



June 2026

## Virtual Advanced Primary Care Request for Information 2026

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# 1.0 Introduction

## 1.1

Purchaser Business Group on Health (PBGH) members include the largest public and private purchasers of health care in the U.S. Collectively, these organizations spend roughly \$350 billion annually buying health care for employees and families.

For the past five years PBGH members have come together to develop consensus standards for advanced primary care. Working with providers, plans and national experts, the group clearly articulated what purchasers expect from the market in a Common Purchasing Agreement, which is endorsed by employers and describes employer priorities, objectives and accountability standards for primary care that can lead to better care at a lower cost.

Because care varies by region and one size does not fit all, in the PBGH Common Purchasing Agreement, employers aimed to be clear and concise but also intentionally flexible to respect regional and other differences in care delivery. However, when PBGH members shared these expectations and principles with their health plan and direct contracting partners, many indicated the need for further specificity about employers' expectations. In response, PBGH and its members have developed a request for information (RFI), which more fully articulates what employers expect and want to pay for.

Since the release of the last RFI (September 2023), there has been significant growth and evolution in alternative modalities for delivering primary care, including virtual-first and hybrid models. Purchasers expect that advanced primary care standards—particularly those related to patient outcomes, experience, equity, and total cost of care—are achieved regardless of care delivery modality.

This version of the RFI is designed to more explicitly evaluate organizations that deliver advanced primary care through virtual-first or digitally enabled models, while maintaining consistent expectations across all respondents. The intent is not to create a separate standard, but to ensure that all models are assessed equitably based on their ability to deliver high-value, comprehensive, and coordinated care.



## 2.0

# Gating Questionnaire

Learn about employer priorities for advanced primary care with a short questionnaire in section 2. Everyone is welcome to complete the entire request for information, as the questionnaire is not meant to exclude anyone. However, the questions in section 2 will help you quickly assess if your organization aligns with PBGH's Common Purchasing Agreement standards. This will give you the information you need to decide if you want to invest more time and resources into the rest of the request for information.

### 2.1

Please confirm your organization's ability and experience implementing alternative payment models\* (APMs) across your care delivery model (including on-site, near-site, virtual, or hybrid models) to move away from fee-for-service. Please indicate which payment models you currently use, have experience with, and would be willing to implement with employers.

	Check all that would apply
Cost-plus	
Per employee per month	
Per plan member per month (i.e. all covered employee + dependents)	
Per attributed member per month (i.e. member selected plan regardless of if they used the clinic)	
Per user per month	
Other, please specify (500 words)	

### 2.2

Which are the top 2 payment models that your organization has the most experience with administering currently for its current contracts and patient population?

	Check two
Cost-plus	
Per employee per month	
Per plan member per month (i.e. all covered employee + dependents)	
Per attributed member per month (i.e. member selected plan regardless of if they used the clinic)	
Per user per month (i.e. attribution occurs after first visit)	
Fee for service	
Other, please specify (500 words)	

\*Alternative payment models are new approaches to pay for medical care, not fee-for-service, that is instead designed to pay for delivering high-quality, cost-effective care. More information about Alternative Payment Models can be found here: <https://hcp-lan.org/workproducts/apm-refresh-whitepaper-final.pdf>

**2.3**

What type of risk-based performance payment structure would your organization be willing to engage in within the next year?

	Check all that would apply
Performance guarantees based on standards set in Common Purchaser Agreement	
Incentive programs based on performance on quality measures	
Shared savings model based on total cost of care (Upside only)	
Two-sided risk sharing (up and down risk) based on total cost of care	
Other, please specify (500 words)	

**2.4**

Which are the top 2 risk-based performance payment structures that your organization has the most experience with or prefer based on current arrangements

	Check 2
Performance guarantees based on quality and access (downside)	
Incentive programs based on performance on quality measures (Upside only)	
Shared savings model based on total cost of care (Upside only)	
Two-sided risk sharing (up and down risk) based on total cost of care	
Other, please specify (500 words)	

2.5

Which of these metrics would your organization be able to provide purchasers (Exactly as defined by NQF with the exception of using CPT codes being used for the denominator. Instead, any outpatient primary care visit should be included in denominator. Please look up NQF definition for details.) and at what interval would you be able to provide it within 1 year of signing a contract?

<b>Breast Cancer Screening (NQF 2372)</b>	<b>Check all that would apply</b>	<b>Childhood Immunization Status (NQF 0038)</b>	<b>Check all that would apply</b>
Monthly		Monthly	
Quarterly		Quarterly	
Annually		Annually	
Unable to provide		Unable to provide	
<b>Colorectal Cancer Screening (NQF 0034)</b>	<b>Check all that would apply</b>	<b>Cervical Cancer Screening (NQF 0032)</b>	<b>Check all that would apply</b>
Monthly		Monthly	
Quarterly		Quarterly	
Annually		Annually	
Unable to provide		Unable to provide	
<b>Controlling High Blood Pressure (NQF 0018)</b>	<b>Check all that would apply</b>	<b>Glycemic Status Assessment (GSD) HbA1c Poor Control (&gt;9%) (NQF 0059)</b>	<b>Check all that would apply</b>
Monthly		Monthly	
Quarterly		Quarterly	
Annually		Annually	
Unable to provide		Unable to provide	
<b>Glycemic Status Assessment (GSD) Diabetes HbA1c (&lt;8%) (NQF 0575)</b>	<b>Check all that would apply</b>	<b>Immunizations for Adolescents (NQF 1407)</b>	<b>Check all that would apply</b>
Monthly		Monthly	
Quarterly		Quarterly	
Annually		Annually	
Unable to provide		Unable to provide	

<b>Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)</b>	<b>Check all that would apply</b>
Monthly	
Quarterly	
Annually	
Unable to provide	
<b>Patient Experience (CG-CAHPS) (NQF 0005)</b>	<b>Check all that would apply</b>
Monthly	
Quarterly	
Annually	
Unable to provide	
<b>Net Promoter Score if unable to provide CG-CAHPS or PCPCM</b>	<b>Check all that would apply</b>
Monthly	
Quarterly	
Annually	
Unable to provide	
<b>Depression Remission or Response for Adolescents and Adults (DRR-E)</b>	<b>Check all that would apply</b>
Monthly	
Quarterly	
Annually	
Unable to provide	
<b>Patient-Centered Primary Care Measure (PCPCM)</b>	<b>Check all that would apply</b>
Monthly	
Quarterly	
Annually	
Unable to provide	

**2.6**

At what level could you stratify the available measures outlined above, assuming there is a minimum denominator of 30 individuals in each stratum prior to reporting?

	<b>Check all that would apply</b>
Total patient population overall	
By employer for all clinics (national)	
By employer population for specified region	
By employer population for an individual clinic location (or State for virtual)	
By employer population for a single attributed clinician	
Stratified by Race, Ethnicity, and Language Preference for the requesting employer population	
Stratified by Sexual Orientation and Gender Identity for the requesting employer population	
Unable to provide at employer level	

**2.7**

Does your organization have behavioral health staff to facilitate integrated behavioral health? (see below of definition if needed).\*\*

- Yes
- No, we refer out for mental health needs
- No, but we have a contracted relationship with specific mental health providers
- Other (details can be provided later in the RFI)

\*\*We are defining integrated behavioral health defined by behavioral health clinicians (including licensed psychiatrist, psychologist, Masters-level counselors and therapists, or Clinical Social Workers) that are thoroughly integrated into established procedures, team, and information systems, with regular touchbases as a primary care team to allow for development of a coordinated care plan between primary care and behavioral health .

**2.8**

How often would you be able to provide reports to employers on average lead time to next third available appointment (measured at least once a week) for the following (check all that would apply).

New Patient Primary Care	Check all that would apply	Established Patient Primary Care	Check all that would apply
Monthly		Monthly	
Quarterly		Quarterly	
Annually		Annually	
Unable to provide		Unable to provide	

  

Acute/Urgent Care	Check all that would apply	Behavioral Health Established Patient	Check all that would apply
Monthly		Monthly	
Quarterly		Quarterly	
Annually		Annually	
Unable to provide		Unable to provide	

  

Behavioral Health New Patient Appointment	Check all that would apply
Monthly	
Quarterly	
Annually	
Unable to provide	

**2.9**

At what level would you be able to provide reports to employers on average weekly lead time to next third available appointment for the following?

