INSURED AMERICAN & FAMILY

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Direct Primary Care + High-Deductible Plan

The 2026 IRS rule that made this combo HSA-compatible

Membership-based primary care, plus a real plan for the big stuff.

WHAT IT IS

Direct Primary Care (DPC) is a membership-based primary care model, you pay a flat monthly fee directly to a primary care practice and get unlimited visits, same-day access, longer appointments, and direct messaging with your doctor. It pairs naturally with a high-deductible health plan (HDHP) that handles the catastrophic stuff. Until 2026, the IRS hadn't decided whether DPC fees were compatible with HSA contributions. A new rule effective January 1, 2026 settled it: DPC is now officially HSA-compatible, within set fee limits.

HOW DPC WORKS

Flat monthly fee
Typically $50 to $150 per month per person

Unlimited visits
Same-day or next-day access standard

Longer appointments
30 to 60 minutes, not the typical 15

Direct messaging
Text or message your doctor directly between visits

No insurance billing
DPC practices don't bill insurance at primary care

WHY IT PAIRS WITH AN HDHP

DPC handles routine care
Most of what you actually use day-to-day

HDHP covers the big stuff
Hospital, surgery, imaging, specialists, ER

HSA contributions tax-deductible
Lowers your taxable income today

2026: DPC fees HSA-eligible
Up to $150/mo single / $300/mo family

Combined cost often LOWER
Vs. a comprehensive Marketplace plan

THE 3 THINGS PEOPLE GET WRONG

1. **"DPC is just concierge medicine for rich people."**
   Different price point. Concierge medicine runs $2,000–$10,000 per YEAR retainers and often targets executives. DPC runs $50–$150 per MONTH and targets working families and small-business owners. Concierge sells luxury access; DPC sells access-as-membership.

2. **"DPC replaces my health insurance."**
   No. DPC covers primary care only, office visits, in-office labs, some basic procedures, chronic-condition management. You still need real insurance for hospital care, surgeries, specialists, imaging, and prescription medications outside the DPC's scope. That's the whole reason DPC pairs with an HDHP.

3. **"The membership fee isn't worth it."**
   For someone using primary care more than 3 or 4 times a year, the membership often pays for itself in copays and time saved. Add longer visits, same-day access, direct doctor messaging, and the new HSA tax deduction starting in 2026, the math gets noticeably better.

THE 2026 IRS RULE, WHAT CHANGED

Effective January 1, 2026, federal law allows DPC arrangements to be HSA-compatible. The fee limit is $150 per month for individual coverage and $300 per month for family coverage (inflation-adjusted after 2026). Qualifying providers include physicians (family, internal, geriatric, or pediatric medicine), nurse practitioners, clinical nurse specialists, and physician assistants. Important nuance: HDHPs themselves still cannot pay DPC fees pre-deductible, the exemption applies to HSA contribution eligibility only. Net effect: your DPC fees are now tax-deductible through your HSA.

Could DPC + HDHP save you money in 2026? Call or text Craig, I'll run the combined math on the combo for your actual care use.

Don't go underinsured when you can be Insured AF.