

April 1, 2025

The Honorable Susan R. Donovan  
Chair, House Committee on Health and Human Services  
*Via: HouseHealthandHumanServices@rilegislature.gov*

**Re: H5255 - An Act Relating to State Affairs and Government – The Rhode Island Health Care Reform Act of 2004 -- Health Insurance Oversight**

Dear Chairwoman Donovan and Members of the House Health and Human Services Committee:

The Rhode Island Health Center Association supports House Bill 5255 and the inclusion of primary care services within the Office of the Health Insurance Commissioner's (OHIC) authority under RIGL §42-14.5-3(t) 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.

Primary care is unique in its ability to keep people healthy. Research reflects that greater investment in primary care decreases overall healthcare costs.<sup>1</sup> The role and importance of primary care to all Rhode Islanders requires a broad approach. We encourage the Committee to consider the following enhancements to the current proposed language:

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

The current statute limits this review to payments made directly by the state, the majority of which are paid for under the Medicaid fee-for-service (FFS) methodology. To the extent allowed by OHIC's authority, we recommend expanding the scope of the review beyond Medicaid FFS. We recommend the review include primary care payment from Medicaid Managed Care, commercial insurers, and Medicare.

**2. Expand the scope of the review to include all primary care payments**

The review should consider payments in addition to FFS, including shared savings payments, care management, bonus incentives and other forms of reimbursement. This would enable a more complete picture of current primary care investment.

**3. Expand the purpose of the review**

OHIC's review of Social and Human Services is generally focused on understanding whether or not current Medicaid FFS payments are sufficient to cover existing costs. We recommend that any review of primary care go beyond that initial question to also ask whether or not

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<sup>1</sup> [https://archive.thepcc.org/sites/default/files/resources/pcmh\\_evidence\\_report\\_2019.pdf](https://archive.thepcc.org/sites/default/files/resources/pcmh_evidence_report_2019.pdf)

payment rates support the most effective models of primary care. 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.” The review should be used to ensure Rhode Island is investing in enhancing primary care delivery.

#### **4. Community Health Centers/Federally Qualified Health Centers**

The current statute governing the OHIC Review could be interpreted to exclude payments to community health centers as their payment is already governed by §40-8-26. We believe community health centers should be included in any analysis or review of primary care. Over 210,000 Rhode Islanders depend on a community health center for their care. 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. At the same time, the Medicaid rates paid to community health centers cover, on average, 85% of the costs to deliver care. Community health centers need rate relief now. We support House Bill 6046 that addresses community health center rates.

We believe HB 6119 achieves the recommendations we include in this letter.

Thank you for your consideration of these comments.

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