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Date: (Filing No. S-)

INSURANCE AND FINANCIAL SERVICES

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**STATE OF MAINE
SENATE
128TH LEGISLATURE
FIRST REGULAR SESSION**

COMMITTEE AMENDMENT “ ” to S.P. 472, L.D. 1385, Bill, “An Act Governing Direct Primary Care Membership Agreements”

Amend the bill by striking out the title and substituting the following:

'An Act Governing Direct Primary Care Service Agreements'

Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

'Sec. 1. 22 MRSA c. 403-A is enacted to read:

CHAPTER 403-A

DIRECT PRIMARY CARE SERVICE AGREEMENTS

§1771. Direct primary care service agreements

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Direct primary care service agreement" means a contractual agreement between a direct primary care provider and an individual patient, or the patient's legal representative, in which:

(1) The direct primary care provider agrees to provide primary care services to the individual patient for an agreed-to fee over an agreed-to period of time; and

(2) The direct primary care provider agrees not to bill 3rd parties on a fee-for-service or capitated basis for services already covered in the direct primary care service agreement.

B. "Direct primary care provider" means an individual who is a licensed physician or osteopathic physician or other advanced health care practitioner who is authorized to engage in independent medical practice in this State, who is qualified to provide primary care services and who chooses to practice direct primary care by entering

COMMITTEE AMENDMENT

1 into a direct primary care service agreement with patients. The term includes, but is
2 not limited to, an individual primary care provider or a group of primary care
3 providers.

4 C. "Primary care" means outpatient, nonspecialty health care services or the
5 coordination of health care for the purpose of:

6 (1) Promoting or maintaining mental and physical health and wellness; and

7 (2) The diagnosis, treatment or management of acute or chronic conditions
8 caused by disease, injury or illness.

9 **2. Not insurance.** A direct primary care service agreement is not an insurance
10 policy and is not subject to regulation by the Department of Professional and Financial
11 Regulation, Bureau of Insurance.

12 **3. Ability to contract.** A direct primary care service agreement is an agreement
13 between the direct primary care provider and either an individual or the individual's
14 representative, regardless of whether the periodic fee or other fees are paid by the
15 individual, the individual's representative or a 3rd party.

16 **4. Covered services.** A direct primary care service agreement covers only the
17 services specified in the agreement. Any goods or services that are not covered by the
18 direct primary care service agreement may be billed separately.

19 **5. Disclosure.** A direct primary care service agreement must clearly state within the
20 agreement that direct primary care services are not considered health insurance and do
21 not meet requirements of any federal law mandating individuals to purchase health
22 insurance and that the fees charged in the agreement may not be reimbursed or apply
23 towards a deductible under a health insurance policy with an insurer.

24 **6. Other care not prohibited.** A primary care provider is considered a direct
25 primary care provider only when the provider is engaged in a direct primary care service
26 agreement with a patient or group of patients. A primary care provider is not prohibited
27 from providing care to other patients under a separate agreement or contract with an
28 insurer.

29 **7. Other agreements not prohibited.** This section does not prohibit a direct
30 primary care provider from entering into:

31 A. An agreement with an insurer offering a policy specifically designed to
32 supplement a direct primary care service agreement; or

33 B. A pilot program for direct primary care with a federal or state agency that
34 provides health coverage.'

35 **SUMMARY**

36 This amendment replaces the bill. The amendment provides that a direct primary
37 care service agreement is not insurance and is not subject to regulation by the Department
38 of Professional and Financial Regulation, Bureau of Insurance. A direct primary care
39 service agreement is defined as a contract between a direct primary care provider and an
40 individual patient or legal representative of a patient in which the provider agrees to

1 provide primary care services to the individual patient for an agreed-to fee over an
2 agreed-to period of time and the provider agrees not to bill 3rd parties on a fee-for-service
3 or capitated basis. The amendment also clarifies that a direct primary care provider is not
4 prohibited from entering into an agreement with an insurer offering a policy specifically
5 designed to supplement a direct primary care service agreement or from entering into a
6 pilot program for direct primary care with a federal or state agency that provides health
7 coverage.