

Direct Primary Care clinic evaluation checklist

Use this one-pager when comparing Direct Primary Care practices. DPC is membership primary care—it is not a replacement for hospital insurance.

Ask before you enroll

- What is the monthly membership for adults, children, and families?
- What is included in the membership (visits, messaging, preventive care, basic labs)?
- What is billed separately (labs, imaging, procedures, meds)?
- What is the typical panel size per clinician?
- How soon can I usually get a same-day or next-day visit?
- How do after-hours and weekend questions work?
- Does the clinic help coordinate specialist referrals?
- How does this membership work with my major medical / HDHP / Medicare plan?
- Can I use an HSA/FSA for the membership fee? (confirm with your plan)
- What happens if I need ER, hospital, or surgery care?
- Is there a contract term, or can I cancel month-to-month?
- Who is a good / poor fit for this practice?

Quick cost notes

Typical adult membership ranges often fall around \$50–\$150/month (market-dependent). Family plans and pediatric rates vary. Write your quotes below:

Adult / month: _____ Child / month: _____ Family / month: _____

Separate major medical premium / month: _____

Red flags

- Promises that DPC replaces all insurance needs
- Unclear pricing or pressure to sign a long contract without details
- No clear after-hours process or referral coordination plan
- Panel size that makes same-week access unlikely

Educational resource from DPC Family Health (dpcfamilyhealth.com). Not medical advice. Confirm details directly with each clinic and your insurance/tax advisor.