www.dpcare.org

For further information contact:

Jay Keese

Executive Director,

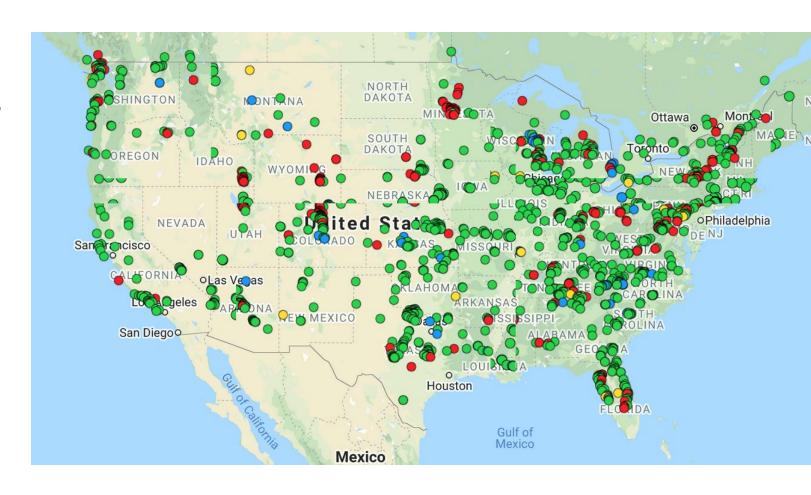
(202) 669-4061

jpkeese@cagdc.com



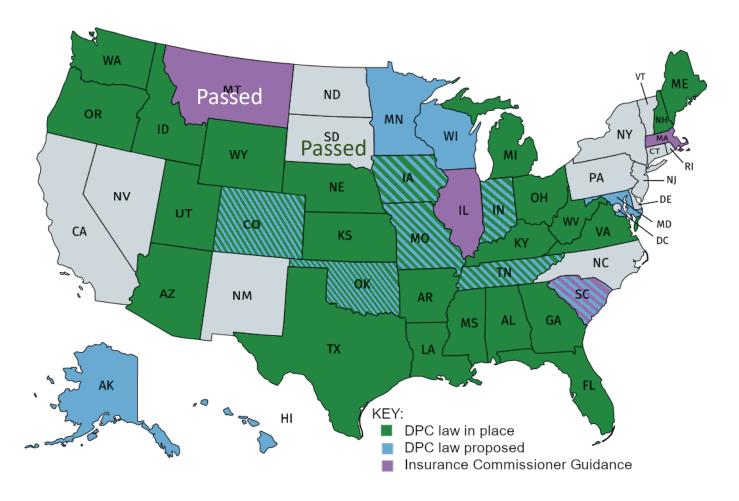
- Capitated Monthly Fee Payment model
- Personal relationship with primary care physician
- Care delivered in any setting virtual, telehealth, at home, in-person
- Innovative, affordable, value-based monthly payment model
- Over 1,400 practices nationwide
- Bipartisan Legislative History:
 - Defined in ACA Section 1301 (a) (3)
 - 30 + Bipartisan State Laws and Regulations
 - CMS Innovation Center to demo Direct Contracting in Medicare
 - Presidential Executive Order 13877
 - IRS Proposed Rule 2020 12213
 - Primary Care Enhancement Act:
 S. 2999 Cassidy HR 3707 Blumenauer passed House in 2018, Included in original CARES Act

Status of Direct Primary Care in 2021





DPC Laws/Regs Passed in 34 States



- Laws generally define DPC as a medical service outside of state insurance regulation, offer consumer protections *Key*:
 - DPC Laws passed signed by governor.
 - Solid regulatory guidance.
 - 12 DPC bills introduced or pending Feb. 2020.
 - 6 to expand to state employees (IN,TN) or Medicaid (CO, MO, OK, IA)

- Washington <u>48-150 RCW</u>
- 2. Utah UT 31A-4-106.5
- 3. Oregon ORS 735.500
- 4. West Virginia WV-16-2J-1
- 5. Arizona <u>AZ 20-123</u>
- 6. Louisiana LA Act 867
- 7. Michigan <u>PA-0522-14</u>
- 8. Mississippi SB 2687
- 9. Idaho <u>SB 1062</u>
- 10. Oklahoma <u>SB 560</u>
- 11. Missouri <u>HB 769</u>
- 12. Kansas <u>HB 2225</u>
- 13. Texas <u>HB 1945</u>
- 14. Nebraska Legislative Bill 817
- 15. Tennessee <u>SB 2443</u>
- 16. Wyoming <u>SF0049</u>
- 17. Arkansas HB 1161
- 18. Kentucky <u>SB 79</u>
- 19. Colorado <u>HB 17-1115</u>
- 20. Indiana <u>SB 303</u>
- 21. Virginia <u>HB 2053</u>
- 22. Alabama <u>SB 94</u>
- 23. Maine <u>S.P. 472</u>
- 24. Florida <u>HB 37</u>
- 25. lowa HF 2356
- 26. Georgia <u>SB-18</u>
- 27. New Hampshire HB508
- 28. Ohio <u>HB166</u>



