

Direct Primary Care FAQ's

What is "Direct Primary Care"?

Endorsed by the American Academy of Family Practice, Direct Primary Care affords you enhanced access to your family practice care team for a flat monthly fee. You will have a direct relationship with your physician and direct contact through office visits, email, telephone, and virtual technologies.

How is Direct Primary Care different from what I have now?

A traditional family physician typically manages a practice of 2500 or more patients. In the Direct Primary Care model, the practice is limited to between 600-800 patients per provider, which allows them to spend more time with each patient. Office visits are typically 30 minutes or longer and can be scheduled same day or next day according to your needs.

Unlike the primary care you experience now, Direct Primary Care clinics do not bill you for every service you receive, nor do they accept insurance for the services provided. Instead, you pay a flat monthly fee (\$80/month for an individual), which covers all office visits, in-office procedures and services as well as giving you access to the care team when you need them.

What makes this better for me?

Our physician and care team are not paid per appointment, which means they have more time to spend with you. Ultimately, direct primary care provides more individualized care that can also save time and money.

What about my insurance?

Direct Primary Care eliminates the need for insurance for this level of care. There are no co-pays, no deductibles and no hidden fees. The monthly flat fees are more predictable financially and go directly to the practice.

By eliminating the practice of billing for every service performed, the care team can focus solely on the patient-physician relationship and develop an individualized health plan for each person and/or family. By freeing up time and reducing costs, we can focus on your well-being.

Do I still need health insurance?

Yes, by all means keep your insurance to cover specialty care, hospitalizations, high-cost imaging, medications and true emergencies. Plans that work best with Direct Primary Care include catastrophic plans, high deductible plans, and PPO plans. You may want to review your insurance plan options during open enrollment periods to see if you can lower your costs with one of the above mentioned plan options.

All of your care team encounters are covered, whether they are for preventative services, illness, injury or management of ongoing medical conditions. This includes:

- All in-office x-rays
- Procedures such as stitches for cuts, mole / lesion removal or routine injections done in a primary care setting
- In-office labs such as urinalysis, blood count, strep, mono and influenza testing
- The common/usual labs primary care providers request are also covered

What is covered with a Direct Primary Care membership?

Access to Virtual Care and limited Quick Care visits will be available free for after hour care. We work with our CHI Retail Pharmacies to provide low cost or no cost medications and over the counter medications for the common conditions we treat. At this time routine immunizations are not covered but may be filled or administered at our retail pharmacy.

Can I sign up if I'm on Medicare?

Medicare A&B does not allow for DPC participation. Medicare Advantage does allow for DPC participation.

Can I use my HSA funds to pay my membership fees?

No. Federal law prohibits using HSA funds for Direct Primary Care, but new laws have been presented to make membership fees allowable HSA expenses. Until the current law is changed, however, HSA funds cannot be used to pay Direct Primary Care fees.

What happens if I need to go into the hospital?

We will continue using our CHI Health Hospitalist program for your hospital needs. We also will continue to coordinate care between hospitals and specialists. Your insurance plan should be used for specialty and hospital care.

How do I access care after hours, what is covered

We strive to address your needs, questions, and refills during office hours, but recognize situations arise that require after hours care. We have teamed up with Virtual Care services & Quick Care to provide you after-hours non-emergency care. If you have a concern that needs addressed, but don't necessarily need to be seen, a member of your healthcare team will be available to communicate with you afterhours. Although we want to avoid unnecessary trips to Emergency, if you are experiencing a true medical emergency, please call to 911 or go directly to Emergency.

Can I use Direct Primary Care for my business?

Yes, it makes economic sense to provide a **Direct Primary Care** membership and a wraparound insurance plan for all other healthcare services. We can set up a monthly payment plan if interested.

Can children or families sign up for Direct Primary Care

Yes, children can sign up as long as one parent is also a Direct Primary Care member. Coverage of a child could extend until the 26th birthday. There is a cost-effective tiered system for individuals, couples and family memberships.

How do I sign up?

You can sign up for your Direct Primary Care membership by visiting CHIHealth.com/DirectPrimaryCare

Monthly Membership Pricing

Single Member - \$80/month

Member + Spouse - \$120/month

Member + Child(ren)* - \$150/month

Family* - \$175/month

*includes up to three (3) children.

Additional children \$20/month
