clinic services

FIGURE 14: What incentives do you use to encourage employees to visit the clinic for non-occupational care?



TECHNOLOGY

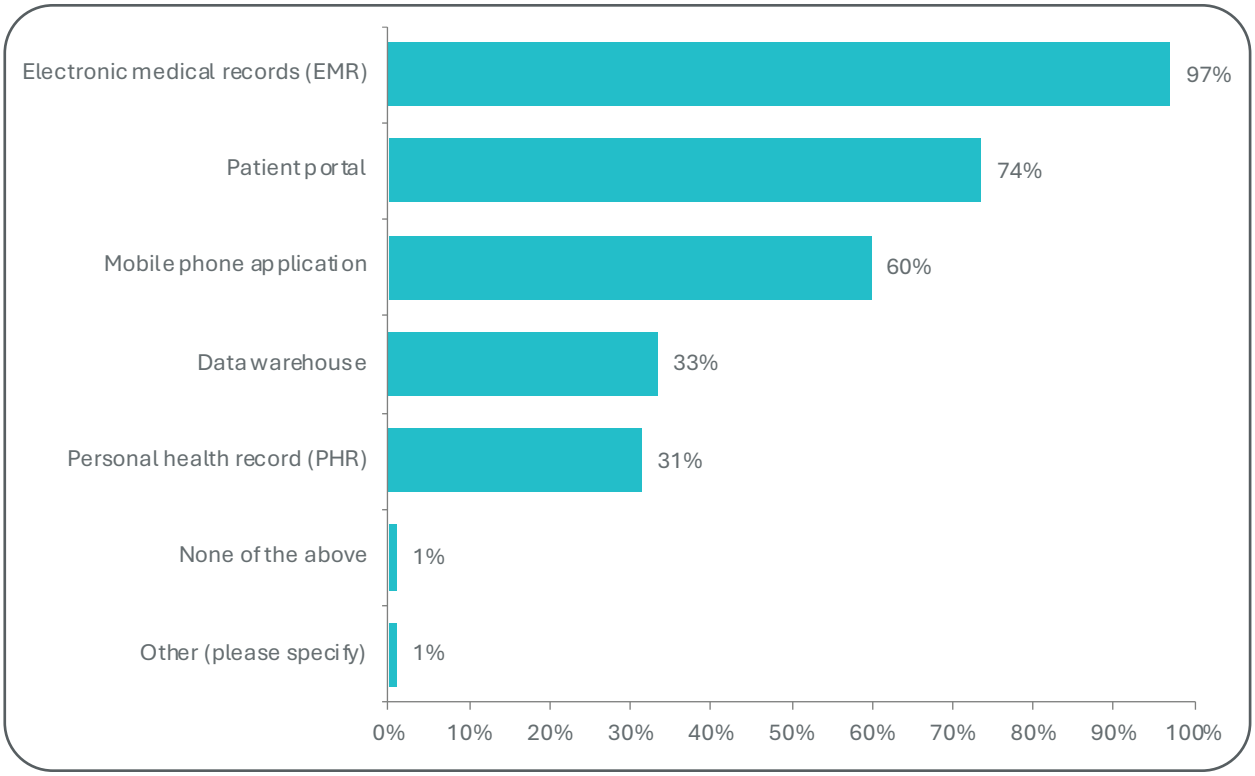
In the past 20 years, primary care clinics have experienced a dramatic transformation to become more interoperable, capable of connecting labs, pharmacies, and hospitals. Systems can now support provider decision making and use of evidence-based guidelines, and patients have access to medical records, real-time lab results, secure communications with care teams, and virtual care. Electronic Medical Records drive higher quality, safety, efficiency, and patient engagement, making health data actionable and personalized.

Core Components

97% of employer health centers now utilize electronic medical record systems, up from 93% in 2023. The majority offer a patient facing component, with 74% giving access through a "patient portal" and 60% providing access through a mobile phone application, which increased from 43% in 2023.

60% offer a mobile app to patients

FIGURE 15: What information technology is used by the worksite health center?