<b>New Patient Primary Care</b>	<b>Check all that would apply</b>	<b>Established Patient Primary Care</b>	<b>Check all that would apply</b>
Total book of business		Total book of business	
By MSA (or State for virtual solutions)		By MSA (or State for virtual solutions)	
By clinic location (if applicable)		By clinic location (if applicable)	
Unable to provide regular reports on this		Unable to provide regular reports on this	
<b>Acute/Urgent Care)</b>	<b>Check all that would apply</b>	<b>Behavioral Health Established Patient</b>	<b>Check all that would apply</b>
Total book of business		Total book of business	
By MSA (or State for virtual solutions)		By MSA (or State for virtual solutions)	
By clinic location (if applicable)		By clinic location (if applicable)	
Unable to provide regular reports on this		Unable to provide regular reports on this	
<b>Behavioral Health New Patient Appointment</b>	<b>Check all that would apply</b>		
Total book of business			
By MSA (or State for virtual solutions)			
By clinic location (if applicable)			
Unable to provide regular reports on this			

**2.10**

Do you have a strategy to ensure continuity of care with a primary care clinician for patients who have virtual or telemedicine encounters?

Yes

No

**2.11**

Would you be willing to implement an employer identified third party vendor, or other employer identified strategy to ensure high quality referrals if asked to by the employer?

Yes

No

**2.12**

To be evaluated as a potential Advanced Primary Care solution by employers who are using this data, each organization would need to fill out the rest of the RFI below. Please Indicate if you would like to continue at this time. Of note, if you answer no, then you can submit your current answers and exit out of the RFI. If anything changes in the future, you will be able to return to this question at a future time, change your answer, and be given access to the rest of the questions below:

Yes

No



## 3.0

# General Questionnaire (For Organization as a whole)

This PBGH Virtual Advanced Primary Care RFI builds off the principles outlined in the PBGH Common Purchasing Agreement and is intended to be used by purchasers interested in making advanced primary care available for their employees and families. Unlike traditional RFIs and RFPs, this survey focuses on and assesses provider-level outcomes. The outcome metrics requested in this RFI will help us assess the quality-of-care that is delivered to patients. The sections below outline the essential components of advanced primary care that employers are seeking in the market as defined in the PBGH Common Purchasing Agreement. They will also enable you to assess how your organization's capabilities align with each of those components. Let us know which markets you are currently operating in and where you want to connect with interested employers. This will enable us to gather market-specific information to determine regional alignment with the Common Purchasing Agreement.

### 3.1 Organizational Composition, Demographics and Network

Purchasers expect provider organizations to be comprehensive in their approach to managing patient health outcomes, psychosocial needs and the total cost of care. Purchasers want to support payment strategies that flexibly meet patient needs and maintain affordable access for their employees and families by promoting alternative payment models and population-based payments that enable high-value care. Purchasers also desire that the portion of payment directed to primary care is adequate to support integrated delivery of care, including behavioral health support, care coordination and health equity. These questions are to get a general sense of the organization. Please note that activities must be in place by the date of submission or clearly noted that it is a future activity that will be implemented on specific date noted in your response.

#### 3.1.1

Please download, complete and re-attach PBGH Virtual APC RFI Participant Agreement FINAL.pdf as Attachment 1 with the signature of CEO and/or responsible person for completion of this questionnaire.

Completed and attached     Not provided

#### 3.1.2 Organization Information

Name of Organization

Tax ID

Date Organization Founded

Website Address

### 3.1.3 Content and Organization Info

Complete the table below for the individuals specified and lead contacts. Please include in this list the CEO and Chief Medical Officer.

	Name	Title	Number of years in this role	Email	Telephone
Main Contact					
Secondary Contact					
CEO					
Chief Medical Officer					

### 3.1.4

If you would like to include physical clinic locations as part of your solution, please download and complete PBGH Virtual APC RFI Attachment 2.xlsx to share a list of physical clinic addresses that you would like to be included. The list of clinics should also identify which services are provided at each location, including when applicable, ancillary services (mental health, nutrition, pharmacist, and/or physical wellness such as physical therapy/chiropractor services). For virtual solutions, there will be a separate question below to list which States are served by a virtual solution. For each entry, please include:

- National Provider Identifier (NPI)
- Practice name
- Provides Primary Care, Ancillary Services (as defined above) or both
- Sees pediatrics, adults, or both
- For pediatrics, does that include well child visits, urgent care visits, behavioral health, or other ancillary services (include all that apply, leave blank if no pediatrics are seen)
- Physician, Advanced Practice Practitioner, or Both (or neither if for certain ancillary services only)
- Clinic Address
- Clinic City
- Clinic State
- Clinic Zip Code
- Telehealth availability (Y/N)
- On-site (or coordinated virtual) Behavioral health availability (Y/N)
- On-site (or coordinated virtual) Nutritionist (Y/N)
- On-site (or coordinated virtual) Pharmacist (Y/N)
- On-site (or coordinated virtual) Physical Wellness (i.e. Physical therapy and/or chiropractor) (Y/N)
- Approximately how many more patients can be attributed to this clinic with the current staffing model (for primary care only)?

- Attached
- We do not have physical clinics as part of the solution being offered
- Other, Explain (500 word limit)

### 3.1.5 Accreditation

Please review the following third-party certifications/accreditations and select those that apply and are still current at time of submission of response.

PBGH does not seek to duplicate requirements of other certification programs and will honor the designations below to the extent that they reflect member priorities. We will also honor regional certification programs that include similar performance metrics.

	Does your organization have any clinics that meet this accreditation?
AAHC (American Association for Ambulatory Health Care) Accreditation for Primary Care	<input type="radio"/> Yes <input type="radio"/> No
AAHC Medical Home On-Site Certification	<input type="radio"/> Yes <input type="radio"/> No
AAHC Medical Home Accreditation	<input type="radio"/> Yes <input type="radio"/> No
NCQA PCMH Level 1	<input type="radio"/> Yes <input type="radio"/> No
NCQA PCMH Level 2	<input type="radio"/> Yes <input type="radio"/> No
NCQA PCMH Level 3	<input type="radio"/> Yes <input type="radio"/> No
NCQA ACO Level 1	<input type="radio"/> Yes <input type="radio"/> No
NCQA ACO Level 2	<input type="radio"/> Yes <input type="radio"/> No
NCQA ACO Level 3	<input type="radio"/> Yes <input type="radio"/> No
NCQA Virtual Care Accreditation	<input type="radio"/> Yes <input type="radio"/> No
URAC Telehealth Accreditation	<input type="radio"/> Yes <input type="radio"/> No

Other (describe, 500 word limit)

### 3.1.6

Please provide an overview of the organization responding to this assessment — e.g., number of primary care practices within organization, other groups, hospitals, geography, if organization is a direct primary care entity, etc.

Overview of your organization (500 word limit)

Ownership of organization, including investor relationships (500 word limit)

What year did you begin offering virtual APC services (5 word limit)

Are you currently working with employer clients? If so, please include # of employer clients total and the average # of employees for current clients.

- Yes     No    **Yes, please include # of employer clients and average number of total employees of your current clients**

Would you be willing to share your organization's financial statements with an employer at a future time (under agreed upon NDA) during the evaluation process?

- Yes     No

What is your maximum general liability insurance coverage?

