HOUSE OF REPRESENTATIVES THIRTIETH LEGISLATURE, 2019 STATE OF HAWAII H.B. NO. 1444

## A BILL FOR AN ACT

RELATING TO HEALTH.

#### BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that there has been a 1 2 downward trend in the number of doctors seeking to practice in the primary care field, with most new medical graduates looking 3 instead to pursue non-primary care specialties. Research shows 4 5 that one driving factor in the decrease in primary care practitioners is that primary care physicians are compensated 6 significantly less than physicians in other medical specialties. 7 Research has also shown a correlation between enhanced spending 8 on primary care with improved health outcomes for populations. 9 10 It is therefore in the public's interest to establish a collaborative group within the department of health to study the 11 12 State's current spending on primary care and develop recommendations on ways to optimize spending in primary care. 13 The purpose of this Act is to establish a task force known 14 as the primary care payment reform collaborative to: 15 Examine current levels of primary care spending in the 16 (1) 17 State;



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1	(2)	Explore primary care spending mandates in other
2		states;
3	(3)	Examine alternative methods and models of enhancing
4		primary care spending;
5	(4)	Explore data collection issues related to
6		understanding the State's primary care spending,
7		including the capture of non-claims based primary care
8		spending; and
9	(5)	Generate recommendations to the legislature.
10	SECT	YION 2. (a) There is established in the department of
11	health a	task force known as the primary care payment reform
12	collabora	tive (collaborative).
13		
13	(b)	The director of health, who shall serve as the lead
13		The director of health, who shall serve as the lead son of the collaborative, shall appoint representatives
	chairpers	
14	chairpers	on of the collaborative, shall appoint representatives
14 15	chairpers from the (1)	on of the collaborative, shall appoint representatives following groups to participate in the collaborative:
14 15 16	chairpers from the (1)	on of the collaborative, shall appoint representatives following groups to participate in the collaborative: Primary care clinicians;
14 15 16 17	chairpers from the (1) (2)	son of the collaborative, shall appoint representatives following groups to participate in the collaborative: Primary care clinicians; Health care consumers;



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1	(6)	Employers that offer self-insured health benefit
2		plans;
3	(7)	The MedQuest division of the department of human
4		services;
5	(8)	The insurance division of the department of commerce
6		and consumer affairs;
7	(9)	Health care service plans and health insurers;
8	(10)	Mental and behavioral health professionals;
9	(11)	A statewide organization representing community
10		clinics;
11	(12)	A statewide organization representing hospitals and
12		health systems;
13	(13)	A statewide professional association for family
14		physicians;
15	(14)	A statewide professional association for physicians;
16	(15)	A statewide professional association for primary care
17		clinicians;
18	(16)	The federal Centers for Medicare and Medicaid
19		Services;
20	(17)	The chair of the house committee on health, or a
21		designee appointed by the speaker of the house;



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1	(18)	The chair of the senate committee on commerce,
2		consumer protection, and health, or a designee
3		appointed by the senate president; and
4	(19)	Any person or entity whose participation the director
5		of health determines would be helpful.
6	(c)	The collaborative shall develop annual recommendations
7	to the le	gislature to strengthen the primary care system in the
8	State. T	he collaborative shall examine and report on the
9	following	:
10	(1)	Payment reform;
11	(2)	Value-based care;
12	(3)	Workforce and recruitment;
13	(4)	Directing resources to support and expand primary care
14		access;
15	(5)	Increasing integrated care, including for women's and
16		behavioral health;
17	(6)	The current percentage of medical expenses in the
18		State allocated to primary care;
19	(7)	Primary care spending mandates in other states,
20		including an assessment of methods for establishing a



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1 minimum primary care spending percentage or dollar 2 amount; 3 (8) Data collection issues regarding primary spending in 4 the State and its potential impact on data submitted 5 to Hawaii's All Payer Claims Database; and Potential standard definitions of "primary care" that 6 (9) 7 may be used in future related legislation. The collaborative may use data submitted to Hawaii's All 8 9 Payer Claims Database to assist in the above examination. The collaborative may request similar data from health insurers who 10 11 are not required to submit claims data to Hawaii's All Payer Claims Database. All data received by the collaborative shall 12 be kept and maintained in the same confidential manner 13 established by section 323D-18.5, Hawaii Revised Statutes, 14 except as necessary to make recommendations and reports to the 15 16 legislature.

(d) It is not the intent of the legislature to authorize a person or entity to engage in or conspire to engage in an activity that constitutes a per se violation of state or federal antitrust laws, including, but not limited to, an agreement among competing health care service plans or health insurance



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companies as to the price or specific level of payment for a
 health care service.

3 (e) For the purposes of this Act:

Primary care means health care services delivered by
clinicians specializing in family medicine, general internal
medicine, or general pediatrics; or any other clinician whose
practice primarily focuses on prevention, wellness, and
treatment for common illnesses.

9 "Primary care clinician" means a physician or other health
10 professional licensed or certified in Hawaii whose clinical
11 practice is in the area of primary care.

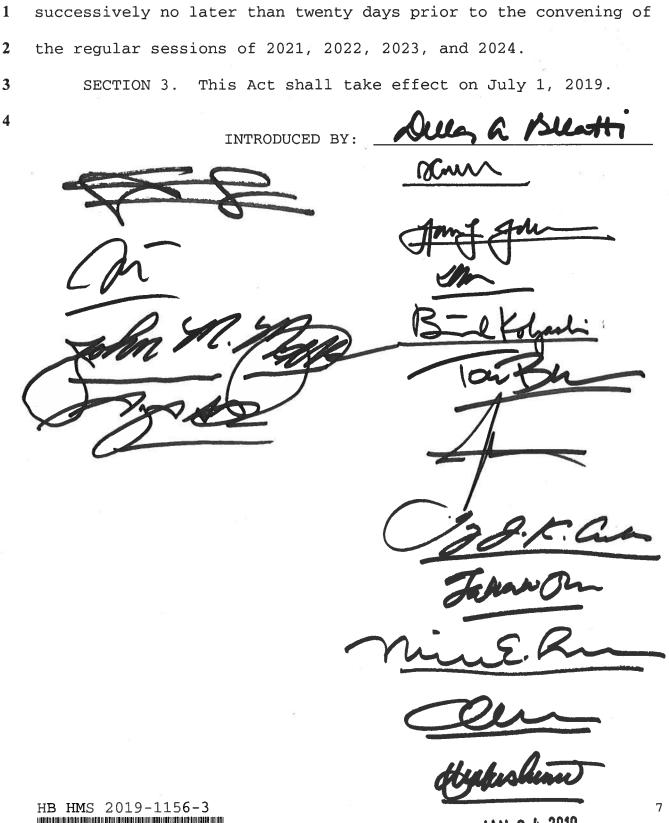
12 (f) The collaborative shall convene no later than13 September 16, 2019.

14 (g) The collaborative shall serve until it has 15 accomplished the objectives of this Act or twenty days prior to 16 the convening of the regular session of 2024, whichever occurs 17 first.

18 SECTION 3. The collaborative shall submit a report of its 19 findings and recommendations, including any proposed 20 legislation, to the legislature no later than twenty days prior 21 to the convening of the regular session of 2020, and then



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#### Report Title:

Primary Care Spending; Payment Reform; Primary Care Payment Reform Collaborative

#### Description:

Establishes the Primary Care Payment Reform Collaborative task force in the Department of Health to examine issues related to primary care spending and data collection and to develop recommendations to the legislature.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

