Frequently Asked Questions



Questions you may have about a transition in ownership...

Do I maintain clinical autonomy?

You remain the "Chief Medical Officer" of your practice

• We practice AAP medicine in a Patient Centered Medical Home model and work with our partner practices to provide the highest quality care to the children we serve

What happens to our schedule?

We have no interest in disrupting the culture of your office and your existing schedule
We work with local leadership (you!) to determine opportunities for operational improvement

Ok, but something must change, right?

• We ensure that all of our practices meet the same national standard for issues of compliance, patient and staff safety

We will identify any gaps and provide resources to remediate any issues

What about my EHR?

And what about our brand? Our staff?



- In order to provide the support necessary for our partner practices, we need to ensure we have access to all relevant data on each practice
- Complementary systems will ultimately add value to you and your clinicians but we approach this change with your input and collaboration
- Your patients know you and know your brand; while we look to have regional density with a given brand we have no interest in converting all practices to 'Pediatric Associates'
- Our acquisition model is not dependent on cost savings though we ultimately look to achieve back-office synergies over time; we will commit to being to being transparent about where we see positions at risk during our diligence process