DPC Reduces Overall Cost of Care



25.4 % reduction in total claims costs** **4.7**% reduction in risk scores



ER Visits down **53**%***
Advanced Radiology down **66**%
Surgeries down **77**%





Hospital admission down **33**% *
Specialist visits down **43**%
Non-MD Specialists down **39**%
Primary care visits up **133**%



12% reduction from baseline HBA1C

Up to 41% reduction in cost of care for chronically ill patients
Increased compliance for preventive screenings

Why?

- More primary care utilization
- Reduction in specialty care /hospitalization
- Reduced overall health costs
- Reduced out of pocket costs for consumers
- Predictable fixed costs for employers/payers
- Significantly reduced administrative costs
 no claims, no disputes, no appeals
 - Data Sources:

^{***} Journal American Board of Family Medicine, Nov. 2015

– Qliance employer claims data set 2011-13



^{*} Iora Dartmouth Health Connect Study June 2016

^{**} Nextera/Digital Globe Case Study June 1 - Dec. 31, 2015

DPC is associated with a reduction in overall member demand for health care services outside primary care:

- 19.90% lower claim costs for employers 40% fewer ER visits that those in traditional plans.53.6% reduction in ER claims cost.
- 25.54% lower hospital admissions on an unadjusted basis.

Virtual Care and Telehealth are at the core of DPC service offerings:

- 99% of all DPC practices surveyed were doing virtual consults via text/phone as a part of the membership fee (two years prior to COVID-19).
- 88% said they provided "telemedicine" benefits (meaning expanded video or additional digital communications assets).

DPC is Affordable Primary Care

- The average adult monthly DPC Fee is \$73.92.
- Median age for DPC patient was 31.8 years old
- Concierge patients in MDVIP membership \$1,650 -\$2,200 annual membership fee MDVIP also bills thirdparty payers for all services provided to members.















DPC Reduces Patient Out of Pocket Costs: Prescription Drugs, Labs, Procedures



Lab Test	Retail Cost		Core FP	
Basic Metabolic Panel	\$	44.00	\$	5.43
CBC W/Diff and Plt	\$	40.56	\$	5.53
Comprehensive Metabolic Panel	\$	51.00	\$	6.79
Ferritin	\$	73.00	\$	11.95
hemoglobin A1c	\$	48.00	\$	9.63
Hepatic Function Panel	\$	42.00	\$	5.20
Iron, Total	\$	35.00	\$	3.22
Lipid Panel	\$	70.00	\$	9.00
microalbuminuria/cre ratio	\$	166.00	\$	29.91
PSA, Total	\$	92.00	\$	14.13
PT/INR	\$	22.00	\$	8.95
TSH	\$	85.00	\$	10.27
Urine Culture	\$	42.00	\$	15.86

	0					_		
	Hepatic Function Panel		\$	42.0	0	\$	5.2	0
	Iron, Total		\$	35.0	0	\$	3.2	2
	Lipid Panel		\$	70.0	0	\$	9.0	0
m	icroalbuminuria/cre ratio		\$	166.0	0	\$	29.9	1
	PSA, Total		\$	92.0	0	\$	14.1	3
	PT/INR		\$	22.0	0	\$	8.9	5
	TSH		\$	85.0	0	\$	10.2	7
	Urine Culture		\$	42.0	0	\$	15.8	6
	Procedures Retail		il Cost	Č	ore	FP Cost		
	EKG	\$		60.00		Inc	luded	
								1

