

October 30, 2019

U.S. House of Representatives
Washington, DC 20515



Dear Members of Congress:

I'm writing to ask for your support and co-sponsorship of H.R. 3708, The Primary Care Enhancement Act which provides important clarifications about Direct Primary Care (DPC) agreements for the tax code. DPC is one of the most important value-based reforms in healthcare today. As the founder the first DPC practice almost two decades ago, we had a bold yet simple idea: Give people a personal relationship with a high-functioning primary care doctor and people will be healthier and happier using the less expensive and scary parts of the healthcare system. Along the way, we can save millions of dollars by reducing hospitalization and administrative costs, since nobody ever files a "claim" to get paid for care.

It works. Since 2009, almost 1,200 new DPC practices have emerged and employers, unions, and even health plans now rely on DPC doctors to provide better care for their employees. Employers report their cost of providing healthcare goes down by as much as 20%. Patients love the care they get. Doctors love doing what they were trained to do instead of filling out insurance forms.

We've passed laws in 28 states since 2007 to define DPC as a medical service outside of state insurance regulation. Unfortunately, our current tax laws haven't kept up and look at a DPC agreement between doctor and patient as a form of insurance or health plan—only for people with High Deductible Health Plans (HDHP) paired with Health Savings Accounts (HSAs). Whether you like HSAs or not, a change in this policy is critical for our patients—your constituents. Nearly 1/3 of all employer sponsored plans are HSA qualified HDHPs today; as such, none of the 23 million Americans with these high deductible plans has access to affordable primary care delivered by a DPC practitioner of their choice.

H.R. 3708 definitively corrects that interpretation and says that a DPC arrangement will not be treated as a health plan that would make an individual ineligible to contribute to an HSA. It will allow fees paid for an affordable DPC arrangement to be treated as medical expenses and not the payment of insurance, allowing patients to use their HSAs to pay for much needed primary care services.

The good news is there is strong bipartisan support for a change. Last week the Ways and Means Committee unanimously passed H.R. 3708 for consideration on the House floor. We appreciate the bipartisan efforts of the bill sponsors, Representatives Earl Blumenauer (D-OR), and Devin Nunes (R-CA), and thank Ways and Means Committee Chairman Richard Neal (D-MA) and Ranking Member Kevin Brady (R-TX) for moving the bill forward. Please urge House leaders to bring this important bill to the House floor for a vote this year.

Please reply if you have any questions or call the Direct Primary Care Coalition at (202) 624-1450 for any further information.

Sincerely,

A handwritten signature in black ink that reads "Garrison Bliss MD". The signature is fluid and cursive.

Garrison Bliss, MD
Chairman, Direct Primary Care Coalition
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