\$  Dollar Amount

- Will not disclose this information  
 Would be willing to share at a future time (under agreed upon NDA) during evaluation process

Please list health plans or carriers that you already have existing contracts with to be considered an in-network provider

### 3.1.7

In which states are your primary care clinicians licensed? (Check all that apply)

- Alabama    Alaska    Arizona    Arkansas    California    Colorado    Connecticut    Delaware    District of Columbia  
 Florida    Georgia    Hawaii    Idaho    Illinois    Indiana    Iowa    Kansas    Kentucky    Louisiana    Maine  
 Maryland    Massachusetts    Michigan    Minnesota    Mississippi    Missouri    Montana    Nebraska    Nevada  
 New Hampshire    New Jersey    New Mexico    New York    North Carolina    North Dakota    Ohio    Oklahoma  
 Oregon    Pennsylvania    Rhode Island    South Carolina    South Dakota    Tennessee    Texas    Utah    Vermont  
 Virginia    Washington    West Virginia    Wisconsin    Wyoming

### 3.1.8

Based on your answers to question 3.1.7, please provide the following information related to your clinicians and the services they provide:

Alabama		South CDC Region	
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
Which services are available for adult patients?		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Alaska</b>			West CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Arizona</b>			West CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Arkansas</b>			South CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>California</b>			West CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Colorado</b>			West CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Connecticut</b>			Northeast CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Delaware

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## District of Columbia

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Florida

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Georgia

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Hawaii

West CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Idaho

West CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Illinois

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Indiana

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Iowa

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Kansas</b>		<b>Midwest</b> CDC Region	
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Kentucky</b>		<b>South</b> CDC Region	
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Louisiana</b>		<b>South</b> CDC Region	
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Maine

Northeast CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Maryland

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Massachusetts

Northeast CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Michigan

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Minnesota

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Mississippi

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Missouri

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Montana

West CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Nebraska

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Nevada</b>			West CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>New Hampshire</b>			Northeast CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>New Jersey</b>			Northeast CDC Region
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## New Mexico

West CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## New York

Northeast CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## North Carolina

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## North Dakota

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Ohio

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Oklahoma

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Oregon

West CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Pennsylvania

Northeast CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Rhode Island

Northeast CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## South Carolina

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## South Dakota

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Tennessee

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Texas</b>		<b>South</b> CDC Region	
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Utah</b>		<b>West</b> CDC Region	
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

<b>Vermont</b>		<b>Northeast</b> CDC Region	
What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Virginia

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Washington

West CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## West Virginia

South CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Wisconsin

Midwest CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

## Wyoming

West CDC Region

What type of clinicians are licensed to provide primary care in this State?	Check all that apply	If pediatrics is included, which services are available?	Check all that apply
Physician (MD/DO)		Well Child visits	
Advanced Practice Practitioner (NP/PA)		Urgent Care	
Do not provide primary care in this State		Behavioral Health	
<b>Which services are available for adult patients?</b>		Nutritionist	
Urgent Care		Pharmacist	
Physicals/Annual Wellness Exams		Physical Wellness (such as Physical Therapy and/or Chiropractor)	
Behavioral Health		Pediatrics is not included	
Nutritionist			
Pharmacist			
Physical Wellness (such as Physical Therapy and/or Chiropractor)			

### 3.1.9 Other Markets

For areas that you are not covering currently, do you have a roadmap in the next 2 years to expand into those areas? If so, please describe.

- Yes, please describe the 2 year roadmap to expand coverage to new areas (500 words)
  No plans to expand
  Other (500 words)

### 3.1.10

Please complete the following information regarding your services and capabilities.

Feature	Answer
<p>Are any of your clinical services open to the public through a direct to consumer model as well (as opposed to being onsite, near-site, or through health plan contracts only)? (No/ Yes, please explain the pricing model for direct to consumer patients, 100 words)</p>	
<p>On-demand access virtually 24 hours a day, 7 days a week (Yes/No)</p>	
<p>Able to dispense medications on-site (if applicable) (Yes/No/Virtual practice only)</p>	
<p>Which ways can patient access the primary care team? (check all that apply)</p> <p> <input type="radio"/> In-person             <input type="radio"/> Phone             <input type="radio"/> Virtual             <input type="radio"/> SMS/Text Message  <input type="radio"/> Asynchronous Patient Portal Messaging (web or phone app)         </p>	
<p>EHR system (provide system name, 500 word limit)</p>	
<p>Are all patients able to interact with clinicians in their preferred language (either through members of the care team or a translator)? (Yes/No/Do not track)</p>	
<p>Is diversity training given to all staff within one year of employment? (Yes/No)</p>	
<p>Is motivational interviewing training given to all clinical staff within one year of employment? (Yes/No)</p>	
<p>On-site lab draw (if providing virtual care in areas where you organization does not have a physical clinic to perform these services, please describe how patients obtain these services after a virtual encounter)</p> <p> <input type="radio"/> Yes      <input type="radio"/> Virtual practice only, please describe patient flow to obtain this service when needed (500 words)  <input type="radio"/> No         <input type="radio"/> Patients in areas where there is a physical clinic can obtain this service in the clinic, for those who cannot access the clinic, please describe the patient flow to obtain this service when needed (500 words)         </p>	
<p>Vaccines/immunizations on-site (if providing virtual care in areas where you organization does not have a physical clinic to perform these services, please describe how patients obtain these services after a virtual encounter)</p> <p> <input type="radio"/> Yes      <input type="radio"/> Virtual practice only, please describe patient flow to obtain this service when needed (500 words)  <input type="radio"/> No         <input type="radio"/> Patients in areas where there is a physical clinic can obtain this service in the clinic, for those who cannot access the clinic, please describe the patient flow to obtain this service when needed (500 words)         </p>	
<p>Cervical Cancer Screening on-site (if providing virtual care in areas where you organization does not have a physical clinic to perform these services, please describe how patients obtain these services after a virtual encounter)</p> <p> <input type="radio"/> Yes      <input type="radio"/> Virtual practice only, please describe patient flow to obtain this service when needed (500 words)  <input type="radio"/> No         <input type="radio"/> Patients in areas where there is a physical clinic can obtain this service in the clinic, for those who cannot access the clinic, please describe the patient flow to obtain this service when needed (500 words)         </p>	

Feature		Answer
APC Structure includes:	Physical Wellness team (Physical therapy or Chiropractor) as part of the team (Yes/No)	
	Nutritionist as part of the team (Yes/No)	
	Social Worker or other dedicated staff to address needs identified in social determinants of health screening as part of the team (Yes/No)	
	Integrated Pharmacist as part of team (Yes/No)	
	Other (please describe, 500 word limit)	
Financial:	Can send claims (Yes/No)	
	Can support a capitated approach (Yes/No)	
	Membership fee applies (Yes/No – if yes, indicate average amount per month)	
	Have you previously integrated with health plan carriers to process claims and check deductibles for patients with High Deductible Health Plans?(Yes/No)	

**3.1.11 Expertise**

Briefly describe what your clinics are known for and how you differentiate from your competitors, including mission statement and guiding principles.

**3.1.12**

Do you currently have access to total cost of care data for your patients? If no, what are your plans to gain access to manage total cost of care? (If none, leave blank, otherwise please describe the plan including the timeline of when it will be implemented).

Yes  No **If No, Explain (500 words)**

**3.1.13**

Do you currently have access to emergency room visit data for your patients? If no, what are you plans to gain access to help decrease unnecessary Emergency Room visit rates? (If none, leave blank, otherwise please describe the plan including the timeline of when it will be implemented).

Yes  No **If No, Explain (500 words)**

**3.1.14**

Do you currently have access to in-patient/hospital utilization for your patients? If no, what are you plans to gain access to decrease avoidable in-patient hospital stays? (If none, leave blank, otherwise please describe the plan including the timeline of when it will be implemented).

Yes  No **If No, Explain (500 words)**

**3.2 Whole-Person Health and Well-Being**

Patients receive care and services with a view towards whole person health and well-being. Screening and care for behavioral and social needs is integrated into their primary care visit. The provider offers support to address lifestyle issues or stressors that impact overall well-being and can coordinate with the resources offered through the employer and/or health plan. Care teams identify anticipated care needs, offer additional support and identify community resources for those patients at high or rising risk.

**3.2.1**

Do you integrate with health plans or employers' solutions for well-being or behavioral health? If so, what is that process of integration?

