



HOUSE OF REPRESENTATIVES

2 STATE HOUSE STATION
AUGUSTA, MAINE 04333-0002
(207) 287-1440
TTY: (207) 287-4469

Joshua Morris

P.O. Box 246
North Turner, ME 04266
Phone: (207) 754-7829
Joshua.Morris@legislature.maine.gov

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Senator Bailey, Representative Mathieson, colleagues on the Health Coverage, Insurance, and Financial Services Committee, I am Representative Joshua Morris. I am here to present **LD 1511, "An Act to Expand Direct Healthcare Service Arrangements"**.

Over the last few years, direct primary care arrangements have become more popular with consumers. The concept is simple; in exchange for a monthly fee, patients get access to a primary care practitioner. The practitioner usually does this in lieu of taking insurance. This gives the practice the ability to see patients without having to worry about insurance contracts. The patient has a fixed cost and has access to their provider in accordance with their contract. These prices are usually listed on the practitioner's website.

This bill attempts to expand these arrangements to other health care providers not just primary care. This would allow specialists such as chiropractors, physical therapists, and others to be able to practice their craft with these arrangements as well. Given the rising costs in healthcare and insurance, I believe this is an innovative way we can get more people to have access to more providers of healthcare.

There was an amendment distributed yesterday putting the sections back in to clarify that if a provider wishes to offer a subscription service they are not prohibited from also accepting insurance. The goal of this legislation is to help more people see providers not to discourage them from purchasing insurance.

Thank you and I would be happy to answer any questions.

Joshua Morris
State Representative

LD 1511
SPONSOR'S AMENDMENT
Proposed by Rep. Morris
FOR HCIFS REVIEW 4/24/25 PUBLIC HEARING

PROPOSED COMMITTEE AMENDMENT:
LD 1511, An Act to Expand Direct Health Care Service Arrangements

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

Sec. 1. 22 MRSA §1771, as enacted by PL 2017, c. 112, §1, is amended to read:

§1771. Direct primary health 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 health care service agreement" means a contractual agreement between a direct primary health care provider and an individual patient, or the patient's legal representative, in which:

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

(2) The direct primary health 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 health care provider" means an individual who is a licensed allopathic 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 health care by entering into a direct primary health care service agreement with patients. The term includes, but is not limited to, an individual primary health care provider or a group of primary health care providers.

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

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

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

D. "Health care" has the same meaning as in section 1711-C, subsection 1, paragraph C.

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

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

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

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

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

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

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

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

SUMMARY

This amendment is intended to replace the bill. The amendment retains language in the bill in Title 22, section 1771, subsections 6 and 7 that were not intended to be repealed and makes corresponding clarifying changes.

Under current law, an individual can contract directly with a direct primary care provider, which is a licensed allopathic or osteopathic physician or other advanced health care practitioner who is authorized to provide primary care services, for the provision of health care to that individual. This amendment removes the requirement that the physician or advanced health care practitioner be authorized to provide primary care services.