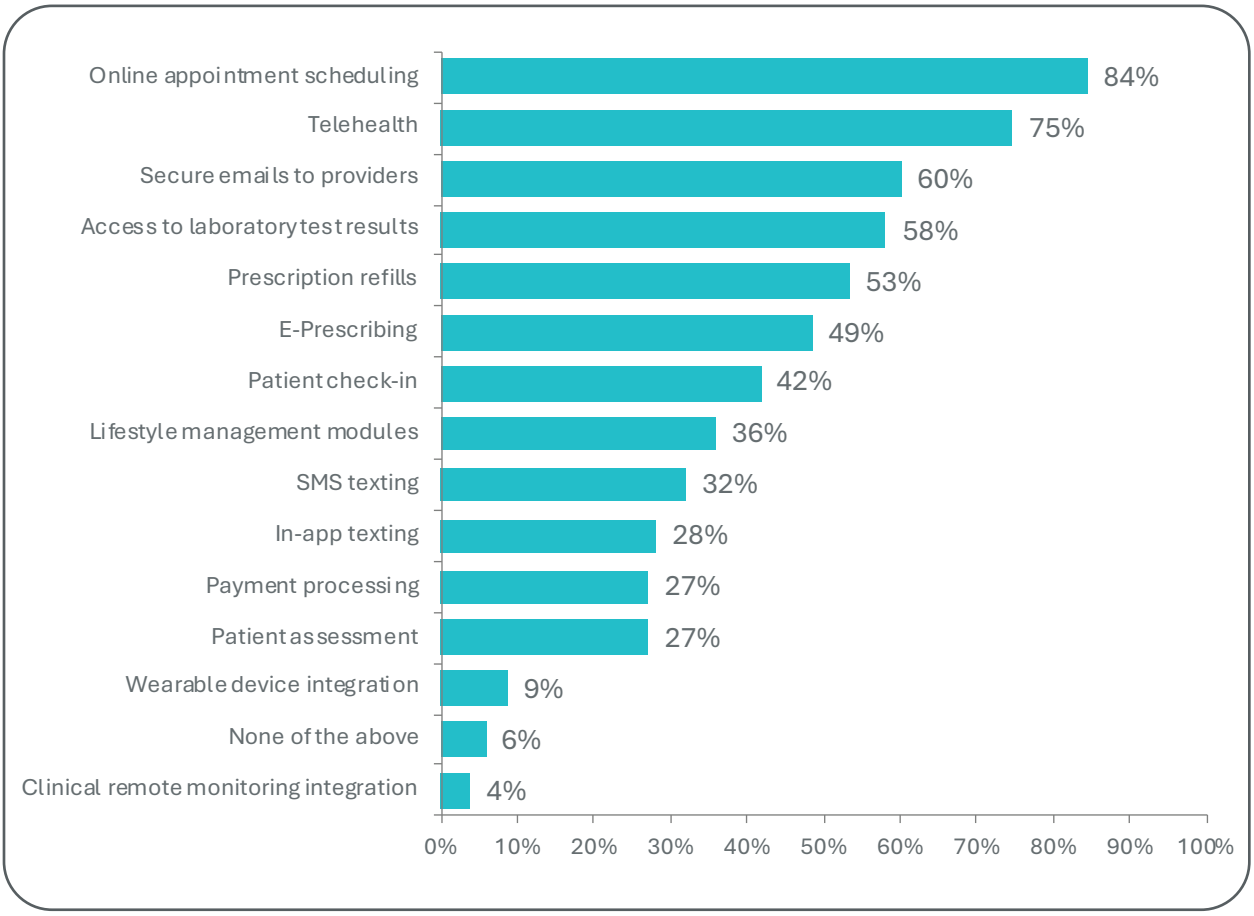


Features and Functionality

Patient portals and mobile applications today provide an infrastructure for managing prescriptions, scheduling appointments, and accessing health information (i.e. lab results, physician comments). Portals continue to evolve in response to demand to meet patients where they are at, with a seamless, user-friendly experience. Future integration across point solutions, apps, and health care networks is also expected.

75% of employers offer telehealth services

FIGURE 16: Which of the following information technology services are available to patients?