Yes  No

If Yes, explain the process of integration (500 words)

**3.2.2**

What are your strategies and approaches for re-engaging with individuals who have dis-engaged with their well-being goals? (500 words)

**3.2.3**

Please indicate if you monitor, at a clinician level, compliance with these USPTF (United States Preventive Services Task Force)<sup>†</sup> A and B recommended preventive services:

Topic	Description	Yes	No	We do not provide care for this patient population
Abdominal Aortic Aneurysm: Screening: men aged 65 to 75 years who have ever smoked	The USPSTF recommends 1-time screening for abdominal aortic aneurysm (AAA) with ultrasonography in men aged 65 to 75 years who have ever smoked.			
Anxiety Disorders in Adults: Screening: adults 64 years or younger, including pregnant and postpartum persons	The USPSTF recommends screening for anxiety disorders in adults, including pregnant and postpartum persons.			
Anxiety in Children and Adolescents: Screening: children and adolescents aged 8 to 18 years	The USPSTF recommends screening for anxiety in children and adolescents aged 8 to 18 years.			
Aspirin Use to Prevent Preeclampsia and Related Morbidity and Mortality: Preventive Medication: pregnant persons at high risk for preeclampsia	The USPSTF recommends the use of low-dose aspirin (81 mg/day) as preventive medication after 12 weeks of gestation in persons who are at high risk for preeclampsia. See the Practice Considerations section for information on high risk and aspirin dose.			
Asymptomatic Bacteriuria in Adults: Screening: pregnant persons	The USPSTF recommends screening for asymptomatic bacteriuria using urine culture in pregnant persons.			
BRCA-Related Cancer: Risk Assessment, Genetic Counseling, and Genetic Testing: women with a personal or family history of breast, ovarian, tubal, or peritoneal cancer or an ancestry associated with brca1/2 gene mutation	The USPSTF recommends that primary care clinicians assess women with a personal or family history of breast, ovarian, tubal, or peritoneal cancer or who have an ancestry associated with breast cancer susceptibility 1 and 2 (BRCA1/2) gene mutations with an appropriate brief familial risk assessment tool. Women with a positive result on the risk assessment tool should receive genetic counseling and, if indicated after counseling, genetic testing.			

<sup>†</sup><https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-a-and-b-recommendations>

Topic	Description	Yes	No	We do not provide care for this patient population
Breast Cancer: Medication Use to Reduce Risk: women at increased risk for breast cancer aged 35 years or older	The USPSTF recommends that clinicians offer to prescribe risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors, to women who are at increased risk for breast cancer and at low risk for adverse medication effects.			
Breast Cancer: Screening: women aged 40 to 74 years	The USPSTF recommends biennial screening mammography for women aged 40 to 74 years.			
Breastfeeding: Primary Care Behavioral Counseling Interventions: pregnant and postpartum women	The USPSTF recommends providing interventions or referrals, during pregnancy and after birth, to support breastfeeding.			
Cervical Cancer: Screening: women aged 21 to 65 years	The USPSTF recommends screening for cervical cancer every 3 years with cervical cytology alone in women aged 21 to 29 years. For women aged 30 to 65 years, the USPSTF recommends screening every 3 years with cervical cytology alone, every 5 years with high-risk human papillomavirus (hrHPV) testing alone, or every 5 years with hrHPV testing in combination with cytology (cotesting).			
Chlamydia and Gonorrhea: Screening: sexually active women, including pregnant persons	The USPSTF recommends screening for gonorrhea in all sexually active women 24 years or younger and in women 25 years or older who are at increased risk for infection.			
Colorectal Cancer: Screening: adults aged 45 to 49 years	The USPSTF recommends screening for colorectal cancer in adults aged 45 to 49 years.			
Colorectal Cancer: Screening: adults aged 50 to 75 years	The USPSTF recommends screening for colorectal cancer in all adults aged 50 to 75 years.			
Depression and Suicide Risk in Adults: Screening: adults, including pregnant and postpartum persons, and older adults (65 years or older)	The USPSTF recommends screening for depression in the adult population, including pregnant and postpartum persons, as well as older adults..			
Depression and Suicide Risk in Children and Adolescents: Screening: adolescents aged 12 to 18 years	The USPSTF recommends screening for major depressive disorder (MDD) in adolescents aged 12 to 18 years.			
Falls Prevention in Community-Dwelling Older Adults: Interventions: adults 65 years or older	The USPSTF recommends exercise interventions to prevent falls in community-dwelling adults 65 years or older who are at increased risk for falls.			
Folic Acid for the Prevention of Neural Tube Defects: Preventive Medication: women who are planning or capable of pregnancy	The USPSTF recommends that all women who are planning or capable of pregnancy take a daily supplement containing 0.4 to 0.8 mg (400 to 800 mcg) of folic acid.			
Gestational Diabetes: Screening: asymptomatic pregnant persons at 24 weeks of gestation or after	The USPSTF recommends screening for gestational diabetes in asymptomatic pregnant persons at 24 weeks of gestation or after.			

Topic	Description	Yes	No	We do not provide care for this patient population
Healthy Diet and Physical Activity for Cardiovascular Disease Prevention in Adults With Cardiovascular Risk Factors: Behavioral Counseling Interventions: adults with cardiovascular disease risk factors	The USPSTF recommends offering or referring adults with cardiovascular disease risk factors to behavioral counseling interventions to promote a healthy diet and physical activity.			
Healthy Weight and Weight Gain In Pregnancy: Behavioral Counseling Interventions: pregnant persons	The USPSTF recommends that clinicians offer pregnant persons effective behavioral counseling interventions aimed at promoting healthy weight gain and preventing excess gestational weight gain in pregnancy.			
Hepatitis B Virus Infection in Adolescents and Adults: Screening: adolescents and adults at increased risk for infection	The USPSTF recommends screening for hepatitis B virus (HBV) infection in adolescents and adults at increased risk for infection.			
Hepatitis B Virus Infection in Pregnant Women: Screening: pregnant women	The USPSTF recommends screening for hepatitis B virus (HBV) infection in pregnant women at their first prenatal visit			
Hepatitis C Virus Infection in Adolescents and Adults: Screening: adults aged 18 to 79 years	The USPSTF recommends screening for hepatitis C virus (HCV) infection in adults aged 18 to 79 years.			
Human Immunodeficiency Virus (HIV) Infection: Screening: adolescents and adults aged 15 to 65 years	The USPSTF recommends that clinicians screen for HIV infection in adolescents and adults aged 15 to 65 years. Younger adolescents and older adults who are at increased risk of infection should also be screened. See the Clinical Considerations section for more information about assessment of risk, screening intervals, and rescreening in pregnancy.			
Human Immunodeficiency Virus (HIV) Infection: Screening: pregnant persons	The USPSTF recommends that clinicians screen for HIV infection in all pregnant persons, including those who present in labor or at delivery whose HIV status is unknown.			
Hypertension in Adults: Screening: adults 18 years or older without known hypertension	The USPSTF recommends screening for hypertension in adults 18 years or older with office blood pressure measurement (OBPM). The USPSTF recommends obtaining blood pressure measurements outside of the clinical setting for diagnostic confirmation before starting treatment.			
Hypertensive Disorders of Pregnancy: Screening: asymptomatic pregnant persons	The USPSTF recommends screening for hypertensive disorders in pregnant persons with blood pressure measurements throughout pregnancy.			
Intimate Partner Violence and Caregiver Abuse of Older or Vulnerable Adults: Screening: women of reproductive age, including pregnant and postpartum women	The USPSTF recommends that clinicians screen for intimate partner violence (IPV) in women of reproductive age, including those who are pregnant and postpartum.			

