

# The Consumer Guide To Primary Care

Read this guide and you'll discover:

- What Every Patient Ought to Know About Their Primary Care Office
- Six Primary Care Office Rip-offs
- Eight Most Common Complaints Patients Have About Their Primary Care Office
- Seven Costly Misconceptions About Primary Care
- Six Errors to Avoid When Choosing a Primary Care Doctor
- Five Mistakes to Avoid After You Have Picked Your Primary Care Doctor
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- The Value of Having a Primary Care Doctor
- Why Join a Direct Primary Care Practice?
- Great Care, Guaranteed
- Nine Steps to Optimizing Your Health



**Provided as an educational service by:**

**Belinda L. Castor, MD of Integra Direct Primary Care**

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Dear Patient,

Choosing a doctor isn't easy. Why? Because you're bombarded with misleading advertising, confusing claims, and bad information from the insurance companies, the media, local billboards, and others who are NOT physicians but pretend that they are. How do you ever find a qualified, competent primary care doctor?

I am providing this guide to help you better understand primary care. With this information, you can make an informed, intelligent decision. I am a board-certified internal medicine physician in practice for 30 years and have seen over 100,000 patients. I know exactly what things really cost and how they are marked up. What I can share with you are some common-sense guidelines.

If you have any questions about direct primary care, please free give us a call at 603-716-5533. We've dedicated our practice to educating patients and we would be happy to help you in any way.

Best wishes,



Belinda L. Castor, MD

Integra Direct Primary Care, PLLC

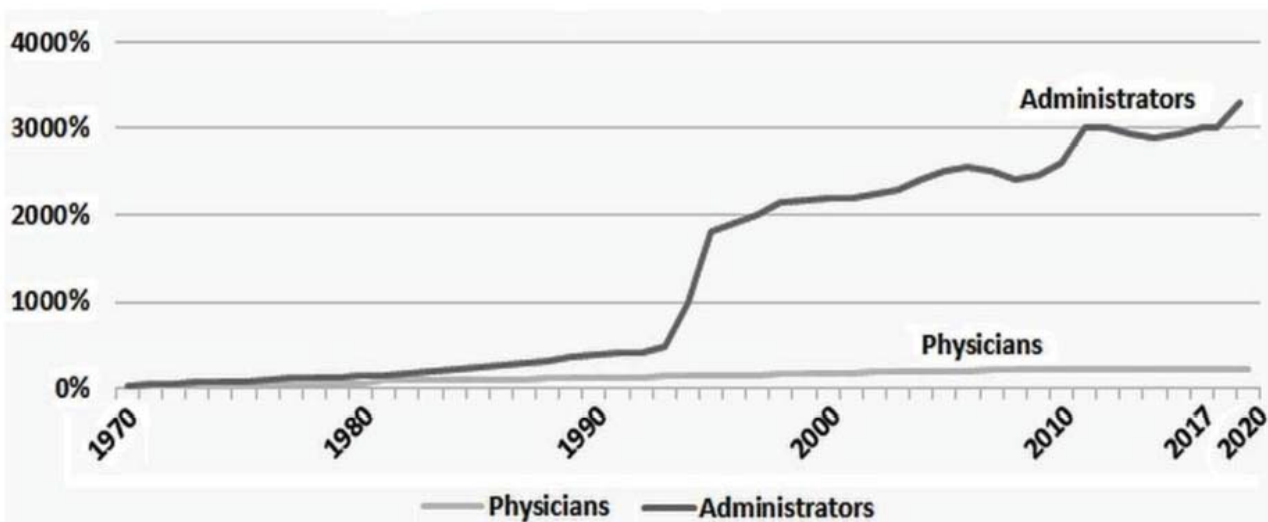
# What Every Patient Ought to Know About Their Primary Care Office

Most primary care offices, under the constant barrage of insurance and government mandates, are overwhelmed. Not just the doctors but the staff as well. Over the years, these offices have added more and more staff to handle the paperwork and phone calls. This has led to physicians seeing more and more patients to break even financially. What has come out of this is a turnstile experience. Patients are getting less time with their doctors, which has been frustrating for everyone. During the visit, it is not uncommon for a doctor to stare at their computer answering questions from third parties, while ignoring or not addressing questions from the patient due to time constraints. Patients are unhappy. Doctors are unhappy. The insurance companies, however, are happy because they are profiting and have what they always wanted – control.

