HOUSE FILE 2356 BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO HF 2275)

A BILL FOR

- 1 An Act relating to agreements between individuals and health
- 2 care professionals for the provision of certain primary care
- 3 health services for a service charge that covers an agreed
- 4 upon period of time.
- 5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. <u>NEW SECTION</u>. 135N.1 Direct primary care
2 agreements.

3 1. Definitions. For the purpose of this section:
4 a. "Direct patient" means an individual, or an individual
5 and the individual's immediate family, that is party to a
6 direct primary care agreement.

b. "Direct patient's representative" means a parent,
guardian, or an individual holding a durable power of attorney
for health care for a direct patient.

"Direct primary care agreement" means an agreement 10 C. 11 between a direct provider and a direct patient, or the direct 12 patient's representative, in which the direct provider agrees 13 to provide primary care health services for a specified period 14 of time to the direct patient for a direct service charge. "Direct provider" means a health care professional 15 đ. 16 licensed, accredited, registered, or certified to perform 17 specified primary care health services consistent with the law 18 of this state. "Direct provider" includes an individual health 19 care professional or other legal health care entity alone or 20 with other health care professionals professionally associated 21 with the individual health care professional or other legal 22 health care entity.

e. "Direct service charge" means a charge for primary care
health services provided by a direct provider to a direct
patient covered by a direct primary care agreement. "Direct *service charge*" may include a periodic retainer, a membership
fee, a subscription fee, or a charge in any other form paid by
a direct patient to a direct provider under a direct primary
care agreement.

30 *f.* "Durable power of attorney for health care" means the same 31 as defined in section 144B.1.

32 g. "Primary care health services" means general health care 33 services of the type provided at the time a patient seeks 34 preventive care or first seeks health care services for a 35 specific health concern. Primary care health services include

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1 all of the following:

2 (1) Care which promotes and maintains mental and physical3 health and wellness.

4 (2) Care which prevents disease.

5 (3) Screening, diagnosing, and treatment of acute or 6 chronic conditions caused by disease, injury, or illness.

7 (4) Patient counseling and education.

8 (5) Provision of a broad spectrum of preventive and curative9 health care over a period of time.

10 (6) Coordination of care.

11 2. Requirements for a valid direct primary care agreement.

12 a. In order to be a valid agreement, a direct primary care 13 agreement must meet all of the following requirements:

14 (1) Be in writing.

15 (2) Be signed by the direct provider, or an agent of the 16 direct provider, and the direct patient or the direct patient's 17 representative.

18 (3) Describe the scope of the primary care health services19 covered by the direct primary care agreement.

(4) State each of the direct provider's locations where
a direct patient may obtain primary care health services and
specify any out-of-office primary care health services that are
covered under the direct primary care agreement.

(5) Specify the direct service charge and the frequency
25 at which the direct service charge must be paid by the direct
26 patient. A direct patient shall not be required to pay more
27 than twelve months of a direct service charge in advance.

(6) Specify any additional costs for primary care health
services not covered by the direct service charge for which the
direct patient will be responsible.

31 (7) Specify the duration of the direct primary care 32 agreement, whether renewal is automatic, and if required the 33 procedure for renewal of the direct primary care agreement. 34 (8) Specify the terms and conditions under which the 35 direct primary care agreement may be terminated by the

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1 direct provider. A termination of the direct primary care 2 agreement by the direct provider shall include a minimum of 3 a thirty-calendar-day advance, written notice to the direct 4 patient or to the direct patient's representative.

5 (9) Specify that the direct primary care agreement may 6 be terminated at any time by the direct patient upon written 7 notice to the direct provider.

8 (10) State that if the direct primary care agreement is9 terminated by either the direct patient or the direct provider10 all of the following apply:

11 (a) Within thirty calendar days of the date of the notice of 12 termination from either party, the direct provider shall refund 13 all unearned direct service charges to the direct patient.

14 (b) Within thirty calendar days of the date of the notice 15 of termination from either party, the direct patient shall pay 16 all outstanding earned direct service charges to the direct 17 provider.

18 (11) Include a notice in bold, twelve-point font that states
19 substantially as follows:

NOTICE. This direct primary care agreement is not health insurance and is not a plan that provides health coverage for purposes of any federal mandates. This direct primary care agreement only covers the primary care health services described in this agreement. It is recommended that you obtain health insurance to cover health care services not covered under this direct primary care agreement. You are personally responsible for the payment of any additional health care services you may incur.

b. The direct provider shall provide the direct patient, or the direct patient's representative, with a fully executed copy of the direct primary care agreement at the time the direct primary care agreement is executed.

33 3. Application for a direct primary care agreement. If 34 a direct provider requires a prospective direct patient to 35 complete an application for a direct primary care agreement,

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1 the direct provider shall provide a written disclaimer on each 2 application that informs the prospective direct patient of the 3 direct patient's financial rights and responsibilities and 4 that states that the direct provider will not bill a health 5 insurance carrier for primary care health services covered 6 under the direct primary care agreement. The disclaimer shall 7 also include the identical notice required by subsection 2, 8 paragraph "a", subparagraph (11).

9 4. Notice required for changes to the terms or conditions of 10 a direct primary care agreement.

11 a. A direct provider shall provide at least a 12 sixty-calendar-day advance, written notice to a direct patient 13 of any of the following changes to a direct primary care 14 agreement:

15 (1) Any change in the scope of the primary care health 16 services covered under the agreement.

17 (2) Any change in the direct provider's locations where the18 direct patient may access primary care health services.

19 (3) Any change in the out-of-office services that are 20 covered under the direct primary care service agreement.

21 (4) Any change in the direct service charge.

(5) Any change in the additional costs for primary carehealth services not covered by the direct service charge.

