Direct Providers Care™

Employer Broker Compensation Disclosure

Template for employer/client acknowledgment

Memberships starting at $99/month. Highest membership: $349/month. Not insurance.

This disclosure is intended to help the employer/client understand how the broker or consultant may be compensated in connection with the membership benefit.

Disclosure statement

The broker or consultant may receive compensation from Direct Providers Care™ if the employer, organization, or member purchases a membership. Compensation may be paid as a percentage of monthly membership revenue, a per-member fee, an activation bonus, a renewal payment, or another approved compensation arrangement. Compensation is based on active paid memberships and may be included in the total membership fees charged.

The broker is not compensated for medical referrals, patient steering, clinical decisions, or provider referrals. This membership is not insurance and should not be represented as insurance or as a replacement for major medical insurance.

Field	Response
Employer/client name	
Broker/agency name	
Estimated membership count	
Membership tier(s)	
Broker compensation method	
Estimated monthly broker compensation	
Date provided	

Acknowledgment

By signing below, the employer/client acknowledges receipt of this broker compensation disclosure.

Employer signature	Date

Compliance note: This template is for business planning and portal publication. Have qualified legal/compliance counsel review final documents before use, especially for ERISA, state insurance, broker licensing, and healthcare referral rules.