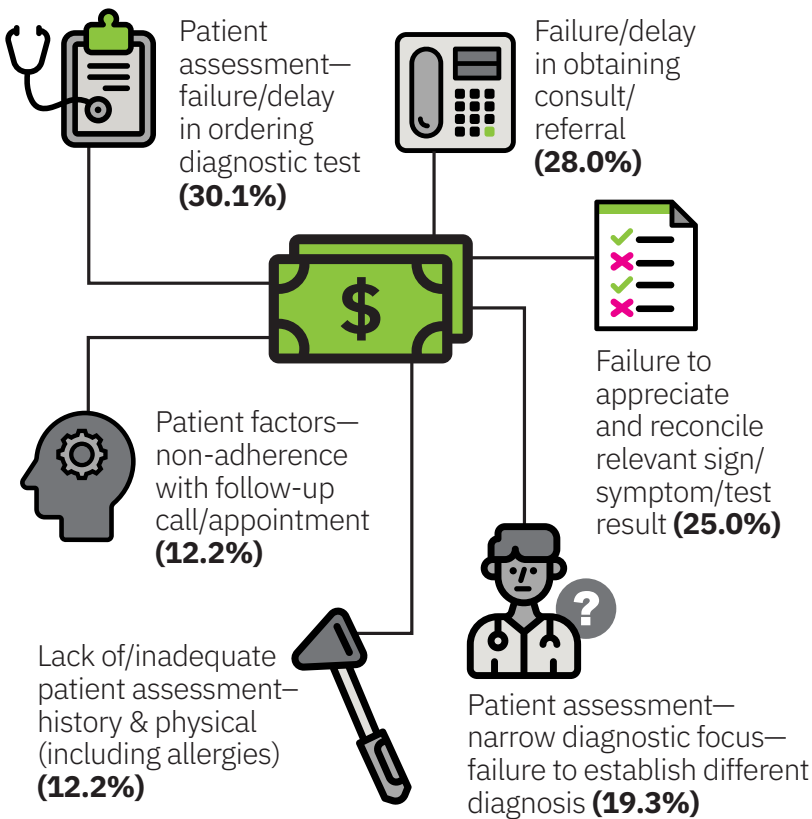# Primary Care—claims statistics and analysis
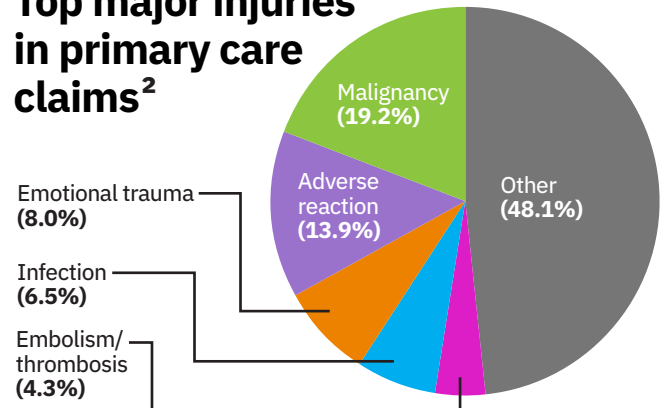
Factors that influence the frequency of primary care claims[1]

1. Number of patients prescribed opioids or benzodiazepines

2. How many zip codes are represented by patients receiving prescriptions?

3. What percentage of the provider's bills are visits for established office patients?

4. How severe are the patients seen by this provider?

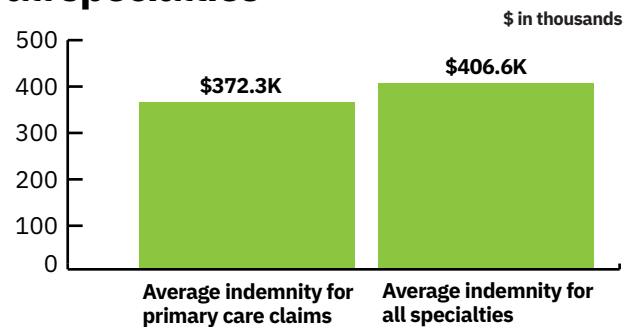**5.** Number of services provided in a skilled nursing facility
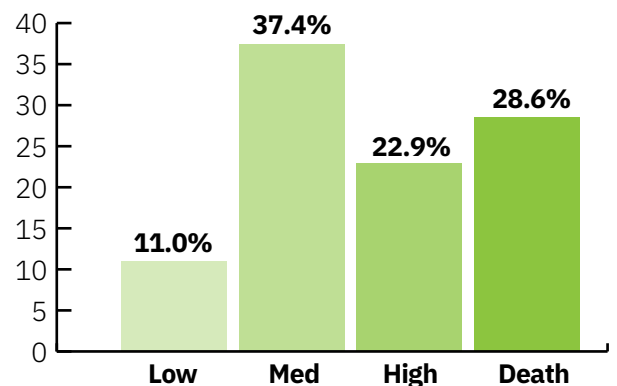
Top contributing factors[2]

Patient assessment—failure/delay in ordering diagnostic test **(30.1%)**

Failure/delay in obtaining consult/referral **(28.0%)**

Patient factors—non-adherence with follow-up call/appointment **(12.2%)**

Failure to appreciate and reconcile relevant sign/symptom/test result **(25.0%)**

Lack of/inadequate patient assessment—history & physical (including allergies) **(12.2%)**

Patient assessment—narrow diagnostic focus—failure to establish different diagnosis **(19.3%)**

Top major injuries in primary care claims[2]

Malignancy **(19.2%)**
Other **(48.1%)**
Adverse reaction **(13.9%)**
Emotional trauma **(8.0%)**
Infection **(6.5%)**
Embolism/thrombosis **(4.3%)**

Indemnity for primary care vs. all specialties[2]

$ in thousands

$372.3K — Average indemnity for primary care claims
$406.6K — Average indemnity for all specialties

Clinical severity of injury for primary care claims[2]

Low **11.0%**
Med **37.4%**
High **22.9%**
Death **28.6%**

Low = Temporary insignificant injury or emotional only
Medium = Temporary major or permanent minor injury
High = Permanent significant, major, or grave injury
Death = Adult, child, infant, or fetal death