24 (6) Any change in the renewal terms.

(7) Any change in the terms to terminate the agreement. *b.* A direct provider shall provide the notice by mailing
a letter to the address of the direct patient that the direct
provider has on file. The postmark date on the letter shall be
the first day of the required sixty-calendar-day notice period. *Discrimination based on an individual's health status.* A
direct provider shall not refuse to accept a new direct patient
or discontinue care of an existing direct patient based solely
on the new direct patient's or the existing direct patient's

35 6. A direct primary care agreement is not insurance.

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a. A direct primary care agreement is not insurance and
 shall not be subject to the authority of the commissioner of
 insurance. Neither a direct care provider, nor an agent of
 a direct care provider, shall be required to be licensed by
 the commissioner to transact the business of insurance in this
 state or to obtain a certificate issued by the commissioner to
 market or offer a direct primary care agreement.

8 b. A direct provider shall not bill an insurer for a service 9 provided under a direct primary care agreement. A direct 10 patient may submit a request for reimbursement to an insurer if 11 permitted under the direct patient's policy of insurance. This 12 paragraph does not prohibit a direct provider from billing a 13 direct patient's insurance for a service provided to the direct 14 patient by the direct provider that is not provided under the 15 direct primary care agreement.

Third-party payment of a direct service charge. A direct 16 7. 17 provider may accept payment of a direct service charge for 18 a direct patient either directly or indirectly from a third 19 party. A direct provider may accept all or part of a direct 20 service charge paid by an employer on behalf of an employee who 21 is a direct patient of the direct provider. A direct provider 22 shall not enter directly into an agreement with an employer 23 relating to a direct primary care agreement between the direct 24 provider and employees of the employer, other than an agreement 25 to establish the timing and method of the payment of a direct 26 service charge paid by the employer on behalf of the employee. 8. Sale or transfer of a direct primary care agreement. 27 Α 28 direct primary care agreement shall not be sold or transferred 29 by a direct care provider without the prior written consent 30 of the direct patient who is a party to the direct primary 31 care agreement. A direct patient shall not sell or transfer a 32 direct primary care agreement to which the direct patient is a 33 party.

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EXPLANATION

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The inclusion of this explanation does not constitute agreement with

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the explanation's substance by the members of the general assembly.

2 This bill relates to agreements between individuals and 3 health care professionals for the provision of certain primary 4 care health services for a service charge that covers an agreed 5 upon period of time.

6 The bill defines a direct primary care agreement as an 7 agreement between a direct provider and a direct patient, 8 or the direct patient's representative, in which the direct 9 provider agrees to provide primary care health services to 10 the direct patient for a direct service charge for the period 11 of time designated in the agreement. A direct patient is an 12 individual, or an individual and the individual's immediate 13 family. A direct provider is defined in the bill. A direct 14 service charge is a charge for primary care health services, as 15 defined in the bill, provided by a direct provider to a direct 16 patient and may include a periodic retainer, a membership fee, 17 a subscription fee, or other charge paid by a direct patient to 18 a direct provider.

19 The bill requires that a direct primary care agreement must 20 be in writing, must be signed by the direct provider and the 21 direct patient, must describe the scope of the primary care 22 health services included under the agreement, must state each 23 direct provider location where primary care health services may 24 be obtained by a direct patient, must specify any out-of-office 25 services that are included under the agreement, must specify 26 the direct service charge and how often it must be paid, must 27 specify any additional costs that may be assessed to the direct 28 patient for primary care health services not covered by the 29 direct service charge, and it must specify the duration of the 30 direct primary care agreement and how the agreement is renewed. The bill requires that the terms and conditions for 31 32 termination of the direct primary care agreement by the direct 33 provider or the direct patient be included in the agreement.

The bill requires that a notice be included on the direct primary care agreement and application that advises that the

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LSB 5639HV (1) 87 ko/rj 1 agreement is not health insurance and is not a plan that 2 provides health coverage for purposes of any federal mandates. 3 The notice advises that the agreement only covers the primary 4 care health services described in the agreement and recommends 5 that the direct patient obtain health insurance to cover other 6 health care services as the patient is responsible for all 7 additional expenses incurred.

8 A direct provider shall give a copy of the executed direct 9 primary care agreement to the direct patient.

10 The bill requires a direct provider to give at least 11 a 60-calendar-day advance, written notice to an existing 12 direct patient of changes, as outlined in the bill, to a 13 direct primary care service agreement. A direct provider is 14 prohibited from refusing to accept a new direct patient or 15 discontinuing care for an existing direct patient based solely 16 on the patient's health status.

17 The bill provides that a direct primary care agreement 18 is not insurance and is not subject to the authority of the 19 commissioner of insurance. A direct care provider is not 20 required to be licensed by the commissioner to transact the 21 business of insurance in this state, or to obtain a certificate 22 issued by the commissioner to market or offer a direct primary 23 care agreement.

The bill prohibits a direct provider from billing an insurer for services provided under a direct primary care agreement. A direct patient may submit a request for reimbursement to an insurer if permitted under the direct patient's policy of insurance. A direct provider may bill a direct patient's insurance for services provided by the direct provider that are not provided under a direct primary care agreement.

A direct provider may accept payment of a direct service charge for a direct patient either directly or indirectly from a third party. A direct provider may accept all or part of a direct service charge paid by an employer on behalf of an semployee but may not enter directly into an agreement with an

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1 employer relating to a direct primary care agreement between
2 the direct provider and employees of that employer.

3 The bill allows a direct provider to sell or transfer a 4 primary care agreement with the prior written consent of the 5 direct patient. A direct patient shall not sell or transfer a 6 direct primary care agreement.

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