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CS FOR HOUSE BILL NO. 92()

IN THE LEGISLATURE OF THE STATE OF ALASKA

THIRTY-FIRST LEGISLATURE - FIRST SESSION

BY

**Offered:
Referred:**

Sponsor(s): REPRESENTATIVE JOHNSTON

A BILL

FOR AN ACT ENTITLED

"An Act relating to insurance; relating to direct primary care agreements for health care; and relating to the Alaska Unfair Trade Practices and Consumer Protection Act."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

*** Section 1.** AS 21.03 is amended by adding a new section to read:

Sec. 21.03.031. Direct primary care agreements. (a) This title does not apply to a direct primary care agreement. A direct primary care agreement is a written health care agreement between a health care provider and an individual patient or the patient's representative that

(1) describes the primary health care services to be provided by the health care provider to the patient in exchange for payment of a periodic fee;

(2) allows the health care provider or the patient to terminate the agreement in writing, without penalty or payment of a termination fee, at any time or after notice of not more than 60 days, as specified in the agreement;

(3) specifies the periodic fee the patient must pay for the primary

health care services and any additional fee that the health care provider may charge; the agreement may allow an individual who is not the patient to pay the periodic fee or additional fees;

(4) conspicuously states that the agreement is not health insurance and does not meet an individual or other health insurance mandate that may be required by federal or state law;

(5) is written in a font not smaller than 12 points and in plain language that an individual with no medical training can understand; and

(6) prohibits the health care provider from charging or receiving compensation in addition to the fees described in this subsection for the primary health care services included in the agreement.

(b) A direct primary care agreement is subject to consumer protection statutes and regulations, including AS 45.45.915.

(c) Not later than September 1 of each year, a health care provider that enters into direct primary care agreements with patients shall file with the division, in the form prescribed by the division, a report relating to direct primary care agreements entered into or maintained by the provider's health care practice in the preceding calendar year. The report must include

(1) the number of health care providers in the health care practice;

(2) the number of direct primary care patients the health care practice has the capacity to serve;

(3) the number of patients who entered into or maintained a direct primary care agreement with the health care practice in the preceding calendar year and the periodic fee paid by each patient under the direct primary care agreement; and

(4) other information requested by the division.

(d) In this section,

(1) "health care" means care, treatment, a service, or a procedure to maintain, diagnose, detect, manage, or promote an individual's physical or mental condition;

(2) "health care practice" means a business that provides health care services;

(3) "health care provider" means a medical clinic, a medical office, or a person who is licensed, registered, or otherwise authorized under AS 08 to provide health care services or an employee of that person acting within the course and scope of employment.

* **Sec. 2.** AS 45.45 is amended by adding a new section to read:

Sec. 45.45.915. Direct primary care agreement for health care. (a) A health care provider that provides direct primary care agreements to patients

(1) may not terminate a direct primary care agreement with an existing patient or decline to enter into a direct primary care agreement with a new patient solely because of the patient's health status;

(2) may decline to enter into a direct primary care agreement with a new patient if the health care provider

(A) has direct primary care agreements with the maximum number of direct primary care patients the health care provider can serve; or

(B) is unable to provide to the patient the level or type of care the patient requires for a medical condition.

(b) In this section,

(1) "direct primary care agreement" means an agreement described in AS 21.03.031;

(2) "health care provider" has the meaning given in AS 21.03.031(d).

* **Sec. 3.** AS 45.50.471(b) is amended by adding a new paragraph to read:

(58) violating AS 45.45.915 (direct primary care agreement for health care).