DIRECT PRIMARY CARE Summit 2018

Deliver Exceptional Care. On Your Terms.
Evolving Your DPC Practice

You made it so now what?

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Submit your questions to: aafp3.cnf.io
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Learning Objectives

• Recognize the “growing pains” that will need to be addressed as your practice grows.

• Gain an understanding of common features of direct primary care (DPC) practice expansion.

• Understand the necessary staffing changes, infrastructure requirements, and human resources issue that follow the addition of more DPC health care providers and locations.
Practice Stages

• **Stage 1:** Struggling to make it- below the break even and having to moonlight

• **Stage 2:** Past the break even but still more than 200 patients from your panel goal

• **Stage 3:** Making a reasonable salary and within 100 patients of your panel goal

• **Stage 4:** All providers at current location have full panels and want to expand
Stage 3: Individual physician panel nearly full

- In Stage 3- within 100-150 patients of your panel goal, it is time to consider hiring a second physician if you want to expand

- Employee vs. Partner
  - Employee Reimbursement strategies: 100% productivity, productivity with a minimum, or salary with productivity bonus
  - Partner Reimbursement-shared overhead model with 100% productivity for each, buy in for initial infrastructure equity, employee with a chance to buy in as partner
Stage 4: All providers at current location full

Ways to expand:

1- No external investment-self funded startup with individual capital from group
   - New location can be employees only or have opportunity for group buy in
   - Existing partners determine terms

2- Network Model - each practice still 100% independent and individually owned
   - Recruit employer contracts to a given region as a group
   - Agreements with local specialists, vendors etc, to work with the network to lower overhead costs and expand visibility
   - Shared resources and economies of scale while still allowing complete control of individual DPC practice

3- External investment-capital investors to fund other locations with some loss of equity
   - New location will likely be employees only
   - Investors determine terms and equity stake- can lose control
More free information and resources

www.accesshealthcaredirect.com general information on DPC for providers and patients

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www.DPCMH.org Direct Primary Care Medical Home Association - free membership and resources available from this not for profit. Conference Scholarships for med-students and residents. Free transition toolkit available.

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Questions?

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