The healthcare system is so broken that these trends are only getting worse. Doctors have lost independence as most of them now work for hospitals or very large groups/systems. They do this to show strength in numbers in order to bargain better with the insurance companies. Independent thought and feelings of self-ownership is gone. Doctors are now part of the cog wheel system and are trying to get through their days. With physicians having an allegiance to their employers, patients have lost the most important advocate they have for their health – their primary care doctor.

Unfortunately, no one has come up with good solutions. Why is that? Since the 1970s the number of physicians in this country has pretty much stayed about the same. The number of administrators, however, has risen at an astonishing rate of 3,000%!

**Growth in Physicians and Administrators US Healthcare System 1970-2017**



This rate is unsustainable because administrators do not bring any revenue into the system. They just crack the whip on the doctors to get more and more out of them. They do this by making doctors see more patients or making them do more computer “chores” in hopes to obtain national awards, certificates, and recognitions. But where does that leave the patients?

Doctors truly want to help their patients. They went to medical school with an altruistic and idealistic vision. They give a decade of their lives to train to be primary care doctors. Unfortunately, the environment of today’s healthcare system now forces doctors to do whatever it takes to survive. This means quick visits while staring at the computer and hiring extenders like NPs and PAs to help with the workload.

It doesn’t have to be this way! I encourage you to read the following and learn some of the inside secrets to getting the best out of your primary care experience.

## Six Primary Care Office Rip Offs

**RIP OFF #1: Requiring patients to return to the office to review results when they can be delivered via phone or electronically.** Over 90% of the results from testing are normal. The bottom line is the administration wants another copay and another chance to bill you or your insurance. With high deductibles that means more money out of your pocket. This does not mean you shouldn’t communicate with your doctor about the results, it just means there shouldn’t be an additional cost to do this. With a membership model, like in direct primary care (DPC), these visits don’t cost you anything.

**RIP OFF #2:** The office performs a bait-and-switch with the “provider” who is really seeing you. You were thinking you had an appointment with your doctor, but instead you see a nurse practitioner or a physician assistant. You don’t see your doctor, but it will cost you the same in the end.

**RIP OFF #3: Padding the bill.** Many offices will perform unproven screening testing that does little except to make a profit. This may include yearly EKGs on low-risk patients or a screening urinalysis at physicals. Sometimes you are nickel-and-dimed for every charge such as phlebotomy, cryotherapy, strep tests, and injections. These things often cost next to nothing for the office, however, charges are increased significantly to help cover overhead costs. Just wait until you see your bill!

**RIP OFF #4: The doctor will only address one or two problems per visit or will not discuss any other issues during your yearly physical.** Doctors can only bill so much per visit. Once they hit their max, there is no reason to discuss any new issues, so it is financially more feasible for the doctor to have you follow up at another visit or there may be insufficient time at the physical exam to address other issues. For a complete physical exam, the doctor does not get paid for any extra complaints outside of normal health maintenance issues. Therefore, the patient is

often told to come back for these issues. With using a simple modifier in the coding, administrators have found ways to bill an extra fee for that visit to charge for acute issues. Since only a physical is covered for free by your insurance, that extra fee comes directly out of your pocket.

**RIP OFF #5: Many doctors are now employed by hospitals.** Who cares, right? Well, you should. Hospitals love to hire doctors because this guarantees that they get the referrals for procedures, labs, surgeries, and x-rays. The other benefit is that in the eyes of the insurance companies and government, the primary care office is now classified under the hospital umbrella, which allows them to charge a “facility fee”. This amount can be quite alarming so be aware as it will eventually come out of your pocket due to the trend of large deductible plans.