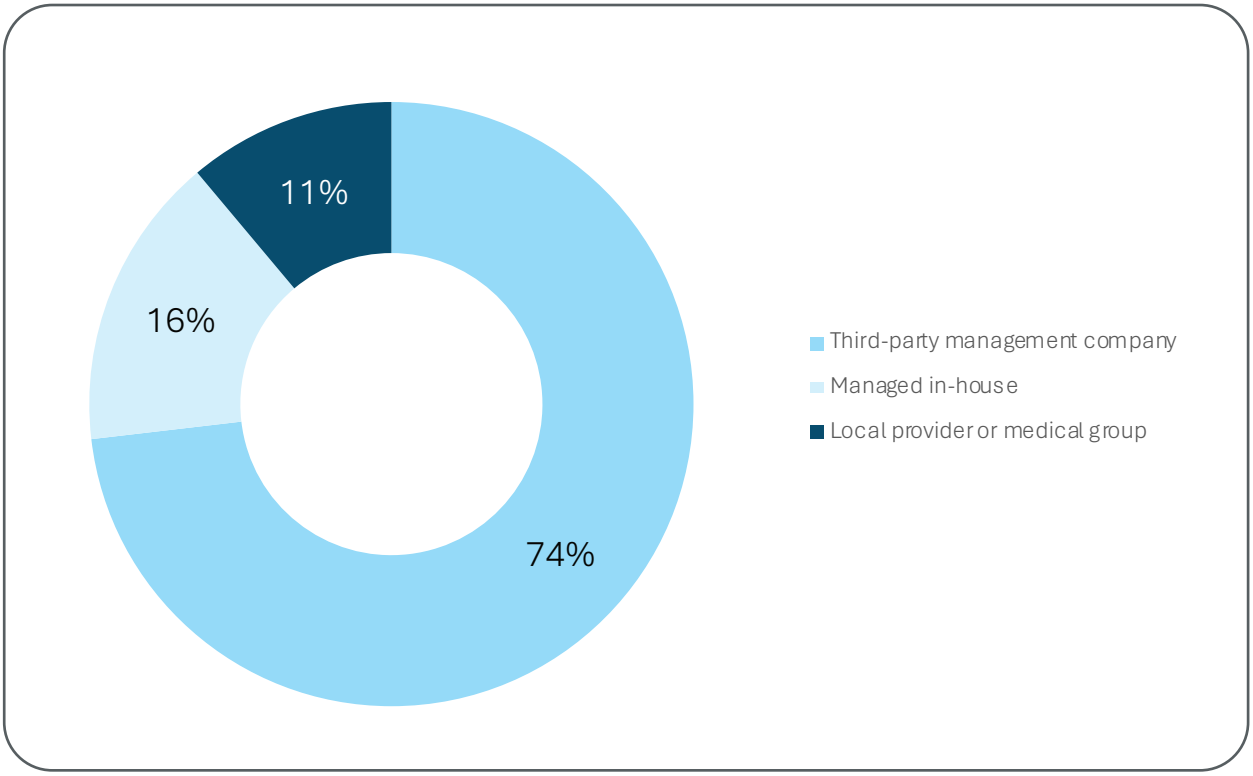
Online appointment scheduling (84%) is the most popular feature of portals/apps for patients. It is followed by different ways to engage with the clinic care team, i.e. Telehealth (75%) and Secure Emails (60%). Texting is the fastest growing feature, with 32% of employers offering it as a feature compared to just 10% in 2023. 100% of educational and governmental organizations offer virtual/telehealth services.

GOVERNANCE

Over the past 50 years, employers have shifted from in-house managed models to outsourced solutions. While an in-house managed model may provide some benefits, such as reduced cost and increased control, outsourced models have become the standard. Modern employers don't have the internal resources or expertise to effectively manage the complexity of today's clinics and strategically have decided not to be in the business of clinic management. 74% of survey respondents have third-party management contracts in place. While many health systems and medical groups are offering or exploring the service of providing and managing clinics for employers, only 11% of the respondents reported using local providers.

Only 16% manage clinics in-house

FIGURE 17: WHO MANAGES YOUR HEALTH CENTER?



