

PRIMARY CARE PROVIDER SURVEY FORM

(Outpatient providers only. Do not survey hospital providers.)

Name, Degree Primary Address, Telephone #, and Additional Office Locations (Specify municipality or census tract)	Specialty ¹	Office Hours ²	Accepting New Patients ³				
			Medicare Y/N	MA Y/N	CHIP Y/N	Free, Discounted, or Sliding Fee Y/N	Commercial Insurance Y/N

¹ Specialty (Family Practice, General Practitioner, Internal Medicine, OB/GYN, Pediatrics, Dentist, Pedodontist)

² Days and hours patients are provided services i.e. Monday, Wednesday and Friday 11:00-2:00 and Tuesday and Thursday 9:00-12:00 and 4:00-7:00

³ Indicate if practice is accepting new patients in the following columns: Medicare, MA, CHIP, Free, Discounted, or Sliding Fee and/or Commercial Insurance (Y/N)

INSTRUCTIONS FOR PRIMARY CARE PROVIDER SURVEY FORM (FOR TIER 1 APPLICATIONS - FREE CLINICS ONLY)

If the application is for primary care medical services then survey only primary care physicians. If the application is for primary care dental services then survey only general dentists. If the application is for both primary care medical services and primary care dental services then applicant must survey both physicians and dentists.

Primary Care Providers include: Family Practice, General Practice, General Internal Medicine, Obstetrician/Gynecologist, Pediatrics, General Dentist and Pedodontist, only. DO NOT INCLUDE Certified Registered Nurse Practitioners, Physician Assistants, Certified Nurse Midwives, Dental Hygienists, Dental Assistants or Specialty or Hospital/Inpatient physicians.

Office Hours-are the hours that the physician or dentist is actually available to see patients.

If physician/dentist splits time between 2 locations, please obtain hours worked at each location.

Under “Accepting New Patients” indicate Y (yes) or N (no) for each of the following: Medicare, MA, CHIP, Free/Discounted/Sliding Fee and/or Commercial Insurance if the new patients are accepted in these categories.

Note: If offices refuse to answer, indicate that in the “office hours” column.

Be sure to add any physicians and/or dentists that you know are in the proposed service area.