Primary Care Practice (PCP) goal: To provide primary care services of the highest clinical quality delivered with an emphasis on creating an exceptional patient experience as measured by defined metrics of quality and cost.

• Operated by MSU with an Advisory Committee made up of a diverse group of faculty and staff

• Comprehensive Quality Health Care
  - Utilize best practices of primary care
  - Evidence-based

• Coordinated Services Throughout
  - Coordinate with specialists and Centers of Excellence

• Electronic Medical Records
  - Leverage of best technology for patient care records

• Health and Wellness Environment
  - Integrate with MSU wellness

• Prevention and Health Education
  - Environment that proactively promotes healthy lifestyles

• Systematic Monitoring of Satisfaction and Outcomes
  - Outcome and process-based metrics

PRIMARY CARE PRACTICE SERVICES

• Primary Care:
  - Colds, flu, rashes, coughs, sore throats, asthma, diabetes, etc.

• Preventive Care:
  - Physicals, health assessment and health improvement coaching coordinated with existing wellness program.

• Laboratory Tests:
  - Cholesterol, pro-time, blood glucose, PSA, etc.

• Pharmaceuticals:
  - Some generic medications are dispensed on-site. Continued
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PRIMARY CARE PRACTICE SERVICES  Continued

• Convenient Easy Access:
  - Open access to all MSU faculty and staff
  - More time with the Doctor, less time waiting.
  - Same-day services
  - 7:00 am to 7:00 pm
  - Monday thru Friday
  - Near campus location
  - Weekend access

• Health Care Management:
  - Consultant available to answer health questions and assist in complying with treatment regimens.

• On-line Scheduling and Electronic Client Health Records

• 24-Hour Patient Service Line
  - 24-hour access to medical advice and appointment/scheduling assistance

Services not initially offered at the Primary Care Practice:

• Lab services, tests and treatment not offered in the PCP will still be provided, as they are now, through the appropriate insurance medical plan.

• Referrals to a specialist will be made, as they are now, to providers in the appropriate network.

• Prescriptions (for drugs not stocked in the practice site) can be written by the PCP physician and filled at a participating local pharmacy.

• Deductibles, Co-Pays and Out-Of-Pocket charges will apply to services outside of the PCP.
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Resource estimates for achieving goal

Human Resources:

- Medical staff salary and benefits
  Est # of providers x average cost per person = ____

- Administrative and support staff salary and benefits
  Est # of providers x average cost per person = ____

- Cost estimate for services contracted out = ____

Physical Location & Equipment:

- Square footage needed = _____
- One-time start up costs (if building a facility) = _____
- Ongoing yearly facility costs (rent or maintenance) = _____
- Cost of equipment and furniture needed at startup = _____
- Yearly cost of equipment and furniture upgrades = _____

Patient Volume/Time to Viability:

- Number of potentially eligible lives: = _____
- Number of eligible lives predicted to use the service 1 or more times = _____
- Total number of covered lives needed for viability: = _____
- Time needed to reach viability (in # of covered lives) = _____

Estimated total initial investment required to succeed = Start up costs + (annual recurring costs x number of years needed to reach viability).
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