

NAWHC NOW! provides information on organizational and market developments, as well as surveys, programs and resources offered by the National Association for Workplace Health Care (formerly the Nat. Assn. of Worksite Health Centers), as well as from other sources related to onsite, near-site, and virtual worksite clinics and direct contracting. Learn more at www.nawhc.org.

EDUCATION AND NETWORKING ACTIVITIES

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

➤ ***Burnout Among Worksite Health Center Providers***

July 6, 2026 - A FIRST MONDAY ROUNDTABLE

➤ ***Mental Health in Health Centers***

October 5, 2026 - A FIRST MONDAY ROUNDTABLE

➤ ***Driving Engagement and Incentivizing Employees to Utilize Your Health Center***

December 7, 2026 - A FIRST MONDAY ROUNDTABLE

➤ ***2027 Onsite Employee Health & Wellness Center Conference***

January 14-15, 2027, Caesars Palace, Las Vegas, NV

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.

BENCHMARKING

2026 NATIONAL BENEFITS STRATEGIES SURVEY

The MarshMcLennan Agency (MMA) *2026 National Benefits Strategies Survey* of employers found the top priorities for 2026 were employee retention and engagement, proactively managing costs, adopting AI and technology, supporting wellness programs, and emphasizing regulatory compliance.

Only 16% of the survey respondents had over 500 employees, so results may not be applicable to most NAWHC members who typically have 1000+ workers. However, survey data show that while 54% of organizations have already implemented virtual primary care, other advanced options are less common: 9% have on-site or near-site clinics, 6% use a primary care narrow network, and only 4% contract directly with specific primary care providers.

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Most organizations, 87% and 91%, respectively, are not considering a narrow network or direct contracting. The authors of the study state that “These findings highlight a significant opportunity for employers to adopt advanced primary care models that enhance health management, boost employee satisfaction, and reduce costs. As healthcare evolves, embracing these innovations can help organizations meet their workforce’s changing needs.”

HEALTH CARE COSTS FORECASTED TO INCREASE 9% FOR EMPLOYERS IN 2027

A PWC report cites five factors that are contributing to the projected increase of 9% in health benefits costs by 2027:

- AI-enabled tools help providers capture more revenue;
- Inflation and provider consolidation drive up reimbursement rates;
- Pharmacy costs continue to increase;
- Behavioral health utilization keeps growing; and
- The No Surprises Act arbitration process adds a new source of out-of-network reimbursement.

PWC recommends the following actions to counteract these trends:

- Assess high-dollar claims for accuracy, severity drift, and other factors
- Manage utilization in a targeted and not simply restrictive way. Retire low-yield prior authorization requirements, reward high-performing providers and concentrate clinical review on the services where cost and variation are highest.
- Focus on critical pharmacy management. Plans need class-specific governance, disciplined GLP-1 access policies by indication, accelerated biosimilar conversion for real savings and tighter alignment among pharmacy, utilization management and site-of-care programs.
- Use network and reimbursement strategy. Plans should use price transparency along with their own claims experience to identify high-cost outliers, reset value-based contracts around specific cost drivers and direct members to lower-cost sites of care.
- Make care management more disciplined and event-driven. Plans should set explicit trend-deflation targets by lever, hold vendors to outcomes that matter and stop funding programs that cannot demonstrate avoided utilization or measurable saving.

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WORKSITE CENTER OPENINGS

WEST VIRGINIA PROVIDES GRANTS TO HELP EMPLOYERS OPEN WORKSITE CLINICS

West Virginia is making a significant commitment to expanding employer-based health care, announcing a \$2.4 million investment to launch and grow worksite clinics focused on prevention, chronic disease management, occupational health, and workforce participation. It's another example of how employers and policymakers are recognizing the value of bringing health care closer to where people work. Read more about this innovative initiative [at this link](#).

CITY OF ATLANTA OFFERS "CARESTATIONS" TO EMPLOYEES

The City of Atlanta is partnering with OnMed in making its "CareStation, an 8×10 foot "Clinic-in-a-Box", walk-in, self-directed medical unit, available in several locations for easy employee access. Eligible employees can access a wide range of primary and urgent care services with a personalized experience with a licensed clinician through a 55-inch screen. The "Care Station" is equipped with integrated diagnostic tools, including a hi-definition camera, digital stethoscope, pulse oximeter, thermal scanner, and blood pressure cuff, allowing for a comprehensive evaluation. Patients can be treated for most everyday healthcare concerns including colds and viruses, allergic reactions, musculoskeletal complaints and mental health screenings, as well as monitoring and treatment plans to address a range of chronic conditions. Care is offered in 240 languages.

RESOURCES

KEY ELEMENTS OF A SUCCESSFUL CLINIC IMPLEMENTATION PROCESS

Premise Health recommends the following be a focus in the implementation of a new clinic:

- Involve key players to participate in the implementation team: the key decision maker or sponsor, a project manager, and representatives from HR, Facilities, IT, Marketing and Communications.
- Plan an appropriate timeline: On average, buildout for a center takes around 180 business days, followed by four weeks to train and onboard the staff who will be providing care. There have been shortages in metal, glass, and computer chips, as well as construction delays due to

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major material supply line challenges and companies struggling to find workers. The Great Resignation has also been an added challenge in recruiting professional healthcare workers.

- Toward the end of your timeline, coordinate any open houses or ribbon cuttings. Do a “soft” go-live with an abbreviated schedule once your center is ready to see patients. This approach allows your new health center team to make a smooth transition and adapt to the workflows of the health center while learning your organization’s culture.
- Expect the unexpected such as losing a key player on your implementation team, finding access is not as easy as expected to the site, and needing more space as the response to the clinic is more demand than expected
- Develop a communications campaign to market the clinic before, during and after implementation and plan for frequent updates, highlighting testimonials, involvement of senior leaders.
- Communicate and coordinate with other contracted benefit vendors. Spend time educating your clinic teams about the other benefits employees have access to and let your vendor partners know what services will be provided at your center. Annual vendor summits, where all partners come together to understand how they can utilize each other, are a great way to facilitate integration and make healthcare easier for your people.

TEXTING CAN INCREASE CLINIC UTILIZATION AND PATIENT AWARENESS

A report from Bolton described how texting can be used to increase clinic utilization and patient awareness. Key findings from the study:

- Patients may know a health center exists but never register or schedule an appointment. Texting can use mobile technology to convert awareness to action.
- Don’t use generic text for everyone, it needs some personalization
- The SMS message should name a familiar sender and include a link to a secure, personalized feed to the health center for appointments
- Notify managers and supervisors ahead of time that the text messaging campaign will be conducted so they can communicate it to their teams of workers to build heads-up trust and employee willingness to engage with the sender.

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- Use texting at an early stage in the center's development and worker hiring to provide information on services, providers, location, hours, preventive care and appointment reminders, patient education and ongoing news on the services.

NAWHC Resources

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