

## DIRECT PRIMARY CARE FAQ's

### So you don't take any insurance?

We do not. Here is why! The reason we do not work directly with insurance is that we want to work directly with you. The for-profit insurance industry is largely what has industrialized our medical profession, putting more layers between people and their doctors, less time for visits, and more visits where one actually does not see their doctor. On the doctor's end of things, we often feel rushed, overwhelmed and pulled in too many directions when we'd like to just be sitting with you, fully present and getting to the bottom of things with you. By not working directly with insurance, We are able to:

- Keep my costs much lower
- Spend more time with you
- Be available to you in more ways, including email, phone, and educational events.

Also, have you ever considered a cost-sharing program? Many patients have been pleased with Liberty Health Share. It's an example of a not-for-profit alternative to insurance that was approved of in the Affordable Care Act that would even pay part of your monthly membership.

Note: The only reason you indicate your insurance on the enrollment page is to make the process smoother if we need to refer you to a specialist at some point or for a test outside my clinic. We will not bill your insurance.

## What about Medicare?

Because Medicare does not acknowledge or pay for many of the unique and helpful services we offer, which are inspired by our community's needs, the best way to provide the same level of care to patients with Medicare is to not bill Medicare. If you are enrolled with Medicare, you will be asked to sign a form at or before your first visit that shows you understand we will not bill Medicare for any of our services and that you agree to not bill Medicare for any of our services.

However, your plan with Medicare may still be billed for any and all services outside our direct care, including, but not limited to labs, radiology, specialist visits, and hospital care. Seeing one of us doesn't impact your ability to use Medicare for everything else.

## Do I need health insurance to become your patient?

We are all legally required to have health insurance, but health insurance is not required simply to be a patient at our center. Health insurance helps pay (hopefully) for labs, radiology, specialist visits, and hospital care -- things that happen outside of the services we offer. An affordable membership like what we're offering would then cover most of your primary care needs for a predictable, transparent monthly price.

## I already have health insurance. Why would I pay for this?

This is a great question! Health insurance is NOT the same as health care. Health insurance doesn't guarantee you access to a doctor or to quality care or to the care you want when you want and need it. What we offer is a reliable, continuous relationship with our patients--a doctor who really knows you. We offer the ability to communicate directly and in a timely manner. If you call for a visit, we will typically meet that same day or the next day if that's what your problem requires. Also, many people never reach their deductible, and end up paying for most of their care out-of-pocket. For these people, a model like this can save a lot of money. This model may not be for everyone, but many are finding it ideal for their medical care.

## Can my HSA/FSA dollars be used towards the monthly membership fee?

Currently the laws state that HSA dollars cannot be used for your membership fee, but can be used for all other medical care you receive, including labs, radiology, hospital care, specialty visits, etc. FSA's may be used depending on the employer's FSA criteria, so check directly with your employer or plan administrator. The laws may change in the future, so keep your eyes peeled if this applies to you.

But I only go to the doctor once a year! I pay for you every month whether I see you or not?

You've probably never been part of a clinic like this before. It's not just focused on chronic disease care and sick care. Here we get to work together in so many ways, typically in whatever way feels best for you and best addresses your concerns. Together, we will work to achieve the best health for you in the form of unlimited clinic visits (typically whenever you need them), home visits (when appropriate), messaging through your secure electronic medical record, and phone calls. This also covers all the coordination of your care when you travel and have health care needs!

The other great perk is that you get a 10% discount for the services of our associate providers!

If I get really sick will my fees go up?

No. We take care of you for the same fee.

Is this a "concierge" or "boutique" medicine

No. This is truly individualized care with excellent access to your doctor. "Concierge" practices typically bill insurance companies as well, and we do not. The only form of income for us is from the

monthly memberships of patients. We work for our my patients, not for insurance companies.

## Do you provide vaccines in your clinic?

We do not host a vaccine program. Vaccines are provided in our communit: Island County Public Health Department (located on Maxwellton Rd and in Oak Harbor) and local pharmacies are excellent options for getting vaccines. Medicaid and most insurance companies cover vaccines for children. Medicare and most insurance companies cover most vaccines for adults. Contact your insurance carrier if you have questions about what is covered in your plan. And contact us if you have questions about where to go for vaccines or alternative vaccination plans.

## Do you treat chronic pain?

No, we do not specialize in treating chronic pain. However, we are learning each year about safe and effective ways to cope with and minimize the experience of daily pain. We also have been learning for years that opioids (pain medications like oxycontin, morphine, methadone, oxycodone, hydrocodone, etc.) typically don't make people's pain or wellbeing better when used for months or years. And we also know many people experience accidental overdose and even death from these medications. So, in general, we will not be

prescribing controlled substances, and will refer you to a pain specialty clinic if needed.

## What's not covered?

The cost of anything that happens outside of the center would be your, or your insurance carrier's, responsibility. This includes, but is not limited to, hospital and emergency care, the care of other doctors and specialists, radiology, labs, and pathology. For example, if a biopsy is performed at our center, the biopsy procedure is covered for members. The fee for the pathology testing and report, performed by a pathologist outside the clinic, would be your, or your insurance carrier's, responsibility. Any changes we make to services provided at the center will be communicated on both the website and in writing to current patients.

## What happens if I get admitted to the hospital?

Great question! We will work with the hospitalist team at the hospital to which you are admitted. We will be prepared to provide your care after you leave the hospital.

While the hospitalist providers will be directly involved in your moment-to moment care in the hospital, we will be able to communicate with your hospital providers about your care. That way you get the best of both worlds: doctors who are caring for you

physically in the hospital 24/7 as well as regular input from the doctor who knows you.

## What happens when you go on vacation?

We have two doctors! We will alternate and have coverage for when one of us needs to be away.

## What if I want to cancel my membership or change practices?

We want you to be exceptionally happy with the care you get. If for any reason you want to cancel, you may do so at any time. To cancel your membership, give notice in writing we will pro-rate all unused fees remaining for that month within 10 business days of receiving your termination notice. Once you change practices, we will forward your medical records to your new provider. To re-join our practice after leaving, there is a \$300 re-enrollment fee if planning to return in less than 12 calendar months.