ClinicOps

FREE DOWNLOAD

DPC Launch Scope Worksheet

The decisions, the work list, the owners and the runway math for opening a direct primary care practice, before you hire anyone to help.

Use this before you talk to any DPC consultant, us included. It puts the decisions only you can make on one page, runs the panel math that decides how lean you open, and turns the launch into a dated work list with a name on every line.

68.4%
of DPC physicians said their panel was not yet full
DPC Alliance survey, published July 2026

$99
median retail DPC membership a month in 2025 (vendor platform data)
Hint, Trends in DPC 2026

40%
of practicing DPC physicians call panel growth a major challenge
AAFP 2026 DPC data brief

How to use it. Fill this page first (30 minutes): every blank becomes a delay later. Run page 2 with your own fee and costs (20 minutes). Put an owner and a due date on every line of page 3. Take page 4 to any consultant call. Review page 3 every Friday until opening day.

Decisions only you can make

Decision	What to weigh	Your answer
Monthly fee for an adult member	Average $98.64 per member per month; rural $81.56, urban $110.00 (DPC Alliance, 2024 data). 61% charge adults $51 to $100 (AAFP).	
Tiers (age, family) and any enrollment fee	Age tiers were most common (76.4%, DPC Alliance). 64% charge an enrollment fee (AAFP).	
What the membership includes	Visits, messages, response times, in-office tests, as a list a patient can read.	
What costs extra, and the price list	Anything outside the membership needs a written price before the service.	
The panel you call full	Full panels clustered at 400 to 700 (DPC Alliance); average panel 504 in 2025 (AAFP).	
Hours, message response time, after-hours plan	AAFP: have a plan for urgent requests while you are away. Name who covers.	
In-house dispensing: yes or no	54% dispense noncontrolled medications in-house (AAFP). State boards set the rules.	
In-office waived tests: yes or no	A lab doing only waived tests files a CLIA application for each location (42 CFR 493.35).	
Opening date and first hire start date	Everything on page 3 counts back from these two dates.	

Runway: the panel you need, and when the median practice gets there

Panels fill over years. On Hint's platform the median practice grew its membership 89% from month six to the end of year one, 250% by year two, 386% by year three, 468% by year four and 559% by year five (vendor platform data, more than 2,700 clinicians). Use those as multipliers on your month-six count. The worked example is filled in; your column is blank.

Line	How to work it out	Worked example	Your practice
A. Monthly fee per member	Your adult fee from page 1	$99 (Hint 2025 median)	
B. Members at month six	Your honest estimate (waitlist, current patients who will follow you)	45 (Hint's own example)	
C. Members at month 12	B x 1.89	85	
D. Members at month 24	B x 3.50	158	
E. Members at month 36	B x 4.86	219	
F. Members at month 48	B x 5.68	256	
G. Monthly fixed costs	Rent, software, supplies, and staff with benefit costs (hourly pay x 2,080 / 0.70 / 12)	$10,418: rent $3,500, software and supplies $1,500, one medical assistant $5,418	
H. Break-even panel	G / A	106 members	
I. Your monthly pay target	What you need to take home before tax	$15,000	
J. Panel that pays you too	(G + I) / A	257 members	
K. When the median path reaches H and J	Find H and J between C and F	H in year two; J at about the end of year four	

Worked example, not a client. The assistant line uses the BLS May 2025 median for medical assistants in offices of physicians ($21.88 an hour) and the BLS June 2026 finding that wages are 70.0% of private employers' compensation cost. Rent, software and pay are illustrative. A median is a middle, not a promise: half of practices grow slower.

What the answer tells you

If J falls after year three, open lean: one assistant who runs written systems, and fixed-scope builds instead of a salaried manager. A practice manager at the BLS May 2025 median ($105,770, offices of physicians) costs about $151,100 a year with benefit costs: the fees of about 127 members at $99.

Your launch readiness score

Count the lines on page 3 that have both an owner and a due date, out of 20. 18 to 20: ready to build; start the 16-week lines this week. 12 to 17: assign the blanks before any consultant call, or they will be filled with guesses. 11 or fewer: the opening date is a wish; move it, or get help on the blank workstreams.

Lines with owner and date: _____ Score out of 20: _____ Date checked: _____

The launch work list, back-planned from opening day

Twenty lines in six workstreams. Count back from your opening date to fill the due dates. The workstream tells you which kind of help fits, if you want help at all.

Weeks out	Task	Workstream	Owner	Due date
16	Membership price, tiers, enrollment fee and inclusions written (page 1)	Membership		
16	Patient membership agreement drafted and reviewed by your counsel	Legal		
14	Entity, bank account and payment processor set up; card-on-file consent wording approved	Controls		
12	State and federal checks: dispensing rules, CLIA application for this location, DEA registration for this address (21 CFR 1301.12)	Legal		
12	Website with membership prices, inclusions and a sign-up path	Website		
10	Google Business Profile created and verified; hours and services correct	Website		
10	Phone system: hours, voicemail, message windows, after-hours routing	Front door		
8	Online booking, reminder texts and a waitlist working end to end	Front door		
8	Job description for the first hire posted, with the tasks they own	Team		
6	Offer made; Form I-9 to be completed within three business days of the start date (8 CFR 274a.2)	Team		
6	Day-one SOPs: phones, booking, member sign-up, messages, refills, the monthly charge run	Controls		
5	Monthly charge run, failed-payment routine, reconciliation by a second person	Controls		
4	Exposure control plan written; bloodborne pathogens training at assignment (29 CFR 1910.1030)	Controls		
4	Compliance calendar: license, DEA, CLIA, yearly OSHA training and plan review	Controls		
3	First hire onboarding plan and a written backup for every task they own	Team		
2	Dry run: test call, test booking, test sign-up and charge, test after-hours message	Front door		
2	One way to ask every member for a review, the same way, with no reward	Website		
1	Opening announcement to the waitlist and the patients who asked to follow you	Membership		
0	Opening day: daily huddle starts; weekly numbers (new members, cancellations, response time)	Controls		
After 4	First monthly reconciliation and a review of the numbers against page 2	Controls		