CORE FAMILY PRACTICE DIRECT PRIMARY CARE	

	EKG	\$ 60.00	Included
	Lesion Removal: Skin		
	tags, moles, etc.	\$ 160.00	Included
TO T	Incision & Drainage	\$ 195.00	Included
	Pulse Ox	\$ 10.00	Included
	Breathing Treatment	\$ 40.00	Included
and to	Laceration Repair	\$ 250.00	Included
	Cryotherapy	\$ 180.00	Included
	Ear Wash	\$ 110.00	Included
	Suture Removal	\$ 85.00	Included
	Vision & Hearing		
	screens	\$ 30.00	Included
	Blood sugar testing	\$ 10.00	Included
	Rapid Strep	\$ 33.00	Included
	Urinalysis	\$ 28.00	Included

Generic Drug Name	Brand Name	Pill#	Prescription Cost (Based on local GoodRX cash pricing)	Core FP Cost
AMLODIPINE BESYLATE 5MG	Norvasc	30	\$ 20.00	\$ 4.80
AMLODIPINE/BENAZEPRIL 5-10MG	Lotrel	30	\$ 40.00	\$ 12.00
AMOXICILL CLAV ACID 875/125MG	Augmentin	20	\$ 45.00	\$ 10.00
AMOXICILLIN 500MG		20	\$ 10.00	\$ 4.80
ATORVASTATIN CALCIUM 20MG	Lipitor	30	\$ 24.00	\$ 4.80
AZITHROMYCIN 250MG	Z-Pack	6	\$ 17.00	\$ 5.00
BUPROPION HCL SR 150MG	Wellbutrin	60	\$ 42.00	\$ 10.20
CEPHALEXIN 500MG	Keflex	30	\$ 21.00	\$ 4.80
CETIRIZINE 10MG	Zyrtec	30	\$ 13.00	\$ 4.80
CIPROFLOXACIN HCL 250MG	Cipro	14	\$ 34.00	\$ 4.90
CITALOPRAM HYDROBROMIDE 20MG	Celexa	30	\$ 20.00	\$ 4.80
CLOPIDOGREL BISULFATE 75MG	Plavix	30	\$ 25.00	\$ 5.10
DULOXETINE HCL DR 60MG	Cymbalta	30	\$ 20.00	\$ 10.00
ESCITALOPRAM 10MG	Lexapro	30	\$ 113.00	\$ 4.80
FUROSEMIDE 20 MG	Lasix	30	\$ 12.00	\$ 2.40
GABAPENTIN 300MG	Neurontin	90	\$ 83.00	\$ 7.20
GLIMEPIRIDE 1MG	Amaryl	30	\$ 12.00	\$ 4.80
GLIPIZIDE 10MG	Glucotrol XL	30	\$ 26.00	\$ 4.80
HYDROCHLOROTHIAZIDE 25MG	Microzide	30	\$ 12.00	\$ 2.40
IBUPROFEN 800MG	Motrin	30	\$ 12.00	\$ 3.60
LEVOFLOXACIN 500MG	Levaquin	10	\$ 18.00	\$ 4.80
LISINOPRIL 10MG	Zestril	30	\$ 13.00	\$ 2.40
LISINOPRIL HCTZ 20/12.5MG	Zestoretic/Prinzide	30	\$ 22.00	\$ 4.80
LOSARTAN POTASSIUM 50MG	Cozaar	30	\$ 15.00	\$ 4.80
MELOXICAM 15MG	Mobic	30	\$ 10.00	\$ 6.00
METOPROLOL TARTRATE 50MG RNDPK	Toprol	60	\$ 20.00	\$ 4.80
MONTELUKAST SODIUM 10MG	Singulair	30	\$ 24.00	\$ 6.90
NAPROXEN 500MG	Naprosyn	20	\$ 12.00	\$ 4.00
OMEPRAZOLE DR 20MG	Prilosec	30	\$ 24.00	\$ 4.80
ONDANSETRON 4MG	Zofran	10	\$ 15.00	\$ 3.00
PREDNISONE 20MG	Prednisone	10	\$ 12.00	\$ 4.80



Is it DPC or Concierge Medicine?

- **DPC:** Completely outside 3rd party insurance reimbursement.
 - Flat Monthly Fee minimal administrative costs for great primary care
 - Fees cover increased access to primary care and all primary care services
 - No misaligned FFS payment or referral incentives

Concierge: Provider access fees paid for "non-covered" services

- Expanded access to care bundled with executive physical or other non-covered service
- Patient bills insurance for medical services <u>still in fee for service (FFS) model</u>
- DPC: More affordable than concierge, usually lower than \$100 per month.
 - Even offered in Medicaid some states
- DPC: Alternative Payment Model driving improved outcomes at lower costs.
 - Concierge may well improve care for some...
 - but only for those who can afford it