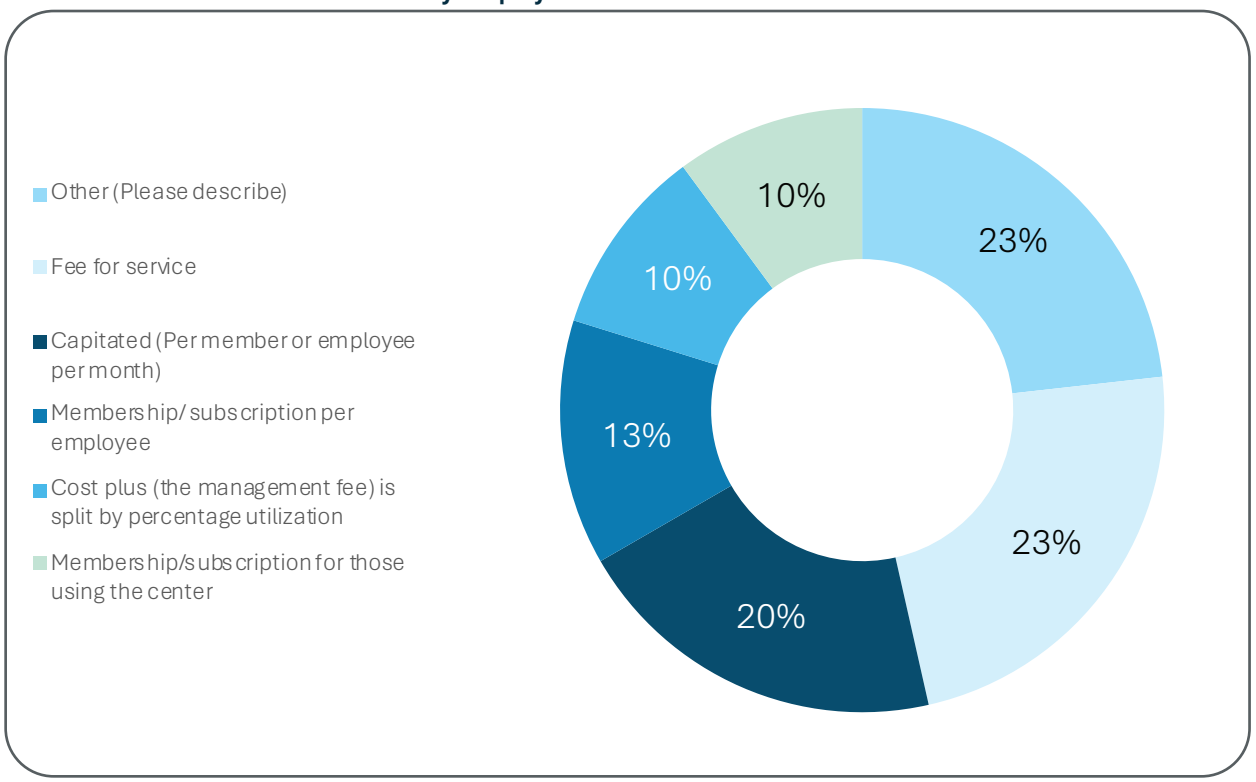
SHARED CLINICS

Employer onsite clinics have long been limited by location in delivering services to the entire employer member base. To solve for this, employers and vendors have been innovating to create access to shared clinic models that meet their mutual goals and objectives. Over the past 20 years, the prevalence of shared clinics has continued to grow. Approximately 25% of survey respondents participate in a shared clinic today.

For those who participate in shared clinics, there are multiple financial models for contracting. Fee-for-service, capitated, and "other", being the most common responses. The model is usually influenced by the vendor manager and/or the anchor employer.

25% participate in a shared clinic

FIGURE 18: Shared Clinics: How you pay for services



VIRTUAL

Virtual services greatly enhance the value of in-person primary care visits by expanding access, improving convenience, and supporting continuity of care. They allow patients to receive acute, preventive, and chronic condition services remotely, reducing barriers like geography, time, and scheduling.

For employers seeking to deliver high quality primary care to members, the virtual modality offers flexibility to customize a model to fit each individual cohort of members. Optimally, virtual services are delivered by the same provider patients see in-person.

