



March 10, 2025

The Honorable Lloyd Smucker
302 Cannon House Office Building
U.S. House of Representatives
Washington, DC 20515

The Honorable Kim Schrier
1110 Longworth House Office Building
U.S. House of Representatives
Washington, DC 20515

The Honorable Jimmy Panetta
200 Cannon House Office Building
U.S. House of Representatives
Washington, DC 20515

The Honorable Dan Crenshaw
248 Cannon House Office Building
U.S. House of Representatives
Washington, DC 20515

The Honorable Claudia Tenney
2230 Rayburn House Office Building
U.S. House of Representatives
Washington, DC 20515

The Honorable Brad Schneider
300 Cannon House Office Building
U.S. House of Representatives
Washington, DC 20515

Dear Representatives Smucker, Panetta, Schrier, Crenshaw, and Schneider:

On behalf of the American Academy of Family Physicians (AAFP), which represents more than 130,000 family physicians and medical students across the country, I write to thank you for introducing the Primary Care Enhancement Act (H.R. 1026).

The AAFP supports direct primary care (DPC) and sees it as a model of care that provides a pathway to continuous, comprehensive and coordinated primary care for patients. However, there are identified barriers that may prevent some patients from realizing the full potential of the DPC model. One of those barriers is the prohibition on the permissible use of health savings accounts (HSAs) funds to pay for participation in a DPC practice. Under existing interpretation of the Internal Revenue Code, patients with HSAs are prohibited from engaging in DPC arrangements with a family physician or other primary care clinician. Your legislation would remove these current legal barriers that prevent patients with HSAs from receiving care from family physicians practicing in a DPC model.

A growing number of family physicians are choosing to practice in the DPC model and patient demand for DPC practices is growing. Additionally, employers and labor unions are driving growth in the model, further necessitating changes in law that allow patients to benefit from this primary care delivery model. The AAFP is eager to work with you to pass this legislation, thus allowing our members practicing in a DPC model the opportunity to engage with more individuals and provide a longitudinal primary care home to their patients.

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We applaud your leadership on this important issue, and we are pleased to support H.R. 1026
For questions, please contact Megan Mortimer, Manager, Legislative Affairs
mmortimer@aafp.org.

Sincerely,

Steve Furr, MD, FAAFP
American Academy of Family Physicians, Board Chair