Topic	Description	Yes	No	We do not provide care for this patient population
Latent Tuberculosis Infection in Adults: Screening: asymptomatic adults at increased risk of latent tuberculosis infection (ltbi)	The USPSTF recommends screening for LTBI in populations at increased risk. See the “Assessment of Risk” section for additional information on adults at increased risk.			
Lung Cancer: Screening: adults aged 50 to 80 years who have a 20 pack-year smoking history and currently smoke or have quit within the past 15 years	The USPSTF recommends annual screening for lung cancer with low-dose computed tomography (LDCT) in adults aged 50 to 80 years who have a 20 pack-year smoking history and currently smoke or have quit within the past 15 years. Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery.			
Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum: Preventive Medication: newborns	The USPSTF recommends prophylactic ocular topical medication for all newborns to prevent gonococcal ophthalmia neonatorum.			
Osteoporosis to Prevent Fractures: Screening: postmenopausal women younger than 65 years with 1 or more risk factors for osteoporosis	The USPSTF recommends screening for osteoporosis to prevent osteoporotic fractures in postmenopausal women younger than 65 years who are at increased risk for an osteoporotic fracture as estimated by clinical risk assessment.			
Osteoporosis to Prevent Fractures: Screening: women 65 years and older	The USPSTF recommends screening for osteoporosis to prevent osteoporotic fractures in women 65 years and older.			
Perinatal Depression: Preventive Interventions: pregnant and postpartum persons	The USPSTF recommends that clinicians provide or refer pregnant and postpartum persons who are at increased risk of perinatal depression to counseling interventions.			
Prediabetes and Type 2 Diabetes: Screening: asymptomatic adults aged 35 to 70 years who have overweight or obesity	The USPSTF recommends screening for prediabetes and type 2 diabetes in adults aged 35 to 70 years who have overweight or obesity. Clinicians should offer or refer patients with prediabetes to effective preventive interventions.			
Prevention of Acquisition of HIV: Preexposure Prophylaxis: adolescents and adults at increased risk of HIV	The USPSTF recommends that clinicians prescribe preexposure prophylaxis using effective antiretroviral therapy to persons who are at increased risk of acquiring HIV.			
Prevention of Dental Caries in Children Younger Than 5 Years: Screening and Interventions: children younger than 5 years	The USPSTF recommends that primary care clinicians apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption.			
Prevention of Dental Caries in Children Younger Than 5 Years: Screening and Interventions: children younger than 5 years	The USPSTF recommends that primary care clinicians prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is deficient in fluoride.			

Topic	Description	Yes	No	We do not provide care for this patient population
Rh(D) Incompatibility: Screening: pregnant women, during the first pregnancy-related care visit	The USPSTF strongly recommends Rh(D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care.			
Rh(D) Incompatibility: Screening: unsensitized rh(d)-negative pregnant women	The USPSTF recommends repeated Rh(D) antibody testing for all unsensitized Rh(D)-negative women at 24 to 28 weeks' gestation, unless the biological father is known to be Rh(D)-negative.			
Sexually Transmitted Infections: Behavioral Counseling: sexually active adolescents and adults at increased risk	The USPSTF recommends behavioral counseling for all sexually active adolescents and for adults who are at increased risk for sexually transmitted infections (STIs).			
Skin Cancer Prevention: Behavioral Counseling: young adults, adolescents, children, and parents of young children	The USPSTF recommends counseling young adults, adolescents, children, and parents of young children about minimizing exposure to ultraviolet (UV) radiation for persons aged 6 months to 24 years with fair skin types to reduce their risk of skin cancer.			
Statin Use for the Primary Prevention of Cardiovascular Disease in Adults: Preventive Medication: adults aged 40 to 75 years who have 1 or more cardiovascular risk factors and an estimated 10-year cardiovascular disease (cvd) risk of 10% or greater	The USPSTF recommends that clinicians prescribe a statin for the primary prevention of CVD for adults aged 40 to 75 years who have 1 or more CVD risk factors (i.e. dyslipidemia, diabetes, hypertension, or smoking) and an estimated 10-year risk of a cardiovascular event of 10% or greater.			
Syphilis Infection During Pregnancy: Screening: asymptomatic pregnant women	The USPSTF recommends early, universal screening for syphilis infection during pregnancy; if an individual is not screened early in pregnancy, the USPSTF recommends screening at the first available opportunity.			
Syphilis Infection in Nonpregnant Adolescents and Adults: Screening: asymptomatic, nonpregnant adolescents and adults who are at increased risk for syphilis infection	The USPSTF recommends screening for syphilis infection in persons who are at increased risk for infection.			
Tobacco Smoking Cessation in Adults, Including Pregnant Persons: Interventions: nonpregnant adults	The USPSTF recommends that clinicians ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and US Food and Drug Administration (FDA)--approved pharmacotherapy for cessation to nonpregnant adults who use tobacco.			
Tobacco Smoking Cessation in Adults, Including Pregnant Persons: Interventions: pregnant persons	The USPSTF recommends that clinicians ask all pregnant persons about tobacco use, advise them to stop using tobacco, and provide behavioral interventions for cessation to pregnant persons who use tobacco.			

Topic	Description	Yes	No	We do not provide care for this patient population
Tobacco Use in Children and Adolescents: Primary Care Interventions: school-aged children and adolescents who have not started to use tobacco	The USPSTF recommends that primary care clinicians provide interventions, including education or brief counseling, to prevent initiation of tobacco use among school-aged children and adolescents.			
Unhealthy Alcohol Use in Adolescents and Adults: Screening and Behavioral Counseling Interventions: adults 18 years or older, including pregnant women	The USPSTF recommends screening for unhealthy alcohol use in primary care settings in adults 18 years or older, including pregnant women, and providing persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce unhealthy alcohol use.			
Unhealthy Drug Use: Screening: adults age 18 years or older	The USPSTF recommends screening by asking questions about unhealthy drug use in adults age 18 years or older. Screening should be implemented when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred. (Screening refers to asking questions about unhealthy drug use, not testing biological specimens.)			
Vision in Children Ages 6 Months to 5 Years: Screening: children aged 3 to 5 years	The USPSTF recommends vision screening at least once in all children aged 3 to 5 years to detect amblyopia or its risk factors.			
Weight Loss to Prevent Obesity-Related Morbidity and Mortality in Adults: Behavioral Interventions: adults	The USPSTF recommends that clinicians offer or refer adults with a body mass index (BMI) of 30 or higher (calculated as weight in kilograms divided by height in meters squared) to intensive, multicomponent behavioral interventions.			

**3.2.4**

How frequently is performance information and benchmarking on preventive care measures provided to primary care providers for their own patient panel?

- Annually**
- Quarterly**
- Monthly**
- On Demand**

**Other, describe (500 word limit)**

### 3.3 Coordinated Care, Risk Stratification and Care Management

Patients know and receive care from a primary care provider who is supported by members of an interdisciplinary care team, such as a medical assistant, nurse, pharmacist, psychiatrist, health coach or community health worker. Under the direction of the primary care provider, care team members communicate and coordinate across the team to address patients' needs and provide care appropriate to their training and expertise.

#### 3.3.1

Do you risk stratify your patients for tiered outreach approaches? If yes, please describe your methodology to identify high risk patients and the differential outreach strategies taken based on risk.

Yes  No **If Yes, Explain (500 word limit)**

#### 3.3.2

Please describe any current or planned implementation of a Collaborative Care Model of behavioral health and/or a Primary Care Behavioral Health Model. Please include processes, and also explain any underlying technological solutions, used for quality assurance, triage and referral. Please describe your use of measurement-based care, evidence-based care and behavioral health provider network structure (including if providers are directly employed or contracted). (500 word limit)

#### 3.3.3

Please describe any current or planned implementation of Physical Wellness solutions (such as physical therapy, exercise, chiropractor, massage therapy, etc.) as an integrated part of the primary care team to help manage both acute symptoms or chronic disease (obesity, diabetes, congestive heart failure, etc.). Please include processes, and also explain any underlying technological solutions, used for quality assurance, triage and referral. Please describe your use of measurement-based care, evidence-based care and relevant health provider network structure (including if providers are directly employed or contracted). (500 word limit)

### 3.4 Employee/Patient Engagement and Activation

Care is designed around the needs and priorities of patients and families, encourages patient and family participation in improvement efforts and incorporates feedback. Patients share preferences and goals of treatment, engage in shared decision making with their care team and feel their choices are respected, integrated into care plans and takes into account community-based resources.

