Brown Health Medical Group

Office of the Attorney General

Primary Care Performance Report

July 1, 2026

Executive Summary

Brown Health Medical Group is dedicated to expanding primary care access for Rhode Island residents over the next four years. The following key metrics have been established to objectively monitor our ongoing commitment to ensuring timely access to primary care services.

Number of net new patients during the reporting period	• +260 patients
Number needed to hit the Net New Patient requirement	• 29,740 patients
Average Panel Size per Clinical FTE	• Adult Physician: 1766 patients • Adult APP*: 1047 patients • Pediatric Physician: 1339 patients • Pediatric APP: 1113 patients • Geriatric Physician: 806 patients
Sick Visit Availability	• Patients seen for sick visits within 0-1 days: 96.8%
New Patient Availability**	Patients able to secure a new patient visit within 14 days: • Overall: 73% • Adult/Family Medicine: 72% • Pediatrics: 92%
Number of net new PCPs, broken down by MD/DO and APP type	• Overall: -3 PCPs as of 6/1/2026, projecting +4 PCPs by 9/30/2026 - MD: +2 clinicians - NP: -2 clinicians - PA: -3 clinicians
Number of net new PCPs to attain target	• 30 PCPs
Ratio of MD/DO to APP	• 1.78 MD: 1 APP
Number of net new nurses (excluding APPs)	• -3.45 FTE: - 3 headcount
Number of net new administrative or support staff to support increased patient load	• 14.85 FTE; 35 headcount
Total PCP payroll spending	• $23,713,295
Net Investments in Technology and PCP Support***	• $19,172,326

*APP - Advanced Practice Provider, including nurse practitioners and physician assistants.

**New Patient Availability is displayed as the percentage of new patients who were scheduled for a visit within 14 days of requesting a PCP.

***This does not include system (Brown University Health) investment in primary care resources.

Note: Brown Physicians, Inc., was on a separate electronic health record (EHR) through March 2026.

Financial reporting: 10/1/2025 – 3/31/2026; All other reporting 10/1/2025 – 5/31/2026.

Updated breakdown of how many providers are in each tier of the Compensation Structure

Sessions	A	B	C	D
4	0	1	0	1
5	0	1	0	4
6	0	6	4	2
7	0	8	3	0
8	0	23	3	1
Grand Total	0	39	10	8

Explanation of Any Substantive Changes to the Compensation Structure

There have not been any substantive changes to the compensation structure. We are currently in the process of developing a new compensation plan for pediatric physicians and will share that model once it has been completed and approved.

BHMG Primary Care Recruitment and Hiring Updates

Over the past 6 months, while retention remains a challenge, Brown Health Medical Group has actively recruited new primary care clinicians. Since October 2025, we have hired 15 new physicians and 7 new advanced practice providers. We also are in the process of interviewing an additional 10 physician candidates.

For nurses and administrative staff, there have not been any substantive changes at this time. As our net new clinicians and net new patients increase, we will continue to assess staffing needs for administrative and nursing staff accordingly.

Explanation for Why Net New PCPs are Below Projected Trendline

Primary care recruitment and retention remain challenging in the face of lower payor reimbursement in RI as compared to other states and the attraction of concierge medicine practices as a result. A total of 17 Primary Care Clinicians departed BHMG from 10/1/2025 with an additional 5 anticipated to leave before the end of this year. These clinicians departing were responsible for nearly 15,000 patients. Following the departures over the past 6 months, we have worked very hard to re-establish these patients with a new primary care provider in our group.

- Reasons for PCP departures:
    - **42% (8 clinicians)** relocated to a different state
    - **17% (4 clinicians)** moved to an external Concierge Medicine practice
    - **26% (7 clinicians)** retired from Primary Care
    - **4% (1 clinician)** terminated
    - **8.5% (2 clinicians)** moved to a different Primary Care Organization

