



Practice Development Options

Model	Initial Investment	Expense	Commitment	Considerations
FMEC Platform	Practice Review to	15% of Platform	• Successive 1-year terms.	Practice chooses best
	review practice	Revenue.	• TSP subscription may be	implementation
	compatibility.		recommended.	 Providers maintain ownership
				and autonomy.
Concierge	Typically charges	Practice typically pays	• Initial term may be 5+ years.	• Patient fees may be significant.
Development	a percentage of	fees for management	 Noncompete clauses for up 	 May alienate existing patients.
Companies	revenue from	and marketing that	to two years may be included	 Practice has obligation to adhere
(CDC)	patients who enroll	may be a percentage	with CDC agreements.	to CDC marketing and practice
	as conversion fee.	of revenue.		approach.
Private Equity	PEOs typically	PEOs may charge a	• For early termination,	• PEOs most likely require a
Opportunities	advance funds in	management fee or	practice may have an unwind	personal guarantee for investment.
(PEO)	exchange for	percentage of practice	clause to repay investment.	Practices often required to pledge
	guarantees and	revenue plus return on	 Practices can be committed 	assets, (A/R, equipment, etc.).
	security positions.	investment.	to PEO until investment and	• PEO may not be well versed in
			return is paid.	practice management.
Direct Primary	Minimal	DPCs typically do not	DPCs typically do not require	• DPCs tend not to participate with
Care (DPC)	investment to	require ongoing	on on-going commitment.	insurance, which may limit appeal
	purchase turn-key	expenses unless		and market reach.
	model or have	consulting services are		 Opting out of Medicare may limit
	contracts created.	provided.		future opportunities.
Consulting,	From up to	From no additional	May require annual fees to	Practices may have to terminate
Coaching,	\$10,000 and	expense to on-going	access required resources or	insurance contracts.
Guides and other	beyond in upfront	fees and/or percentage	be affiliated with model.	 Practices may alienate patients.
Program Models	costs.	of revenue.		 Models be limited in appeal.

Note: All Models have limitations to the providers, markets and economy.