#### 3.4.1

Do you engage with patients to achieve health related behavior change between clinician visits, if yes, please describe how you engage with patients to achieve lifestyle modification between clinician visits, including any tools used, and if there are specific disease, demographic, healthcare utilization, or lifestyle focuses for which these interventions are specifically utilized. If you track metrics on average touch points between licensed clinician visits (either medical or ancillary services), please include them.

Yes  No **If Yes, Explain (500 words)**

### 3.5 Health Outcomes

Purchasers desire high performance clinical outcomes and a seamless patient experience. The [Advanced Primary Care Measure Set](#) is designed to focus on a parsimonious set of metrics where high performance reflects a whole-person health strategy, patient access, effective patient engagement and deployment of care coordination resources, use of a high performing referral network and supportive investments in health information technology. Given health care's regional specificity, questions specific to the Advanced Primary Care Measure Set will be asked by market in the market specific sections below. These questions represent general organizational processes to enable or demonstrate positive health outcomes.

#### 3.5.1 Practice Performance and Measurement

##### 3.5.1.1

Please include a copy of your organization's roadmap, if it exists, for overall performance improvement and managing total cost of care (TCOC) and trend as Attachment 3.

- Attached  
 Not Provided

##### 3.5.1.2

Do you have samples of annual QI reports, dashboards or other relevant documents? If yes, please combine samples your organization would like to share and include as Attachment 4.

- Yes, Attached  
 No

#### 3.5.2 Clinical Outcomes and Patient Experience

##### 3.5.2.1

Do you have data on your observed impact (with some numbers if possible) on multiple sources of downstream costs (e.g., observed reduction/increase in hospitalizations, behavioral health and other specialty cost, ER visits, drugs)? If yes, please include any helpful reports and studies if available.

- Yes  No **If Yes, Explain (500 words)**

##### 3.5.2.2

Do you include metrics of impact on downstream costs in your employer contracting arrangements? If so, please detail which metrics are included.

- Yes  No **If Yes, Explain (500 words)**

##### 3.5.2.3

Do you have specific actions that are taken with patients with high rates of avoidable specialty care utilization or who have frequent and/or avoidable ED visits? If so, please describe how this subgroup of patients is identified, and the targeted interventions taken.

- Yes  No **If Yes, Explain (500 words)**

##### 3.5.2.4

Do you have specific actions that are taken with providers with high rates of specialty referral and/or outlier costs? If so, please describe how this subgroup of patients is identified, and the targeted interventions taken.

- Yes  No **If Yes, Explain (500 words)**

**3.5.2.5**

If you have access to Emergency Room, Urgent Care, and/or In-Patient/Hospitalization data, is your follow-up for visits related to mental health different than for other visits? If so, explain.

Yes  No **If Yes, Explain (500 words)**

Do not currently have access to this data

**3.6 Health Equity**

Patients receive and experience care services and health outcomes that do not vary in quality or access due to personal characteristics, such as gender, race, ethnicity, language, socioeconomic status or sexual orientation/gender identity. Primary care teams proactively monitor their care to identify, eliminate and prevent care and health disparities and ensure they practice care with cultural humility.

**3.6.1**

Describe your organization’s approach to improving health equity and reduction of care disparities. (500 word limit)

**3.6.2**

Complete the tables below with respect to how information is captured for your patients.

	Percent	Do not track this number
For what percentage of your patients is race data documented in the medical record? (Unknown should be considered “not documented”)		
For what percent of your patients is ethnicity documented in the medical record? (Unknown should be considered “not documented”)		
For what percent of your patients is language documented in the medical record? (Unknown should be considered “not documented”)		
For what percent of your patients is sexual orientation documented in the medical record? (Unknown should be considered “not documented”)		
For what percent of your patients is gender identity documented in the medical record? (Unknown should be considered “not documented”)		

**3.6.3**

Report the rates below for specific categories of needs identified (NCQA Social Need Screening and Intervention (SNS-E) based on the previous calendar year (January 1 to December 31) for the year prior to the year of response submission).

	Percent	Do not track this number
What percentage of patients (of those seen) are screened for social determinants of health?		
Food screening: The percentage of members who were screened for unmet food needs		
Food intervention: The percentage of members who received a corresponding intervention within 1 month of screening positive for unmet food needs		
Housing screening: The percentage of members who were screened for unmet housing needs		
Housing intervention: The percentage of members who received a corresponding intervention within 1 month of screening positive for unmet housing needs		
Transportation screening: The percentage of members who were screened for unmet transportation needs		
Transportation intervention: The percentage of members who received a corresponding intervention within 1 month of screening positive for unmet transportation needs		

**3.6.4**

What is your organization’s strategy to ensure culturally competent and appropriate care for patients for diverse patient populations in terms of race, ethnicity, gender, sexual orientation and languages spoken? (500 word limit)

**3.6.5**

What are your hiring strategies that enable your practice to culturally represent the patient population which you serve? (500 word limit)

**3.6.6**

In order to help employees identify providers with whom they would like to establish care, would you be willing to provide employers, at the point of contract, a list of providers and the following characteristics that employers could share with their employees:

Provider Demographic	Yes	Do not have access to this information	Will not disclose this information	Already available on our website or patient portal
Gender				
Race				
Ethnicity				
Languages Spoken				
LGBTQ+ Health Focus/Specialization				
Ability to accept new patients				

**3.6.7**

Are there any additional equity improvement efforts that have been implemented in the last 2 years to specifically improve equitable care, experiences, and outcomes?

Yes  No **If Yes, Explain (500 words)**

**3.6.8**

Do you currently take actions if a patient is screened positive for a social determinant need?

Yes  No **If Yes, Explain (500 words)**

**3.6.9**

Do you specifically refer to, or have within your practice, doulas or midwifery care? If so, please describe the process that patients access these services.

Yes  No **If Yes, Explain (500 words)**  
 Do not provide maternal health care

**3.6.10**

Do you have other targeted efforts (besides use of doulas or midwifery care) to support maternal health? If so, please describe those efforts.

Yes  No **If Yes, Explain (500 words)**  
 Do not provide maternal health care

### 3.7 Access - After Hours Access, Virtual Care Options, and Continuity with Primary Care Clinician

Patients get the right care, at the right time with a care team that is familiar with their needs. Accessible care includes same-day care for urgent needs through in-person and virtual services with their care team, care provider availability after appointment hours, secure messaging with the team and an online medical record.

#### 3.7.1

How are patients assigned to a primary care clinician in your organization? (500 words)

#### 3.7.2

Do you calculate the [American Board of Family Medicine's Continuity of Care](#) measure to track continuity of care for your book of business? If so, please include your number for the last calendar year, if not, please describe how you measure and track continuity in your patient population?

- Yes, include percentage
- If No, how do you measure and track continuity (500 words)
- Do not track continuity of care

#### 3.7.3

Do you track the average tenure (or length) of primary care relationship for patients that are active in your panel? If so, please provide the number in months.<sup>1</sup>

- Number of months
- Do not track this number

#### 3.7.4

Please respond regarding the use of virtual care options for primary care services.

	Percent	Do not track this number	Other (500 words)	Our organization does not provide any in-person care
In the last calendar year, what percentage of virtual patient visits are with their designated primary care provider				
In the last calendar year, what percentage of virtual patient visits are with their designated primary care provider				
In the last calendar year, what percentage of total medical patient encounters are done asynchronously (defined by a single chain of interactions that involve medical decision making, resulting in a documented diagnosis, assessment and plan). If your organization uses an alternative definition for what counts as an asynchronous encounter, please select 'Other' and provide the definition and the percentage of total encounters based on that definition.				
In the last calendar year, what percentage of total medical patient encounters are done in-person (if applicable to your organization).				

<sup>1</sup>Employers acknowledge this could be due to the length of eligibility to use the clinic depending on contractual relationships

**3.7.5**

What % of virtual and asynchronous encounters result in an need for patient to seek follow-up with an in-person clinician to complete the assessment and plan for a service that would normally be in scope of a primary care clinician (including assessment of urgent care type complaint for more appropriate triaging, and/or preventive health services like cervical cancer screening)?

