

## **2017 CUT TO MEDICAID PRIMARY CARE PROVIDER RATES UNDERMINES ACCESS TO ESSENTIAL PRIMARY CARE!**

The bipartisan budget bill passed in October 2017 included many severe Medicaid cuts. One of the cuts: effective January 1, 2018, payment rates for primary care providers (including doctors, advanced practice registered nurses and physician assistants) were reduced from 100% of the rates paid to primary care providers under Medicare to 95% (the Governor is proposing a further reduction to 90%). This will send us on the road back to the problems Medicaid enrollees routinely used to have with accessing preventative care, and needs to be reversed now.

- Before 2013, DSS, like most states, paid primary care providers far less than they received for providing the same primary care services to Medicare enrollees. Not surprisingly, access to primary care for Medicaid enrollees was often quite difficult, with long wait lists to be seen by those primary care providers willing to see these patients.
- Under the Affordable Care Act, Congress mandated that, for two calendar years, 2013 and 2014, the states had to pay providers of primary care services to Medicaid enrollees the same rates as they received under Medicare, to address the endemic access problems.
- The result of this payment rate requirement, plus the elimination of managed care companies which routinely blocked access to care, was that many more primary care providers began to participate in CT Medicaid. Shortly after the Medicaid payment rates to most primary care providers rose in 2013, there was a **37 % increase** in the number of such providers participating - - from 2,370 in Jan. 2013 to 3,256 in Dec. 2013. (<https://ctmirror.org/2014/02/10/primary-care-providers-accepting-medicaid-doubled-since-2011/> )
- The cut to 95% of Medicare rates will affect all primary care providers, including those which run patient-centered medical homes. Although they are paid extra for coordinating care for their patients, their base rates will be reduced, just like they will be for all PCPs, so even the very successful PCMHs will be discouraged from continuing to participate.
- Cutting to 95% or more also will exacerbate the trend of small and solo medical practices, which are already operating on small margins, consolidating and being consumed by larger practices, which historically have not taken Medicaid while most of the small practices do. The Medicaid rate reduction will accelerate the loss.

Medicaid in CT has been a major, nationally-recognized success since moving to a primary care and PCMH-focused non-risk program with payment rates on parity with Medicare. Reducing those payment rates to 95% or lower of Medicare rates will send us backward, reducing the number of participating providers, and making preventative care less available -- at a greater cost to CT's taxpayers as untreated patients appear at hospitals with avoidable medical complications.

### **Reverse the Primary Care Provider Rate Cut Now!**

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