



Zenith Direct Care Launches Subscription Primary Care Service

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Zenith Direct Care announced the official launch of its subscription primary care service, establishing a direct-to-consumer medical model aimed at expanding patient access to routine clinical services while removing standard insurance billing processes. Operational on November 1, 2026, the service will initially serve adult residents and families across the metropolitan area and surrounding regional counties. Through a hybrid structure comprising three outpatient clinics and a secure virtual platform, the organization plans to provide ongoing primary healthcare directly to consumers without processing claims through third-party health insurance payers.

Membership rates are structured into transparent monthly tiers. Individual adult plans are priced at \$85 per month, with coverage for dependent children under eighteen available at \$45 per child when paired with an enrolled adult, and senior adults aged sixty-five and older are enrolled at \$110 per month. There are no registration initiation fees during the initial launch period, no annual lock-in contracts, and no per-visit co-pays. Covered benefits include unlimited routine office consultations, same-day or next-day urgent visits, comprehensive annual wellness examinations, ongoing chronic disease monitoring, and routine in-clinic point-of-care testing such as rapid strep screening, blood glucose checks, and urinalysis. Members also

receive direct access to their assigned physician via asynchronous messaging, with routine inquiries addressed within two business hours.

However, clinical administrators emphasize that membership does not constitute comprehensive health insurance. Patients remain responsible for costs related to specialist consultations, emergency room visits, hospital admissions, surgical procedures, and advanced imaging such as computed tomography and magnetic resonance scans. Zenith Direct Care explicitly advises participants to maintain catastrophic or high-deductible health coverage for major medical events. While external laboratory processing and prescription drugs are excluded from the flat monthly fee, the practice has negotiated discounted wholesale rates with regional partner laboratories and independent pharmacies to help patients manage external healthcare expenses.

To support continuity of care, the practice has integrated an electronic health records platform that allows members to review clinical notes, view lab results, schedule visits, and complete encrypted video visits from mobile devices or personal computers. This digital infrastructure is designed to streamline routine preventive consultations and follow-up appointments, giving patients flexible access without imposing supplemental telemedicine facility fees.

By capping physician panel sizes at approximately six hundred patients per clinician, compared to typical industry panels exceeding two thousand patients, the practice aims to increase appointment durations to thirty or sixty minutes. Proponents of this operational model note that extended consultations can improve the management of ongoing conditions such as hypertension and type 2 diabetes. While observational studies published in health policy literature suggest that direct primary care arrangements correlate with improved patient satisfaction and fewer avoidable complications, researchers emphasize that long-term reductions in hospitalization rates vary significantly across different patient populations and health risk profiles.

Chief Medical Officer Dr. Emily Rodriguez explained the clinical framework: "Our operational objective is to deliver direct, unhurried primary medical consultations without administrative friction. By removing third-party coding requirements, our physicians can allocate more dedicated time to diagnostic evaluations, preventative lifestyle guidance, and personalized chronic disease management."

Online enrollment opens on October 20, 2026, via the organization's patient portal, with memberships activated on a rolling monthly basis and capped to preserve clinician-to-patient ratios. Patients may cancel memberships at any time with thirty days' written notice. This structured rollout demonstrates a growing operational shift toward direct clinical financing, establishing subscription primary care as an alternative framework for delivering direct outpatient medical services.

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