NABIP PRIMARY CARE: WHAT ARE MY OPTIONS?

	Direct Primary Care Patients typically pay a flat membership fee for unlimited access to a physician. In some cases, they may pay additional fees for particular services.	Traditional Primary Care Patients pay for care on a fee-for-service basis.	Concierge Medicine Patients pay for care on a fee-for-service basis. Patients also pay an additional flat fee for a prioritized personal relationship with a provider.
CONVENIENCE	Call, text, email, video chat or visit provider just about any time.	Call or email for appointment.	Call or email for appointment. Annual fee buys quicker access to doctor.
PATIENT EXPERIENCE	Build a personal relationship with a provider, who can serve as an advocate for patient before specialists and rest of healthcare system. Patient is the client.	Depending on size of the practice, patient may see one doctor or a different doctor each time. Primary care doctors can serve as advocates for patients before specialists and rest of healthcare system.	Build a relationship with a provider on a prioritized basis. That provider can serve as an advocate for patient before specialists and rest of healthcare system.
ACCESS TO CARE	Unlimited access to physician can result in fewer emergency room visits, earlier screenings and improved chronic disease management.	Patients generally need referrals for diagnostic work or specialist care.	Annual fee covers screening and tests not typically covered by insurance. Patients must get referrals for diagnostic work or specialist care.
INSURANCE	Providers generally do not accept insurance. Health plans may not accept referrals to specialists from direct primary care physicians.	Patient generally responsible for co-pays for office visits and cost-sharing for additional services.	Patient generally responsible for co-pays and cost-sharing for additional services. Concierge physicians generally belong to insurance networks, so they can refer patients to in-network specialists.
HEALTHCARE ACCOUNTS	Regulations pending to allow HRA and HSA use for direct primary care.	HSA, HRA, FSA	HSA, HRA, FSA
COST	Monthly membership fee is separate from insurance plan and does not count toward deductible. Patients may have to pay for diagnostics and other uncovered services. Direct primary care practices typically negotiate preferred cash prices with external providers for patients.	Co-pays typically do not count toward deductible, but out-of-pocket expenditures do.	Annual fees do not count toward health plan deductible. Co-pays and out-of-pocket costs do.

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