- Percent   Do not track this number

**3.7.6**

Please describe how patients who need in-person assessment to address the presenting issue are connected to a clinician in a way that is coordinated for the patient, including the primary care clinician being able to guide the subsequent interactions to avoid duplication of work, and any relevant follow-up after in-person interactions.

Ear pain assessment (500 words)

Shortness of breath assessment (500 words)

Annual monofilament foot exam for patients with diabetes (500 words)

Other urgent care assessments (describe typical workflow that clinicians follow when needed)(500 words)

**3.7.7**

For in-person interactions that are connected to the virtual interaction, including those described above, please indicate if the patient would receive a separate bill for the connected services.

	Yes, with co-pay or deductible based off benefit design	No, it is included within our contract for services in-scope of primary care	Other (200 words)
Ear pain assessment			
Shortness of breath assessment			
Annual monofilament foot exam for patients with diabetes			
Other urgent care assessments (describe typical workflow that clinicians follow when needed)			
Lab draws ordered by primary care			
Immunizations			
Cervical Cancer Screening			

**3.7.8**

Are there devices, such as remote patient monitoring devices, that are sent to enrolled patients regularly? If so, could you describe which devices are regularly sent and how the data is received and used by the clinical team?

- No  Yes, describe (500 words)

### 3.8 Informed Referrals (Specialty Network, Hospital Services and Prescription Drug Management)

Practices refer to specialists based on their quality and patient experience. Data is shared between primary care and specialty providers. Patients are guided through care transitions between hospitals, emergency care, specialty care and their primary care teams. Patients can navigate across settings with established referral pathways to high-value specialist providers, with which the primary care team exchanges information and coordinates care.

#### 3.8.1 Specialty Network

##### 3.8.1.1

Describe the selection criteria for your specialty referral network. How do you ensure referrals to a high-performance specialty network that manages both cost and quality? Indicate clinical quality outcomes measures in use for specialty provider selection. (500 word limit)

##### 3.8.1.2

Do you use a third-party analytic vendor or consultant for specialty provider curation? If yes, please list organizations and describe measures used and methodology.

Yes  No **If Yes, Explain (500 words)**

##### 3.8.1.3

What data sources do your organization currently use to select the highest quality specialists for your patient referrals:

Sources of information used for selection	Check all that would apply	Name(s) of third-party accreditation source(s) used/description of criteria (500 word limit)
Information from health plan		
Information from CMS Compare		
Information from third-party accreditation source e.g., NCQA, etc, please describe		
Information from Medical Society		
Defined list from third-party such as business coalition or IPA, etc., please describe		
Data collected by your provider organization		
Data provided by the specialist organizations		
Other, please describe		

##### 3.8.1.4

Do you have a separate method for identifying where to refer for diagnostic imaging studies (i.e. X-ray, CT, MRI, ultrasound, mammography, etc.)? If yes, please list organizations and describe measures used and methodology.

Yes  No **If Yes, Explain (500 words)**

##### 3.8.1.5

What percentage of specialists notes do you input into the health record within 1 month of a specialist appointment?

%  Do not track this regularly

### 3.8.1.6

What percentage of referrals result in a completed specialist visit?

%     Do not track this regularly

### 3.8.1.7

Please describe your organization's process for ensuring coordination and continuity between your primary care clinicians and those services for which you refer out? 500 words

## 3.8.2 Prescription Drug Management

### 3.8.2.1

Describe the organization's approach to ensuring prescribers are making appropriate prescribing decisions that adhere to clinical best practices (such as those outlined by Choosing Wisely or guidelines outlined by medical societies). (500 word limit)

### 3.8.2.2

Please complete the following table.

	Percent	Do not track this number
Generic substitution rate		
Biosimilar adoption rate		

### 3.8.2.3

Does the organization employ any of the following strategies (defined below) to address cost management or appropriateness of utilization?

	No	Yes (500 words)
Does the organization have internal processes or best practices (besides what is enforced by third parties through prior authorizations) to encourage use of a generic or lower-cost alternative prior to Brand or non-preferred brand		
Team Pharmacist to support providers with prescribing practices/guidelines		
Are clinicians given information about comparative medication costs and alternatives when prescribing to aid in their decision making?		
Does the organization monitor prescribing practices of individual clinicians to identify outliers in terms of cost?		

**3.8.2.4**

Does the organization have access to 340B pricing?  
If yes, confirm if pricing and acquisition savings are passed through to the purchaser and patient.

Yes  No **If Yes, Explain (500 words)**

**3.8.2.5**

Does the organization accept financial risk for prescription drug management?

	Yes	No
Standalone prescription drug budget target		
Prescription drug management is part of targeted Total Cost of Care goal		
Other, explain (500 word limit)		

**3.9 Health Information Technology and Data Sharing.**

Purchasers expect providers to leverage health information technology and electronic medical records to exchange standardized data with health plans and ancillary services (**mental health, nutrition, pharmacist, and/or physical wellness such as physical therapy/chiropractor services**) providers to deliver timely, coordinated care that is high-value and non-duplicative. These tools should also provide information to patients (and caregivers, as appropriate) to facilitate self-care and follow-up.

**3.9.1**

For your providers, please respond to the following question below.

	Percent	Do not track this number
What % of your primary care physicians use an electronic medical record?		

**3.9.2**

Does your organization receive the following information from the health plan and with what frequency?

	Real-time	Weekly	Monthly	Quarterly	Do not receive this data from health plan	Other (20 words)
Medical claims data						
Prescription drug claims data						
Emergency Department admission						
Inpatient admission						
Health screening information (PHQ-9, GAD-7, other)						

**3.9.3**

For your providers, please respond to the following questions below.

For which of the data and reporting areas listed above does your organization conduct further analysis to identify practice variation and benchmark performance at the practice or physician level? (check all that apply)

	Check all that would apply
Medical Claims Data	
Patient-reported outcomes measures	
In-network claims utilization	
Prescription Drug Claims Data	
Health Screening Information (PHQ-9, GAD-7, other)	
Out-of-network claims utilization	
Specialty Drug & Biologics Usage	
Inpatient Admission	
Emergency Department Admission	
Specialty Care Claims Utilization	
Gaps in care reporting (missed preventive screenings or diagnostic testing for chronic condition management)	

Does your organization integrate claims data to inform a patient’s medical chart in terms of clinical screenings and hospitalizations?

- Yes  No

Are you part of a Regional Health Information Organization or other health information exchange? If yes, please list.

- Yes  No  If Yes, List

What % patients can access an online patient portal (through a web or phone application) to update/review their appointment?

- %  No Patient Portal  We have a patient portal but do not track this number  Patient Portal is to be implemented within the next year

What % of patients who have access to a patient portal, actually have an active account (defined as having logged in the last year) using the patient portal?

- %  No Patient Portal  Do not track this number

Is online appointment scheduling a part of your patient portal?

- Yes  No  No Patient Portal  To be implemented within the next year

What % of your patients have 24/7 access to a care team practitioner that has access to their medical record within your practice?

%

What % of ED visits are followed up by the clinical team (defined as either a message from the clinical team, a visit, or reviewing the clinical note from emergency room to determine appropriate interval of follow-up?)

%  Do not receive ED Visit information to be able to perform this task  Do not track this number but our organization has access to ED visit information

After receiving radiology results what is the standard for turnaround time to notify patients?

Within 24 hours  Within 48 hours  No Standard  Patient are expected to follow-up on their own results unless urgent

Other

After receiving results from labs, tests, etc., what is the standard for turnaround time to notify patients?

Within 24 hours  Within 48 hours  No Standard  Patient are expected to follow-up on their own results unless urgent

Other

**3.9.4**

Do patients have access to a patient smart-phone application? If yes, please describe the key features.

Yes  No **If Yes, Explain (500 words)**

**3.9.5**

What policies and procedures are in place to ensure patients receive urgent radiology or lab results, including the modes of communication and how follow-up occurs for patients who do not respond to initial outreach? (500 word limit)

**3.9.6**

Do you currently use artificial intelligence, machine learning or big data to help improve patient care experience, quality of care, and/or clinician work flows?