**RIP OFF #6: The bill is not paid by the insurance company.** This is not the office’s fault. The reality is that with the new high deductible plans, only a basic physical is covered and preventative screening. Any other visits are on you and the prices are high, too high!

## **Eight Most Common Complaints Patients Have About Their Primary Care Office**

**Complaint#1: The staff seems burned out, rude, unfriendly, and never smiles.** We hear this all the time because they are. The system is broken, and they seem to be running around multi-tasking, doing the best they can given their workload and short staffing. The mandates by the government and insurance companies have created so many hurdles and so much paperwork that the staff can never catch up or take a breath. This is stressful and burns them out, making them appear rude or unfriendly. Sadly, it won’t change anytime soon in this current system. Direct Primary Care practices do not work with insurance companies so they do not have to deal with the bureaucratic paperwork and mandates. Staff is always available to help you!

**Complaint #2: You can never get in quickly or you never see your own doctor.** Most doctors have way too many patients and not enough time. Administrators hire NPs or PAs to “extend” the physician’s reach, but that isn’t the same as seeing your own doctor and they do not have the same training as your doctor. Sixty percent of patients wait two weeks to see their physician, only 10% of patients can see their doctor on the same day for an acute visit and patients often wait for at least 20 minutes in the waiting room for their 15 minute visit. Some doctors have upwards of 2,000 or more patients that they are responsible for, which is insane. Most direct primary care doctors generally have 600 patients or less for their patient panels. They can see their patients in a timely manner, which allows them the time they need to spend with their patients. 100% your doctor, 100% of the time!

**Complaint #3: The visits are 15 minutes or less and the doctor is looking at the computer screen the entire time.** Due to having too many patients and being asked to click useless boxes on the computer to appease the insurance companies, doctors are spending less time engaging

with the patient. Electronic medical records were built for billing and not really to improve your care. The doctor is staring at the computer clicking on required mandates in order to get paid for the services they provide at the expense of making your office visit a better experience. This adds to the visit being more impersonal and less effective. At Direct Primary Care practices, you will have the doctor's full, undivided attention during your visit because your care is our primary care!

**Complaint #4: I can never speak to my doctor and can only leave a message, which is returned much later, if at all, by a nurse.** The combination of being overworked in the office as well as not getting paid for talking or emailing with patients makes doctors less motivated to return your call or email you. Not to mention they do not have the time during their day to do this because of the exorbitant amount of paperwork/desktop work that they have to review. According to studies, it would take 21.7 hours/day for a primary care physician to provide all of the recommended acute, chronic and preventative care for a traditional family practice panel of 2500 patients (Medical Economics, "Considering a Direct Care Practice", March 31, 2022). There clearly is not enough time in a physician's day! Direct primary care doctors, on the other hand, have no problem talking with you or emailing you in a very expedient manner. There is no extra fee for them to do this either as this is part of the monthly membership.

**Complaint #5: Being badgered for your insurance card, HIPAA form, and copay before you can say hello to the receptionist.** This is the robotic system we have built to make the government and insurers happy. When your doctor and their staff know you, then there is no reason to ask these identifier questions when a "Hello, Mary, how are you today?" will do. When a doctor is not beholden to the insurance companies and the government, then your encounters are much more personal. This happens every day in direct primary care offices.

**Complaint #6: The physician is not conscious of the cost of the tests they are ordering or the medications they are prescribing.** Almost everyone has a high deductible plan now, and that means the first \$3,000 to \$6,000 comes out of your pocket. The doctor NEEDS to know what things cost because many patients won't get the medicine or the test if it is too costly. This is bad care. When your doctor has the time, they can look into these costs and help you make an informed decision and possibly even save you money. Direct primary care doctors do this for you and pass onto you significant direct pricing savings!

**Complaint #7: My doctor doesn't even know who I am or doesn't remember me.** With thousands of patients, your physician can't keep up with everyone. With 600 patients they can. That is the major difference between regular primary care offices and direct primary care offices.