Who does what

Work	You	Your team	Your counsel	Outside help, if any
Membership price and inclusions	Decides	Gives input on workload	None	Shows the math only
Membership agreement, entity, state rules	Decides	None	Drafts and reviews	None
Phones, booking, reminders, after-hours	Approves the windows	Runs it daily	None	Can build it in weeks
Website and Google profile	Approves the copy	Keeps hours and services current	Reviews the agreement link	Can build and run it
First hire	Hires	Trains alongside	Employment questions	Can write the role and onboarding
SOPs, charge run, compliance calendar	Signs off	Runs it	None	Can write and set it up
Clinical decisions	Decides	Follows your protocols	None	None

The published fees for this work, ours and other firms', and the cost compared with hiring a manager, are in the direct primary care consultant guide on clinicops.us.

When the launch goes wrong

If this happens	Do this
The opening date slips past the lease start	Move every line on page 3 by the same number of weeks. Do not start membership charges before you can see members. Send the waitlist a dated update.
The panel grows slower than the median path	Check the front door first: how fast inquiries get an answer and how many book. Then the Google profile and the sign-up path. Half of practices grow slower than a median.
Your first hire leaves in month two	The SOPs and backup list from page 3 are the next hire's training plan. Post the same job description the same week.
A member's monthly card charge fails	Follow the routine in your agreement: retry, message the member, pause after the stated days. No interest and no late fee.
You are away (vacation, illness, an emergency)	Use the after-hours plan from page 1: a named colleague, a routing message, a written list of what waits and what does not.
A state rule on dispensing or labs surprises you	Stop that service until your counsel or the state board confirms the rule. Update page 1 and the website.

Questions to ask any DPC consultant before you sign

- [ ] **What is delivered, by what date, and in writing before I pay?**
- [ ] **Is the price fixed, monthly or hourly? What are the term, notice period and exit terms?**
- [ ] **Who owns the accounts, files and templates you build? (It should be the practice.)**
- [ ] **Do you take referral fees from the software or vendors you recommend?**
- [ ] **Will you see patient information, and sign a data agreement first? (Where HIPAA applies: 45 CFR 160.103.)**

Your membership price, agreement and clinical scope stay with you and your counsel, whoever you hire.

Sources

Checked against the original source in November 2026. Rules and figures change: confirm anything time-sensitive on the source page.

1. Zhu et al., Health Affairs 44(12), concierge and DPC practices 2018 to 2023 (author manuscript) (Dec 2025). pmc.ncbi.nlm.nih.gov/articles/PMC12965179/

2. DPC Alliance, State of Direct Primary Care: 465 physicians, survey Oct to Nov 2024 (July 2026). dpcnews.com/wp-content/uploads/2026/07/State_of_DPC_FINAL2026.pdf

3. Hint, Trends in DPC 2026 (vendor platform data) (2026). get.hint.com/hubfs/2026%20Hint%20Health%20DPC%20Trends%20Report.pdf

4. AAFP, 2026 Direct Primary Care Data Brief (313 respondents) (2026). aafp.org/assets/image/upload/v1792512986/pdf_dpc26_data_brief.pdf

5. BLS OEWS May 2025 (medical assistants $21.88 an hour; managers $105,770, offices of physicians) and ECEC June 2026 (wages 70.0%) (2026). bls.gov/ooh/management/medical-and-health-services-managers.htm

6. 42 CFR 493.35 (CLIA waiver application), 21 CFR 1301.12 (DEA registration by location) (eCFR, Nov 2026). ecfr.gov/current/title-42/section-493.35

7. 8 CFR 274a.2 (Form I-9), 29 CFR 1910.1030 (bloodborne pathogens), 45 CFR 160.103 (business associate) (eCFR, Nov 2026). ecfr.gov/current/title-29/section-1910.1030

Where this worksheet stops

It shows the work and who owns it. The front door is the part most launches get wrong:

- **It cannot answer a call or book a member.**
- **It cannot show which gap costs you the most members until someone tests your phones, booking and website the way a patient does.**
- **It cannot keep page 3 moving the week you are seeing patients and hiring at once.**

14-Day Front Door Fix: every call, form and message answered inside a set window by a named owner, phone scripts and training, online scheduling, reminders, a waitlist and recall, built in 14 days inside the tools you already use.

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It is a diagnostic call, not a sales call: we walk back the last thing that slipped, put an hours or dollar figure on it, and you leave with the first fix whether or not you hire us.

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