70% of survey respondents offer virtual access to the clinic providers during business hours. 20% of respondents don't provide telehealth via the clinic, but provide access in a different way. The most common service provided by virtual service is a "telephonic consultation", followed by "video-based" at 62%. Secure messaging was reported at 40%.

FIGURE 19: Are virtual care services delivered by your clinic management partner?

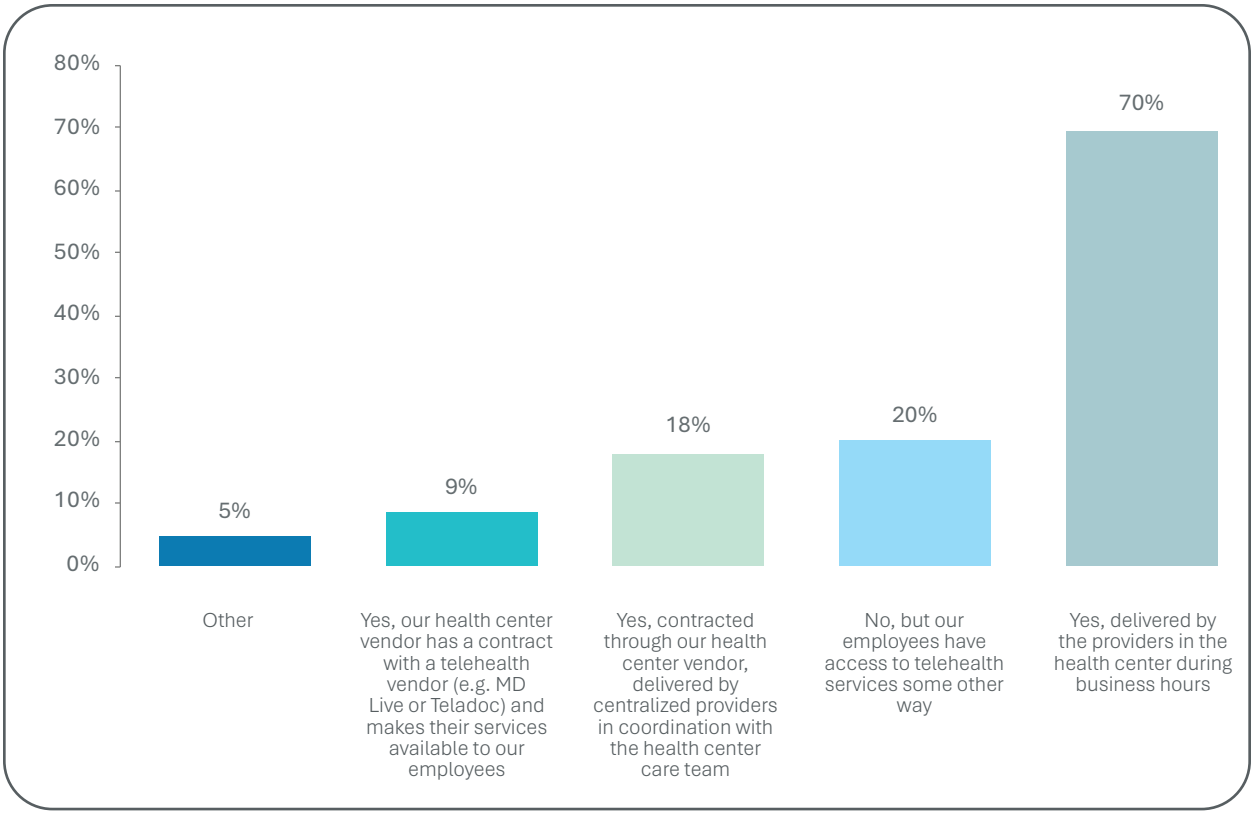
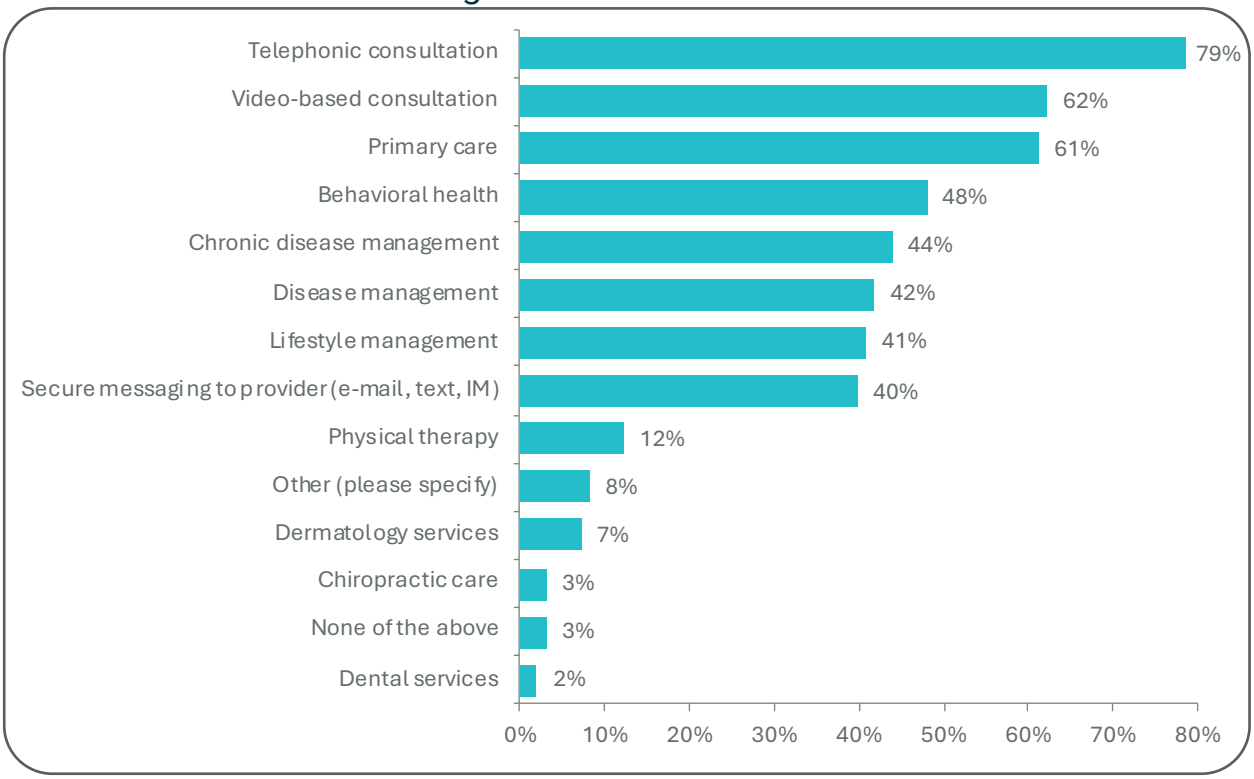


