



Acute Care Clinic Pilot Program

Update: Offering an on-site clinic was first brought to the Board of Trustees during the 2008/2009 fiscal year. Other priorities tabled this project temporarily. Since the original Board discussion regarding this pilot, additional research has been done with clinic vendors. In addition, DHHS has agreed to provide space for the clinic in an area to be determined. Currently, SHP and DHHS are jointly looking at potential locations in Butner, Goldsboro, or Morganton. Butner is the most likely location. The effective date for this pilot has not yet been determined.

SHP will consult with the Board of Trustees again prior to implementation.

Objective: Determine the value of offering on-site employee clinic services by piloting a clinic or clinics in an underserved area of North Carolina. Utilize this clinic to study outcome improvement, reduction in absenteeism, and reduced medical costs in specified populations.

Suggested Advantages:

- A. Deliver more cost-effective care
- B. Engage employees in preventive services
- C. Providers understand Plan's benefits, employees in prevention and wellness
- D. Providers can direct care to most effective and efficient specialists and hospitals
- E. Reduce lost time from work
- F. Low pharmacy costs
- G. Improved Employee Morale

Study: Review various clinic models, from consultants, employer clinics in operation and vendors that offer clinic services. Utilizing the member segmentation study performed by Health Dialog, identify geographic areas that have a high rate of chronic disease. Partner with an agency with employees in that geographic area and offer a subset of those employees the opportunity to utilize clinic services conveniently located on or near their work site.

Benefits: Payment for services would not be tied to current plan designs. Instead, members would pay a nominal copayment to see a provider or to purchase generic drugs associated with the clinic visit. Specific copayments would be determined. (Another approach would be for members to pay a nominal monthly fee that would allow them unlimited access to the clinic.)

Period: Track return on investment over a three-year period.

Long Term: If operational savings from the pilot clinic arrangement suggests a positive return on investment (ROI), determine an approach and roll-out schedule for additional clinics over a 10 year period.