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By Dr. Andrew J. Anderson

What is DPC?

A Recruiter's Guide



Navy Seals

What Exactly is
DPC?

Why do physicians
leave
insurance-based
medicine for DPC?

How does it
address burnout?

Why DON'T
physicians leave
insurance-based
medicine for DPC?

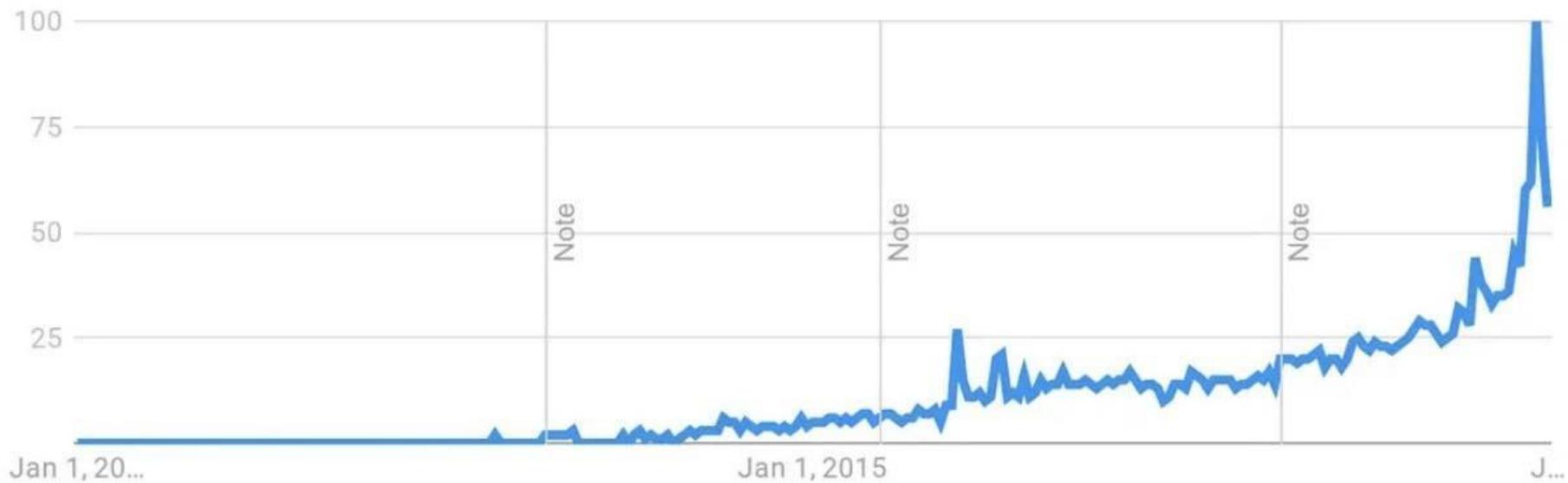
👉 Mind the "subtext" 👈

How does it differ?

Just a different payment model? How is this going to help me?

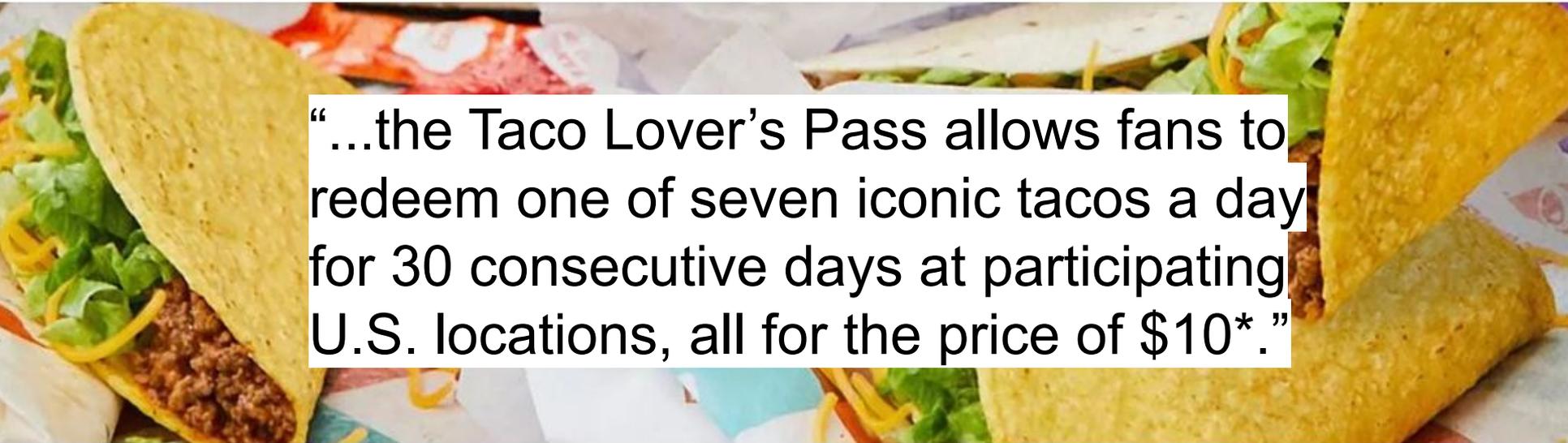
Is DPC sustainable?

If it's so amazing, then why isn't everybody doing it??



Is DPC financially
stable?

Am I putting my family at risk?



“...the Taco Lover’s Pass allows fans to redeem one of seven iconic tacos a day for 30 consecutive days at participating U.S. locations, all for the price of \$10*.”

Taco Bell® Launches First-Ever Taco Subscription Service Nationwide. Say Hello To The Taco Lover’s Pass

How is this
different from
concierge
medicine?

Am I going to be the doc to the "stars" / boutique clinic, etc?

How many
patients does a
physician usually
carry?

~~They may not know to ask this, but you need to discuss it.~~

What if a patient HAS insurance?

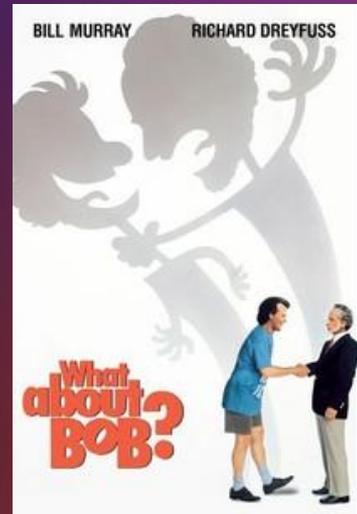
Why would someone go to a DPC office if they already have insurance?

What if a patient
doesn't have
insurance?

What if they need to go to the hospital, to a specialist, or get an MRI?

What about “over-utilizers”?

“Dr. Marvin? Dr. Leo Marvin?”



Am I on call 24/7?

Subtext: "Ahhhhhhhhhhhhhhhhhhhh!"

Is DPC legally safe?

Will the winds of legislation change and put me out of a job?

What happens when the panel fills?

Is there any room for growth or am I capped at how much I can make?

How do
physicians
actually get paid?

Am I going to trust a *colleague* to pay me?

How does a
recruiter know a
“good fit”?



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