Yes  No **If Yes, Please describe (500 words)**

**3.9.7**

Do you have immediate plans in the next 2 years to expand use, beyond current use described above, of artificial intelligence, machine learning or big data to help improve patient care experience, quality of care, and/or clinician work flows?

Yes  No **If Yes, Please describe (500 words)**

**3.9.8**

Do you currently have examples of how you have integrated with other wellness or point solutions used by an employer?

Yes  No **If Yes, Please describe (500 words)**





# 4.0- 7.0

## All Regions Questionnaire

The following section represents the questions we will ask for each region you are interested in participating in. We've made these questions available on our online platform for each of the markets you responded to in question 3.1.7.

### 4.1 - 7.1 Organizational Composition, Demographics and Network

The following are questions about the organization's capacity specific to the market that is being represented. Activities must be in place by the date of submission or clearly noted that it is a future activity that will be implemented on specific date noted in your response.

#### 4.1.1 - 7.1.1

Please provide the following information for the market.

Number of In-Person Primary care clinics in region

Virtual Only

Number of Primary care physicians serving the area (If virtual, please include # of all of the referenced clinicians who are licensed and can serve patients in the States being represented in this region)

Number of Primary care advanced practice practitioners providing virtual care in the area, such as Nurse Practitioners or Physician Assistants (please include # of all of the referenced clinicians who are licensed and can serve patients in the States being represented in this region)

Are more than 90% of your primary care clinicians fully employed by your organization (as opposed to 1099 contract or locums tenens contracts) for this region?

Yes  No

List primary supplier(s) for laboratory services in this region? (500 words)

Do you have any formalized relationship with a local medical group, medical system, or hospital where you primarily refer in the markets in this region? If so, please list them and include the market and State they are located

Yes  No **If Yes, List (500 words)**

Are there any incentives, payment, structured agreement to increase referrals to a local medical group, medical system, or hospital where you primarily refer in this region? If so, please describe.

Yes  No **If Yes, List (500 words)**

### 4.2 - 7.2 Health Outcomes

As mentioned previously, the Advanced Primary Care Measure set is designed to focus on a parsimonious set of metrics where high performance reflects a whole-person health strategy, patient access, effective patient engagement and deployment of care coordination resources, use of a high performing referral network and supportive investments in health information technology.

#### 4.2.1.1 - 7.2.1.1 Clinical Outcomes and Patient Experiences

For commercial patients in your organization/practice, for the previous calendar year (January 1 to December 31), please provide your results for the following measures for patients in this region.

Advanced Primary Care Measure Set/Women's Health	Percentage	Do not measure this number	Do not provide care for this population
Breast Cancer Screening (NQF 2372)			
Childhood Immunization Status (NQF 0038)			
Colorectal Cancer Screening (NQF 0034)			
Cervical Cancer Screening (NQF 0032)			
Controlling High Blood Pressure (NQF 0018)			
Glycemic Status Assessment (GSD) HbA1c Poor Control (>9%) (NQF 0059)			
Glycemic Status Assessment (GSD) HbA1c (<8%) (NQF 0575)			
Immunizations for Adolescents (NQF 1407)			
Depression Screening and Follow-Up for Adolescents and Adults (DSF)			
Depression Remission or Response for Adolescents and Adults (DRR-E) – Those who do not have a follow-up PHQ-9, but are still eligible patients should be included in the denominator.			
Patient Experience (CG-CAHPS) (NQF 0005)			
Net Promoter Score (if unable to provide CG-CAHPS)			
Patient-Centered Primary Care Measure (PCPCM)			
What % of patients in the last year responded to either CG-CAHPS, NPS question, or PCPCM questionnaire to derive the response above?			

### 4.3 - 7.3 Behavioral Health Integration

#### 4.3.1 - 7.3.1

For the region specified, describe your behavioral health in-house or coordinated staffing.

	Number embedded coordinated with primary care practice	Are more than 90% of the providers in this category employed (vs. 1099 contract or locums tenens)	Fill in percentage accepting new patients below. Select NA if you do not currently have this type of provider on staff
Psychiatric/Mental Health Advanced Practice Practitioner (Nurse Practitioner or Physician Assistant),. If virtual, please include # of all referenced clinicians who are licensed and can serve patients in the region being represented.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not currently have this type of provider on staff	<input type="radio"/> NA
Psychologist, If virtual, please include # of all referenced clinicians who are licensed and can serve patients in the region being represented		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not currently have this type of provider on staff	<input type="radio"/> NA
Masters-level counselors and therapists, such as LPC, LMFT, LCADAC, if virtual, please include # of all referenced clinicians who are licensed and can serve patients in the region being represented		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not currently have this type of provider on staff	<input type="radio"/> NA
Clinical Social workers such as MSW, LICSW, LCSW, ACSW, If virtual, please include # of all referenced clinicians who are licensed and can serve patients in the region being represented		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not currently have this type of provider on staff	<input type="radio"/> NA

**4.3.2 - 7.3.2**

Please provide the following information about behavioral health screening for your commercial patients (non-Medicare and non-Medicaid) in this region and how is access to behavioral health care monitored?

Number of attributed patients for your organization in this market

Do not track this number

Number of unique patients that had an encounter in the previous year in this region

Do not track this number

What percent of attributed patients received a PHQ-2 or PHQ-9 or behavioral health assessment in the previous year?

%  Do not track this number  
 Do not use PHQ screening routinely

What percent of attributed patients received a GAD-2 or GAD-7 in the previous year?

%  Do not track this number  
 Do not use GAD screening routinely

**4.4 - 7.4 Access - After Hours Access and Virtual Care Options**

**4.4.1 - 7.4.1**

Please detail your average appointment availability and wait times for the following appointment types in the requested market:

Type of appointment	Time <sup>2</sup>	Do not track information	Do not provide this service in this region
In-person Acute/Urgent Medical appointment	(Hours)		
In-person routine medical appointment (New Patient)	(Hours)		
In-person routine medical appointment (Existing Patient with attributed primary care clinician)	(Hours)		
Synchronous virtual or telehealth acute/urgent medical appointment	(Hours)		
Synchronous virtual or telehealth routine medical appointment (New Patient)	(Hours)		
Synchronous virtual or telehealth routine medical appointment (Existing Patient with attributed primary care clinician)	(Hours)		
Urgent behavioral health (MH/SUD) appointment	(Hours)		
Routine behavioral health (MH/SUD) appointment (New Patient)	(Hours)		
Routine behavioral health (MH/SUD) appointment (Existing Patient)	(Hours)		

<sup>2</sup> Average time to 3rd next available appointment for the last calendar year (measured at least once a week from January 1 to December 31) and reported in hours, 1 day = 24 hours)

**4.4.2 - 7.4.2**

Please detail connection times for virtual and/or telehealth encounters (wait time from appointment time, when a patient enters queue for urgent visit, or sends a message)

Type of appointment	Time <sup>2</sup>	Do not track information	Do not provide this service in this region
Synchronous virtual or telehealth acute/urgent medical appointment	(Minutes)		
Synchronous virtual or telehealth routine medical appointment (New Patient)	(Minutes)		
Synchronous virtual or telehealth routine medical appointment (Existing Patient with attributed primary care clinician)	(Minutes)		
Urgent behavioral health (MH/SUD) appointment	(Minutes)		
Routine behavioral health (MH/SUD) appointment	(Minutes)		
Asynchronous patient message or call (time for clinician or staff to respond)	(Minutes)		

**4.4.3**

For asynchronous patient interactions, do you track the time to resolution of the initial medically related concern? (defined by a single chain of interactions that involve medical decision making, with a resolution resulting in a documented diagnosis, assessment and plan)

**Yes, please provide the time to resolution for this region (50 words)**

**Do not track information**

**Other (500 words)**

**4.4.4**

Please provide information about what hours a clinician is available for a patient to interact with a clinician through virtual, telehealth, or messaging. If there are different methods or patient experiences for different hours, please describe the differences and for which days or hours that they apply. (500 words)

## Authors and Reviewers

We would like to thank the members of PBGH who have contributed their time and talents to develop new standards for advanced primary care and address barriers to their achievement.

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