**Complaint #8: The phone never stops ringing.** Right now, there can be three to five personnel per doctor who work in an office. Each has specific tasks such as answering the phones, doing paperwork, scheduling, battling with insurance companies and constant computer work. There is no end to the work, phone calls and insurance requirements. The doctors are frustrated, the staff is defeated, and patients become more annoyed and dissatisfied as they cannot get their needs met. It doesn't have to be this way. With direct primary care offices there are no insurance burdens, no billing, 75% less patients and a much quieter environment.

# Seven Costly Misconceptions About Primary Care

**Misconception #1: Primary care is simple, and any “provider” can do it.** Not true, at all.

Primary care doctors go to medical school after a four-year college degree. Medical schools only take the best of the best and even then, they try to weed out many students after the first year. After four brutal years in medical school, the newly graduated doctors will do an additional three years of a practice residency where they work up to 80 hours a week in clinical situations treating patients and learning. Why do they do this? Because it takes broad expertise and training to manage things in primary care. Anyone can give a patient a stack of costly referrals and order lots of expensive tests, but a primary care doctor needs to coordinate all aspects of their patients’ care in order to get a complete picture of their health care needs.

**Misconception #2: Primary care doctors are just gatekeepers who manage referrals but not real medical conditions.** Incorrect! A trained medical doctor will likely not refer out to specialists as a first course of treatment. They will work with the patient visit after visit to find an answer. Only when they feel they need help in treating you will your referral be made. This happens only about 10% of the time on average. It takes a smart and confident doctor to admit when they need help, and a good primary care doctor will do just that.

**Misconception #3: All medical care, including primary care, is expensive.** This is a myth. The right doctor who uses their well-trained eyes, ears, and brain to find a diagnosis is not costly. Most of the time expensive tests and lab work are not needed. When you work with a doctor and office that is cost conscious, like a direct primary practice, you will be amazed at the savings you will be receiving. Often things like procedures, cryotherapy, and joint injections are free, or a nominal cost, with your monthly membership fee.

**Misconception #4: If you don't use a doctor who takes your insurance, it will cost you a fortune.** Not true! You should not be letting insurance companies control which doctors you can see. When President Obama promised that if you like your doctor, you could keep your doctor, he wasn’t actually speaking the truth. However, there is some truth that people will pick a doctor “in-network” just because they think they will save money. The truth is that almost every visit will be \$100-\$150, plus a copay, with additional costs for any other tests (urine, strep, etc.). With a direct primary care doctor, your costs are fixed at a monthly rate and your labs are up to 90% reduced cost. You can and should still work through your insurance company and your direct primary care doctor, and in the end, you might just save yourself a lot of money.

**Misconception #5: I don’t need a primary care doctor. I can just Google my symptoms.** Wrong. Study after study has shown that the Internet is not the best place to get your answers. Most people find themselves in rabbit holes and get lost with an incorrect diagnosis. This delays you from getting treatment from a doctor who has been through four years of college, four years of medical school and three years of residency training. If you were able to access your doctor as easily as you can access the Internet, then you would probably go that route. That is called direct primary care.

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**Misconception #6: Urgent care centers are a convenient and an inexpensive alternative when my doctor is too busy to see me or is out of the office.** Not true! Urgent care centers may be convenient, but it is not better care. It is also not cheap. Patients are often referred to urgent care because their doctor has too many patients to care for. You will more than likely see a nurse practitioner, physician's assistant or possibly a physician. At urgent care centers they will often not know your medical history, which can contribute to fragmented care, and they generally do not communicate with your doctor about your health issues. It is not on the same level as seeing your own direct primary care doctor who knows you well.

