

An Act relative to primary care access & An Act relative to primary care for you

<u>Bill Number:</u>	Lead Sponsors:
H.2537 & S.867	Rep. Schwartz & Sen. Friedman

These proposals expand access to primary care by setting a primary care spending target, changing how insurers pay for care and training more primary care providers.

What does this legislation do?

- Sets a primary care spending target of at least 12% of overall health care spending over the next four years by requiring insurers and health systems to meet the target while staying within the health care cost growth benchmark.
- Makes the newly created primary care task force (established in the 2024 market oversight law) a permanent board that will inform regulations issued by the Division of Insurance to:
 - Establish a new capitated primary care payment model that all insurers would have to offer,
 - Set reporting requirements on primary care spending for insurers, health systems and practices, and
 - Identify patient cost-sharing limits for primary care.
- Designates a payment floor so that federally-qualified community health centers cannot be paid less by commercial insurers than by MassHealth.
- Establishes a Medicaid GME program for primary care and other high-need disciplines to provide more residency slots in community health centers and hospitals (only in H.2537).

Why is this legislation needed?

- Out of fifteen U.S. metro areas surveyed in 2022, Boston had the <u>second-longest</u> wait times for a new appointment for a physical.
- MA patients also <u>reported</u> worsening access to primary care each year from 2019 to 2023.
- This is partly a result of insufficient investment in primary care which accounts for just <u>6.7%</u> of all commercial health care spending and grew at just <u>half</u> the rate other medical spending between 2017 and 2022.
- MA is one of only seven states that does not fund a Medicaid Graduate Medical Education (GME) program, contributing to <u>slower growth</u> in primary care residency positions than nationally.

Why is this a health equity issue?

- People of color and low-income residents are <u>more likely</u> to face primary care access barriers.
- Residents who live in a low-income zip code or a community with a higher share of people of color are less likely to have a primary care visit.

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