HOUSE BILL REPORT HB 2549

As Reported by House Committee On:

Health Care & Wellness

Title: An act relating to establishing patient-centered primary care pilot projects.

Brief Description: Establishing patient-centered primary care pilots.

Sponsors: Representatives Seaquist, Lantz, Morrell, Liias, Barlow and Green.

Brief History:

Committee Activity:

Health Care & Wellness: 1/17/08, 1/24/08 [DPS].

Brief Summary of Substitute Bill

• Directs the Health Care Authority to provide funding and technical assistance to primary care providers who adopt and maintain medical homes.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 10 members: Representatives Cody, Chair; Morrell, Vice Chair; Hinkle, Ranking Minority Member; Barlow, Campbell, Green, Moeller, Pedersen, Schual-Berke and Seaquist.

Minority Report: Do not pass. Signed by 2 members: Representatives Alexander, Assistant Ranking Minority Member and Condotta.

Staff: Dave Knutson (786-7146).

Background:

A primary care practice serves as the patient's first point of entry into the health care system and as the continuing focal point for all needed health care services. Primary care practices provide patients with ready access to their own personal physician or to an established back-up physician when the primary physician is not available. The structure of the primary care practice may include a team of physicians and non-physician health professionals.

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Primary care practices provide health promotion, disease prevention, health maintenance, counseling, patient education, diagnosis, and treatment of acute and chronic illnesses in a variety of health care settings (e.g., office, inpatient, critical care, long-term care, home care, day care, etc.).

Primary care practices are organized to meet the needs of patients with undifferentiated problems, with the vast majority of patient concerns and needs being addressed in the primary care practice itself. Primary care practices are generally located in the community of the patients, thereby facilitating access to health care while maintaining a wide variety of specialty and institutional consultative and referral relationships for specific care needs.

Summary of Substitute Bill:

The Health Care Authority (Authority) is required to develop a project to provide funding and technical assistance to primary care providers who adopt and maintain medical home models of practice. The project will include consultation related to improving office workflow and techniques in efficient, cost-effective, patient-centered integrated health care. The project will include signing bonuses or other incentives to increase the number of primary care providers. Funding will be provided for health information technology models in primary care practices.

The Authority will report to appropriate committees of the Legislature on the progress and outcomes of the project with an interim report by January 1, 2009 and a final report by December 31, 2011. The Authority will also report its findings on changing reimbursement for primary care and a time line for adoption of payment and provider performance strategies by January 1, 2009. The Office of Financial Management (OFM) is required to evaluate the current supply and scope of service of primary care providers in the state, and determine the barriers to, and the benefits of, increasing the use of a medical home model. The OFM study will be reported to the appropriate committees of the Legislature by July 1, 2009.

Naturopaths are included in the list of health care providers who may participate in the primary care pilot program. Health care practices that may participate in the primary care pilot program will be limited to practices with six or fewer providers. Practices that will be able to participate in the pilot program must agree to see a reasonable number of Medicare and Medicaid clients.

Substitute Bill Compared to Original Bill:

Limitations are included on which health care providers can participate in the primary care pilot project.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of session in which bill is passed. However, the bill is null and void unless funded in the budget.

Staff Summary of Public Testimony:

(In support) Health care is too expensive and the quality of care is not good enough. The goal of this legislation is to improve quality, reduce cost, and expand access to primary care. Seventy percent of primary health care is provided through small practices of health care providers. A medical home is an approach to delivering coordinated, high quality, patient-centered health care. Small practices need support and help to develop and maintain a medical home for children and adults. Naturopaths also provide primary care and should be allowed to participate in the pilot program operated through the Health Care Authority.

(Opposed) None.

Persons Testifying: Representative Seaquist, prime sponsor; Robert Crittenden, Primary Care Coalition; Steve Tarnoff, Group Health; Jeanne Boudrieau; Steve Albrecht and Martin Levine, Washington Academy of Family Physicians; Holly Detzler, Communities Connect; Eva Miller, Washington Association of Naturopathic Physicians; and Robby Stern, Washington State Labor Council and Healthy Washington Coalition.

Persons Signed In To Testify But Not Testifying: None.

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