**Misconception #7: Labs cost the same no matter which office you go to.** Incorrect! Some offices run their own labs in-house, or they own free standing laboratories. Many other offices outsource their labs by drawing blood and then sending the samples to companies like Quest or LabCorp. Those medical offices are charged a fee by Quest or LabCorp and then they charge you up to 10 times that amount to make a profit. If you have a large deductible, then that bill is out of your pocket. At a Direct Primary Care office, we pass the savings onto you through direct pricing. Often the price is up to a 90% less that your fee for service bill which results in a significant savings for you!

## Six Mistakes to Avoid When Choosing a Primary Care Doctor

**Mistake #1: Not getting an opinion about the doctor from friends or family or not checking out rating sites.** To be honest, not all ratings sites are worth any time at all. If you combine their information with what your friends and family are saying, then this information is very useful.

**Mistake #2: Not meeting your doctor first.** How do you know you are compatible with the person unless you meet them first? Sometimes personalities just do not connect and that may affect your relationship with the doctor and eventually your care. Most offices do not offer meet-and-greets because insurance companies do not pay for this service. Direct primary care offices encourage them.

**Mistake #3: Picking a doctor randomly from the list in the insurance company's network directory.** Doctors are on their list because they have agreed to a contract that includes pricing, bonuses, etc. Many of these doctors are fine but it in no way infers they are better than other doctors not on the list. Insurance companies have many reasons to put doctors on their list and most revolve around money. Rarely are they vetted to provide the highest quality of care.

**Mistake #4: Not picking a doctor at all but instead choosing a non-doctor such as a chiropractor, a naturopathic doctor, a physician assistant, or nurse practitioner and thinking they are a qualified substitute for your doctor.** You get what you pay for. Training and education do matter. MDs and DOs have the most training. This is not to say these other medical professionals do not have a role to play in healthcare, but they should not take the place of your primary care doctor.



**Mistake #5: Choosing a doctor who refers out for everything.** This includes other health care providers as well. A good primary care doctor should be able to handle 90% of everything they see. If you find that you are being referred every single time for what seems like simple symptoms, then it is time to find someone new.

**Mistake #6: Choosing a doctor who is burned out, overwhelmed, or just doesn't seem to care anymore.** If your doctor doesn't smile, remember you or interact with you, then it may be time to move on. Also, a doctor who is not interested in discussing treatment plans with you should make you suspicious. The system is chewing up and spitting out doctors at an alarming pace. Surveys show that most doctors would not have chosen their current career option if they had the chance to do it all over again. The results are just the opposite for direct primary care doctors.

## Five Errors to Avoid After You Have Picked Your Primary Care Doctor

**Error #1: Not seeing your doctor at least once yearly so they know you.** Your doctor is a teacher, coach, health mentor and advocate. Knowing you and your family is part of a greater relationship that will benefit you by keeping you healthy and getting you seen when you need to be seen. Sometimes it takes multiple visits to figure out a problem; that is the basis of the concept "continuity of care."

**Error #2: Assuming your lab or test results are normal if your doctor doesn't call or get back to you.** Never assume "no news is good news." One of the most common types of lawsuits is when doctors do not follow up on abnormal tests. When a doctor is responsible for a very large number of patients, it makes oversights more likely to occur. Direct primary care doctors carry only about 500-600 patients versus the up to 2,000 or more by other doctors. This makes it much easier for them to not miss things.

**Error #3: Being sick but holding back from going to see your doctor because you don't want to pay a copay and office visit fee.** This happens way too often and proves the point that health insurance is not health care. The problem is that the copays and office visit fees financially cripple you. With a direct primary care doctor, your fees are covered in your membership and patients normally see their doctor four to six times a year.

**Error #4: Agreeing to see another provider instead of your doctor.** Unless it is an emergency, try to see your doctor. There is a difference in having a well-trained doctor who has four years of medical school and three years of residency training versus those who have less training. It is also important to see YOUR doctor who knows you best.

**Error #5: Letting your doctor off the hook for not getting back to you with your questions.**

Doctors are overwhelmed. They have too many patients and are pushed to do bureaucratic tasks to satisfy insurance company mandates. Those things have nothing to do with your care. Your questions do matter and are critical to your health. If your doctor does not have time to answer them, then you should have no time for that doctor. In a Direct Primary Care practice, your care is their primary care!

