

Better costs. Better care.

Direct Care Alliance is a no-cost point solution for self-funded health plans. It connects self-funded employers directly with hospitals on high-cost, planned (non-emergent) surgeries and cancer care.

NOT INSURANCE**NOT A DIRECT PRIMARY CARE NETWORK**

It layers on top of a plan that already exists.

HOW THE MODEL WORKS

One procedure, one agreed price, one navigator

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| 01
A benefits broker or TPA reaches out to the DCA team with a care inquiry or a case referral. | 02
DCA negotiates one all-in price, agreed in advance, with a quality facility. | 03
The employer agrees contractually to pay for the procedure at that price before care happens. | 04
A DCA concierge care navigator coordinates the entire episode, start to finish. The hospital gets fast, direct payment at the agreed rate. |
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WHAT THAT REMOVES

No prior authorization No denials No balance billing No surprise bills

For hospitals and providers

The supply side of the model

- Predictable revenue at pre-negotiated rates
- No prior authorization or denial overhead
- Fast, direct payment after the procedure at the agreed rate
- Coordinated patients who arrive ready

For benefits brokers and TPAs

The benefits channel, for the self-funded employers you serve

- Transparent, upfront case pricing
- A single point of contact
- No surprise bills
- Coordinated care that de-risks the most catastrophic claims
- Sits alongside the existing health plan and does not replace it

WHAT DCA COVERS

Planned, non-emergent surgery, including spine and orthopedic, general surgery, hip replacement and mastectomy, priced as a single case rate. Cancer care priced as a single case rate, plus ongoing care such as monthly chemotherapy infusions.

WHERE DCA WORKS

National. DCA has no fixed territory and works case by case. It sources the right facility wherever the patient is, or coordinates travel to a center of excellence.

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