



March 5, 2025

Honorable Marvin L. Abney
Chairman, House Committee on Finance
Via e-mail to: HouseFinance@rilegislature.gov
Re: **H5076 Article 8 - OHIC Primary Care Review**

Dear Chairman Abney and Members of the House Finance Committee:

The Rhode Island Health Center Association supports the inclusion of primary care services within the Office of the Health Insurance Commissioner's authority to undertake a comprehensive review of all social and human service programs that operate under a contract with the Executive Office of Health and Human Services and its member agencies, including payment rates for those services and programs. The current statute governing this review limits that payment rate review to payments made directly by the state, the majority of which are paid for under the Medicaid fee-for-service (FFS) methodology.

We encourage the Committee to consider the following enhancements to the current language:

1. Expand the scope of the review to include all payors

Expanding the scope of the review to include primary care payment from all payors, including Medicaid Managed Care, commercial insurers, and Medicare, would reflect the recognition that primary care is unique in its ability to keep people healthy. Research reflects that greater investment in primary care decreases overall healthcare costs.¹ The role and importance of primary care to all Rhode Islanders requires a broad approach.

2. Expand the purpose of the review

OHIC's current review is generally focused on understanding whether or not current Medicaid FFS payment are sufficient to cover existing costs to provide services. We recommend that any review of primary care go beyond that initial question to also ask whether or not payment rates support the most effective models of primary care. For example, the 2021 report from the National Academy of Sciences, Engineering, and Medicine, *Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care*, includes specific recommendations on paying for "primary care teams to care for people, not doctors to deliver services." The primary care review should be a

¹ https://archive.thepcc.org/sites/default/files/resources/pcmh_evidence_report_2019.pdf

3. Accelerate the schedule for the analysis

We recommend moving the schedule for this analysis by one year, so that recommendations are ready by September 2026.

We also recommend a clarification that the review include the payments to community health centers/federally qualified health centers. Over 210,000 Rhode Islanders depend on a community health center for their care. Community health centers provide comprehensive, high quality primary medical, behavioral, and dental health care to their entire community, regardless of insurance status or ability to pay. Because they are governed by Boards of Directors with a majority representation of patients, their services are specific to the unique needs of the communities they serve. If the goal of the review is to understand the current state of primary care, it would be incomplete without the inclusion of community health centers.

Please note that our recommendation to include community health centers in a future analysis should not distract from the fact that health centers need Medicaid rate reform today.

Thank you for the opportunity to comment,

Elena Nicolella
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The Rhode Island Health Center Association members include:
Blackstone Valley Community Health Care Inc. ~ Comprehensive Community Action Program
East Bay Community Action Program ~ Providence Community Health Centers
Thundermist Health Center ~ Tri-County Community Action Agency
WellOne Primary Medical and Dental Care ~ Wood River Health