## Ten Questions You Should Ask When Meeting a Doctor

1. Will I get to see you when I come in for an appointment?
2. How long will I have to wait to get an appointment?
3. Are you board certified? In what?
4. How long can I spend with you at each visit?
5. Will you be able to tell me how much things cost? For example, things like medications, procedures, x-rays, point of care tests, etc.?
6. How hard is it to talk to you during the day or after hours? Do you text or use email? Are you the one answering these messages?
7. Can I meet you first (without charge) and see if we're a good fit?
8. Will my information remain private, or will it be shared with the government, the electronic medical record company or anyone else?
9. Will you be my advocate when dealing with specialists or insurance companies?
10. Will you have to work on the computer during my entire visit?

## The Value of a Primary Care Physician

Price is what you pay. Value is what you get. When you select a primary care doctor you want to know who you are getting, right?

**First, you really need to know who is a primary care physician.** Don't be fooled by letters. MA, RN, LPN, PA, NP, MD, DO... who is a physician, who is a provider, who is a clinician, an assistant, a lab-tech, your neighbor? The assorted titles, names and abbreviations don't help anyone make any sense of their healthcare. Add to it the broad use of "clinician", "provider",

“practitioner”, “generalist” and no one really knows what they’re getting. Medical “provider” has taken on a broad range of meanings to include physicians, nurse practitioners, physician assistants and many other trained personnel. The degree of training and scope of practice differs substantially. A traditionally trained physician will always have either “MD” or “DO” after their name. Other people referred to as doctors in our culture may be those with PhD’s, nurse practitioners, chiropractors, dentists, or physician assistants. When most people say they need to go to the doctor, they are usually referring to seeing an MD or DO. And for good reason. MDs and DOs have much more education and training than any of the other groups.

**How are physicians trained?** After college and medical school, physicians go on to residency. Residency training is an intensive three years where physicians finalize their training and gain expertise in their specialty. This includes internal medicine, family medicine and pediatrics. If a physician stops their training after one year of residency, they are called a “generalist.” When a physician finishes residency, they often take the last of a long series of difficult exams called “the boards.” If a physician satisfactorily completes medical school, residency and all four of their certification exams, including the boards, they are called “board certified.” Assuring your physician is “board certified” is one way you can assure they have completed all the necessary training in their branch of medicine.

**Why do you need a primary care physician?** While we live in a DIY culture, and I am certainly a very independent and strong proponent of doing-it-yourself, there are a few things that people simply should not do on their own. We’ve all had an example in our lives of something we tried to do by ourselves and in the end, if we just would have hired a professional, we would have saved time, money, effort and suffered far less trouble! This includes coordination of your medical care. Your body and your health is your single best asset to securing you and your family’s future. Being proactive and taking wellness guidelines seriously will help you protect that asset for a very long time. This is why you need a primary care physician.

**What can a primary care physician do for you?** Primary care physicians can care for most people and most problems most of the time. In any one given day, they may do pap smears, discuss and treat depression, refill medications for blood pressure, remove suspicious moles and diagnose and treat pneumonia, amongst many other things. They epitomize the one-stop shop philosophy that can take care of most medical needs, most of the time. They act as your advocate, your advisor, and your coach. They can give you peace of mind by providing the great care you need.

**Why You May Want to Consider a Direct Primary Care Doctor** Direct Primary Care is enhanced and personalized healthcare without the interference of insurance companies. Using a membership model, you get unrestricted access to your doctor and most services for a monthly fee. No insurance is accepted or ever billed. This does not mean you don’t need insurance. You do for such things as hospitalizations and large procedures. Direct primary care doctors will work with your insurance to make these referrals just like any other primary care doctor. The only difference is that direct primary care doctors don’t have the burdensome paperwork and hoops to jump through any longer.