Explanation for Why Net New Patients is Below the Expected Trend Line

Despite an observed near net-neutral gain in new patients to date, this modest gain reflects the significant redistribution of patients to new PCPs required in the past six months due to the departure (for the reasons noted above) of so many PCPs. It is worth noting that the baseline number used for the number of primary care patients was more than the actual number of patients as of October 1, 2025. The number of Brown Health primary care patients reflected in the September 26, 2025 letter agreement between the State of Rhode Island Office of Attorney General and Brown Health and which served as the baseline number was calculated as of August 2025, not October 2025. Due to the attrition of PCPs between August 2025 and the end of September 2025, the number of primary care patients as of October 1, 2025 was actually 188,538, not 191,700. If the number of primary care patients as of October 1, 2025 was used as the baseline number, there would be a net gain of 3,422 new primary care patients over the adjusted baseline amount. Despite these departures and challenges, we nevertheless project to meet our 2026 net new patient target between newly hired clinicians and clinicians continuing to grow their panels.

Explanation for new patient availability dropping below 90%

Over the past year, following the unexpected closure of another local practice (Anchor Medical), our waiting list for patients seeking a new primary care provider expanded to 14,000 patients. In response, we reconfigured access throughout our practices by, for example, implementing a new centralized patient access and scheduling system, and have refined our physician compensation model to further support and incentivize PCPs to expand access for more new patients. As a result of our efforts, we now have only 1,200 patients, including former Anchor Medical patients, remaining on our waiting list, most of whom are seeking specific locations and/or clinicians with limited access.

Net Investments in Technology and PCP Support

Brown University Health invests significantly in Primary Care to support competitive salaries for PCPs for recruitment and growth. Additionally, the system offsets losses that would generally be incurred by primary care groups following the degradation of value-based care in recent years, many of which in our state have been unable to sustain and, in some cases, resulted in practice closures. Annually, Brown University Health subsidizes nearly $12 million in Primary Care expenses.

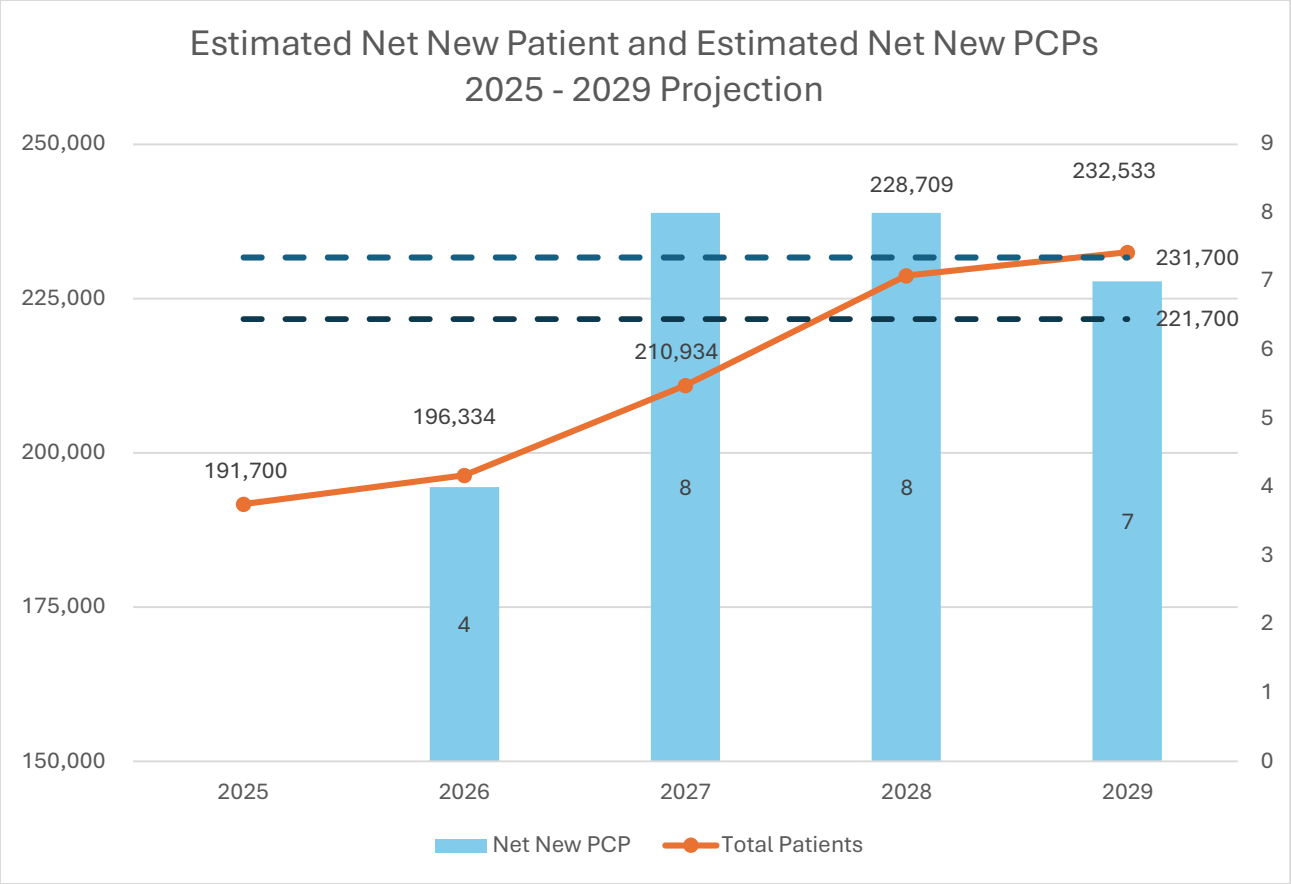
In addition to team-based care infrastructure, annually Brown University and Brown Health Medical Group invest heavily in IT infrastructure costs, and we have invested heavily into resources that aim to reduce the administrative burden on primary care clinicians. Specifically, this includes resources to support PCPs including a night nurse answering service and DAX Nuance AI scribes to support clinical documentation.