FIGURE 20: Which of the following virtual/telehealth services are available?



PERFORMANCE

Wait Time

A key benefit of an onsite or near-site health center to both employees and employers is the easy and quick access to care. This reduces time off for traveling and waiting for providers, which increases satisfaction and productivity. 68% of survey respondents report same day access when booking an appointment. Only 5% reported having to wait 3 or more days. Once in the health center, 87% of respondents reported a wait time of 10 minutes or less. Only 2% reported average wait times of 15 minutes or longer.

> 68% of patients have same day access to care

FIGURE 21: Average wait time to get an appointment.

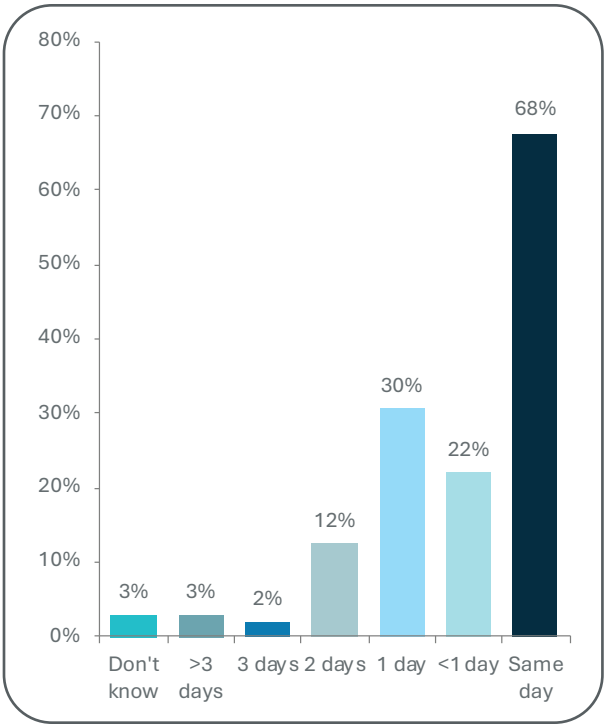
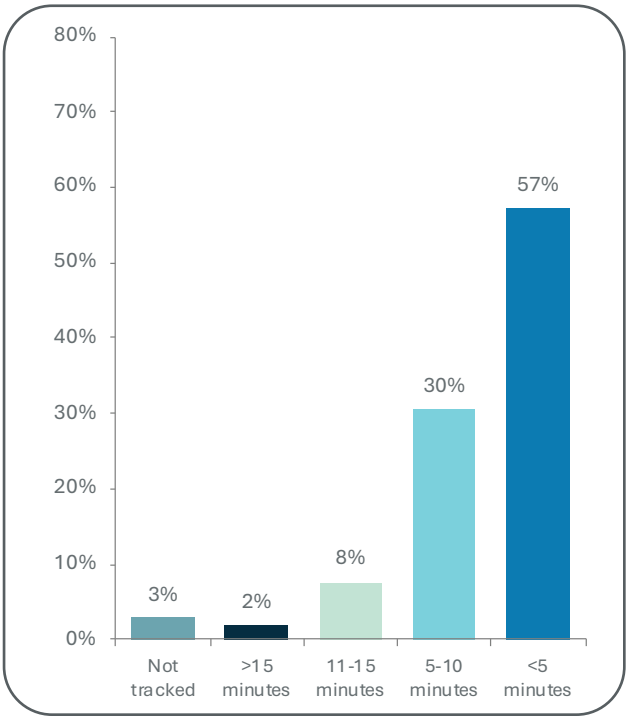
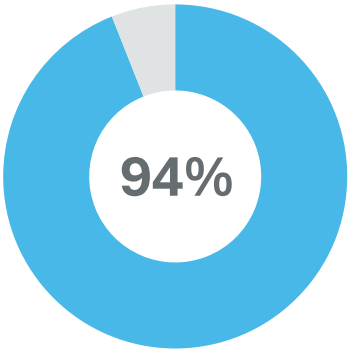


FIGURE 22: Average wait time to see a provider once in the health center.

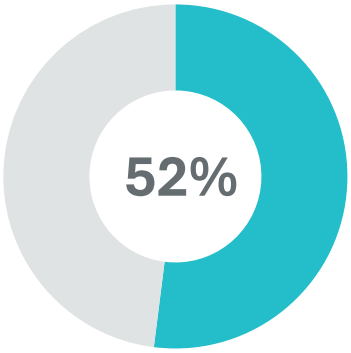


Return on Investment

94% of employers report a ROI of greater than 1:1 in the most recent reporting period. Over 52% of survey respondents reported an ROI of greater than 2:1, and 25% reported an ROI of greater than 3:1.