# Why Join a Direct Primary Care Practice?

1. Do you want more time with your doctor?
2. Do you want more proactive than reactive healthcare?
3. Do you miss old-fashioned healthcare when your doctor was more of a partner?
4. Do you want more access to your doctor when you need it?
5. Do you want to have a clear picture of your healthcare costs?
6. Do you want lower cost labs and testing options?
7. Do you want a nice office atmosphere where you can ask questions, the staff is smiling, and the doctor pays attention?

If the answer is “Yes,” to these questions, then Direct Primary Care is the solution!

## Great Care, Guaranteed

Most primary care doctors have too many patients as it is. They currently get paid per visit. Paying a doctor based upon unproven metrics like blood pressure, weight and cholesterol levels just means they may be more likely to prescribe a medication. That seems crazy. The one thing that will never be measured is TWP, or “time with patient.” Most doctors would dread this because they are too overwhelmed by paperwork and nonclinical issues. Add to this the thousands of patients on their panels and doctors are spending less and less time in the exam room. That is not good care. What makes it even worse is that when a patient transfers out of a practice there are 10 more patients waiting to get added. So, if a patient leaves the practice, the doctor often does not even realize it!

Direct Primary Care doctors know that you are spending your own money to have a membership in their practice. They understand how important it is for you to get in, to be seen for extended periods of time and to receive the attention you deserve. No one can guarantee medical outcomes, but direct primary care doctors can guarantee great care. This includes knowing their patients, seeing them regularly, calling or emailing them back and spending time with them.

If you leave a direct primary care doctor to transfer to someone else, they do take it personally because they understand how much effort went into that patient-doctor relationship and they want to learn how to make it better. Patient retention is critical for a successful DPC practice and each DPC doctor strives to give great care. That being said, if patients feel they are not getting what they signed up for, then there is no penalty or fee for leaving. In other words, there is no locked-in yearly contract. Why do DPC doctors do this? Because they believe that “time with patients” is what makes them different and makes their care great. Guaranteed!

# Nine Steps to Optimizing Your Health

1. See your doctor regularly - not only for your yearly physical but also to check your labs regularly and discuss wellness and lifestyle changes.
2. Eat healthy - consider low carbohydrate diets like Paleo or whole food plant-based diet with tons of vegetables
3. Physical Activity and Movement - incorporate both cardio and strength training, five days a week. Don't forget to work on stretching, flexibility and balance.
4. Sleep better - work on getting at least seven hours of sleep a night. Create a healthy sleep routine. Bad sleep negatively impacts our health and our ability to function.
5. Drink enough water - we are like batteries and if your car battery had no water, it would not work and neither will you.
6. Get some sun - yes, sun. Not a burn, just 10-15 minutes a day without sunscreen, several days a week
7. Laugh, smile, and socialize with friends - face to face connections are vital to our well being.
8. Be present and available - don't multi task. Stop, listen and engage with those around you. Pause and listen to what your own body is telling you. Learn to be mindful and take time to exhale and relax.
9. Think positively - about yourself, about others and your circumstances. Positive emotions, positive self talk and the attitude of gratitude impact our well-being. Learn to laugh a little bit more!

We hope that you found this Consumer Guide to Primary Care helpful. By following these recommendations, you should gain much of the information you need to make an informed intelligent decision.

If you are satisfied with quick and uninspired medical visits where you get very few answers and often do not see your own doctor, then there are many offices and urgent care centers that can treat you.



However, if you want a trusted doctor who will spend time with you, who will stay in touch with you and who will advocate on your behalf, then we invite you to call us.

Dr. Castor spends much of her time at Integra Direct Primary Care going over these issues with you because she understands that your care needs to be personalized.

We've dedicated our medical practice to patient education and service. We are always here, always available. Your care is our primary care.

To your good health,



Belinda L. Castor, MD  
Integra Direct Primary Care

If you have any questions or would like schedule a complimentary “meet-and-greet” with Dr. Castor, please call us at 603-716-5533 or visit our website [www.integradpc.com](http://www.integradpc.com).



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