New PCP Practice Locations or locations at which services were reduced by 25% or greater during the reporting period

Over the past six months, we consolidated several practice locations due to clinician transitions, including closing our Narragansett Family Medicine practice in October 2025 and our Metacom practice in December 2025, as further described below.

- **Brown Health Medical Group Primary Care, Narragansett Family Medicine.** One advanced practice provider retired in June 2025 and then two physicians left to open an independent concierge medicine practice in the fall 2025. Brown Health Medical Group retained approximately 2,300 patients representing about 70% of the total practice panel and transferred their care to alternate locations.
- **Brown Health Medical Group Primary Care, Metacom.** This was a small practice consisting of 3 APPs and 1.5 physicians. One APP retired in September 2025, and the primary physician lead departed on 10/31/25. At the same time, the lease was up for renewal. In light of significant repairs needed for the space which the landlord planned to charge to us and the loss of the APP and departure of the lead physician, the remaining 2 APPs and 0.5 FTE physician were reassigned to other practices within Brown Health Medical Group Primary Care. Brown Health Medical Group retained approximately 4,100 patient lives, representing 80% of the total practice panel.
- **Brown Health Medical Group, Lincoln Pediatrics.** The practice consolidated locations from North Attleboro and another one in Lincoln into one location located at 1 Commerce Street in Lincoln, RI. There were no departures or reductions in clinicians.
- **Service reductions.** Some modest service reductions were experienced across several other locations due to clinician departures or transfers including:
    - **Brown Health Medical Group Primary Care, East Providence Internal Medicine.** The practice experienced the departure of 2.0 FTE unempaneled APPs. This resulted in approximately a 25.8% reduction. It is expected that the services will be restored in upcoming months with newly hired clinicians.
    - **Brown Health Medical Group Primary Care, Wakefield.** The practice experienced the departure of 1.0 FTE unempaneled APP and the transfer of 0.88 FTE empaneled physician to another practice. This resulted in a 42.7% reduction. To restore services within this practice, a 0.5 FTE unempaneled APP is temporarily being reassigned for interim coverage, and in September 0.75 FTE APP will transfer to this practice permanently while we continue to recruit a new physician for this practice.

Predicted Trendlines for Net New Patients and Net New PCPs hired over the Next Four Years (Updated 6/2026)



	2025	2026	2027	2028	2029
Total Patient Target	191,700	195,660	208,398	223,735	232,458
Projected Total Patients*		196,334	210,934	228,709	232,533
Projected Net New Patients*		4,634	19,234	37,009	40,833
Projected Net New Clinicians*		4	8	8	7

*Updated as of 6/2026