



Practice Information Survey: HPSM Assessment

Please share information specific to your practice site (since an organization may have multiple sites). Provide any data that is easy to pull. If you are not able to readily access these numbers, you may simply mark “not readily available.” Estimates are welcome.

Organization Name

Please Select

Site Name (if applicable)

Please Select

Your Name

First Name

Last Name

Your Email

example@example.com

Payment Mix

1. Please select all payors from which your practice accepts at least one type of insurance. HPSM is assessing payor mix to better align provider rates and incentives.

- ☐ Alameda Alliance for Health
- ☐ Aetna
- ☐ Anthem Blue Cross
- ☐ Balance by CCHP
- ☐ Blue Shield of California
- ☐ Canopy Health
- ☐ Cigna
- ☐ Kaiser Permanente

- ☐ Health Net
- ☐ Medi-Cal Fee-for-Service (non-Managed Care)
- ☐ San Francisco Health Plan
- ☐ Santa Clara Family Health Plan
- ☐ UnitedHealthCare
- ☐ Valley Health Plan
- ☐ Western Health Advantage
- ☐ Not readily available.
- ☐ Other

2. What is the total number of patients you have assigned for each of the following insurance types. Include assigned-not-yet-seen for any payor that assigns for primary care.

	Number of Patients (Total Assigned Patients, where applicable)	Not readily available
Non-HPSM Medi-Cal		☐
Non-HPSM Medicare / Medicare Advantage		☐
Non-HPSM Commercial		☐
Self-Pay		☐
Other		☐

Definition:

Assignment: The process by which patients are attributed to an organization, site, or provider by a payor and thusly tasked with engaging and delivering care.

Systems

3. What Electronic Health Record (EHR) are you using?

- ☐ Epic
- ☐ eClinical Works
- ☐ Cerner
- ☐ We do not have an EHR
- ☐ Other

4. What population health management system(s) are you actively using? (select all that apply)

- ☐ Cozeva

- ☐ EHR Modules
- ☐ i2i
- ☐ Relevant
- ☐ Stellar Health
- ☐ We do not have a population health management system
- ☐ Other

Staffing

5. For your practice site, please provide a breakdown of each primary care provider (PCP) and their FTE dedicated to direct patient care. Please note that filled FTE and vacant FTE are mutually exclusive.

	Non-Direct Patient Care FTE (filled)	Direct Patient Care FTE (filled)	Non-Direct Patient Care FTE (vacant)	Direct Patient Care FTE (vacant)
Physician (MD/DO)				
Advanced Practice Provider (NP/PA)				
Resident Physician				

6. Describe your practice site's staffing model by indicating the number of each staff member on the primary care team. Please note that filled FTE and vacant FTE are mutually exclusive.

	Overall FTE (filled)	# Vacancies	Additional Notes
Nursing Staff (LVN, RN/BSN)			
Medical Assistants (Patient-Facing, only)			
Front Office Staff			
Community Health Workers (CHWs), Health Coaches, and/or Patient Navigators			
Medical Scribes			
Pharmacists			
Case Management Staff			
Behavioral Health Providers			

Dental Providers

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Nurse Midwives

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Doulas

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Other

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Empanelment

Definition: The process for ensuring that every patient has an assigned Primary Care Provider (PCP) and every PCP has a defined panel of patients.

7. How do you define active patients in your practice site?

- ☐ One visit within last 12 months
- ☐ One visit within last 18 months
- ☐ One visit within last 24 months
- ☐ One visit within last 36 months
- ☐ We do not define active patients in our practice
- ☐ Other

8. How many active patients are in your practice site, using your definition for “active”?

9. Do you calculate ideal panel size? i.e., a target/optimal number of patients for each FTE of primary care provider (PCP) time

- ☐ Yes
- ☐ No

If so, what is the number of patients per one clinical FTE?

Continuity

10. Which if any of these metrics do you routinely use to track continuity?

- ☐ Patient-perspective continuity
- ☐ Care team-perspective continuity

☐ We do not routinely track any of these

☐ Other

Definitions:

Continuity: The consistent and seamless provision of ongoing health care management to a patient over time, ensuring coordinated and high-quality treatment across providers and settings.

Patient-perspective continuity: A metric measuring how much patients get to see their own provider or care team.

Care-team perspective continuity: a metric measuring how much care teams/providers get to see their own patients.

Access

Access: The timely use of personal health services to achieve the best health outcomes.

12. Which of these metrics do you routinely use to track access at your practice site (check all that apply)?

☐ Third next available appointment

☐ Percent open appointments

☐ Percent same day appointments

☐ We do not routinely track any of these

☐ Other

Work Experience

13. Do you conduct any routine staff well-being surveys?

☐ No

☐ Yes

Submit