



HOUSE BILL 471: Exempt Direct Primary Care from DOI Regs.

2019-2020 General Assembly

Committee: Senate Rules and Operations of the Senate	Date: May 28, 2020
Introduced by: Reps. Hardister, White, Dobson, Adcock	Prepared by: Jason Moran-Bates
Analysis of: Second Edition	Committee Staff

OVERVIEW: *House Bill 471 would clarify that medical direct primary care agreements are not subject to the provisions of Chapter 58 (Insurance) and establish standards for medical direct primary care agreements.*

CURRENT LAW: Medical direct primary care agreements are currently not regulated by the Department of Insurance. There are no requirements for what must be included in a medical direct primary care agreement.

BILL ANALYSIS: House Bill 471 would define the terms "medical direct primary care," "primary care provider," and "primary care service." It would also clarify that medical direct primary care agreements are not insurance and are not subject to the provisions of Chapter 58. Finally, it would require that medical direct primary care agreements do all of the following:

- Be in writing.
- Be signed by the parties to the agreement.
- Allow either party to terminate the agreement with written notice to the other party.
- Specify the periodic fee for the agreement.
- Specify the primary care services that are included in the agreement.
- Specify the term of the agreement.
- Include a prominent statement that the agreement is not health insurance.

EFFECTIVE DATE: This bill would be effective when it becomes law.

BACKGROUND: Direct primary care is a method of providing health care where the patient pays a monthly or annual fee to a primary care provider that covers all or most primary care services the patient may need during the time period covered by the fee, including clinical and laboratory services. Currently, 32 states have laws on direct primary care.

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