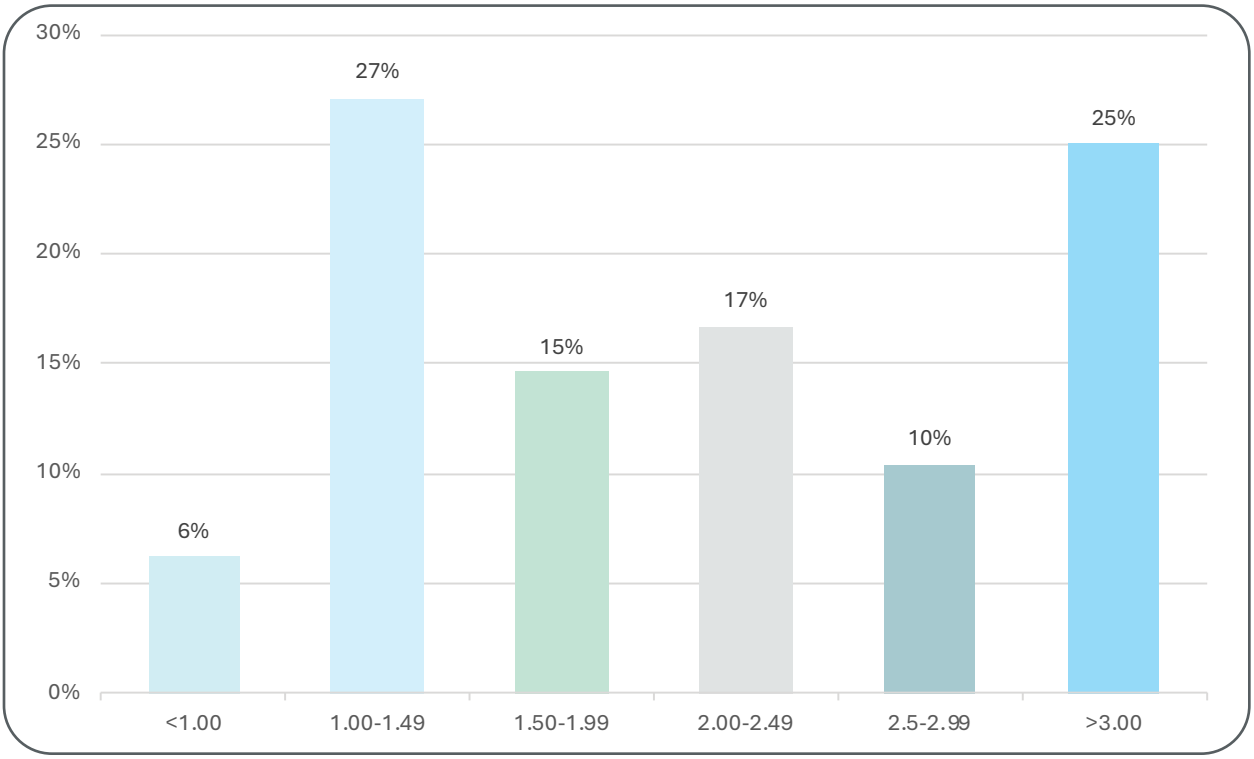


Greater than 1:1



Greater than 2:1

FIGURE 23: What is the ROI for the clinic in the most recent reporting period?



About Alliant Insurance Services

Alliant Insurance Services marks a century of success as the nation's leading specialty broker. We operate through a network of specialized national platforms and local offices to offer our clients a comprehensive portfolio of risk solutions built on innovative thinking and personal service. The business of managing risk is complex, and Alliant meets this complexity head-on with creativity and agility. Alliant has changed the way our clients approach risk management and benefits, giving them complete access to our resources and expertise—regardless of where the resource is located—to capitalize on new opportunities to grow and protect their organizations and their people.

Alliant is recognized as a leading destination for top-tier brokerage talent in the U.S., attracting brokers and specialists across a diverse spectrum of disciplines who are eager to advance their careers. With the advantage of being majority employee-owned, professionals choose Alliant for autonomy, unparalleled resources, and a unique equity ownership opportunity. As a testament to our commitment to excellence, Alliant maintains an impressive 99% producer retention rate and has earned Forbes' prestigious title of one of America's Best Large Employers.

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About NAWHC (www.nawhc.org)

The National Association for Workplace Health Care (formerly the National Association of Worksite Health Centers) was founded in 2012. It serves as the nation's only organization focused on assisting public and private employers, unions, and their vendor and provider partners in getting the greatest return from direct contracting for health care, primarily through onsite, near-site, mobile, and virtual health centers. NAWHC offers education, benchmarking, networking, and the nation's largest clearinghouse of information and resources related to worksite health centers.

For more information on NAWHC, please contact Larry Boress at Larry@NAWHC.org

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