



MACPAC
Medicaid and CHIP Payment and Access Commission



An Update on the Medicaid Primary Care Payment Increase

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Overview

- Statutory and regulatory requirements
- Update on state experiences with implementation
- Evaluation
- Medicaid primary care rates in 2015

Statutory and Regulatory Requirements

Only certain primary care providers were eligible for the payment increase

- Identifying eligible providers was challenging for states
- Providers were required to self-attest to their eligibility

Payments were increased for evaluation and management services and vaccine administration

Implementing within managed care programs was more complicated than FFS

Update on State Experiences with Implementation

In MACPAC interviews states, Medicaid MCOs, and provider organizations reported:

Operational challenges had been largely resolved

Payments to providers were initially delayed

The payment increase had at best, a modest effect on provider participation according to states and MCOs

Quantifying the amount of additional payments was challenging for states and MCOs

Evaluation

Early research is mixed on whether the primary care payment increase affected access to primary care

- Some evidence of increased willingness to see new patients, or increase Medicaid patient load
- Some evidence that providers may not have been aware of the provision, few physicians completing attestation were new to Medicaid

Few states have conducted an evaluation

ASPE evaluation due out later this year

Medicaid Primary Care Rates in 2015

14 states will continue to pay at higher rates, although not necessarily at the Medicare level

- Some states perceived the increase to have strengthened primary care networks and improved relationship with providers

24 states have reverted to pre-2013 rates