

# Examples from Other States:

## **Delaware:**

- Carriers required to spend 8.5% of total medical expense on primary care in 2023, 10% in 2024 and 11.5% in 2025. Requirement is limited to providers “engaged in care transformation.”
- Care transformation providers must attest to providing some subset of advanced primary care capabilities (e.g., team-based care, integrated behavioral health, active use of data)/
- Actual amounts for each provider group are negotiated between the insurers and providers

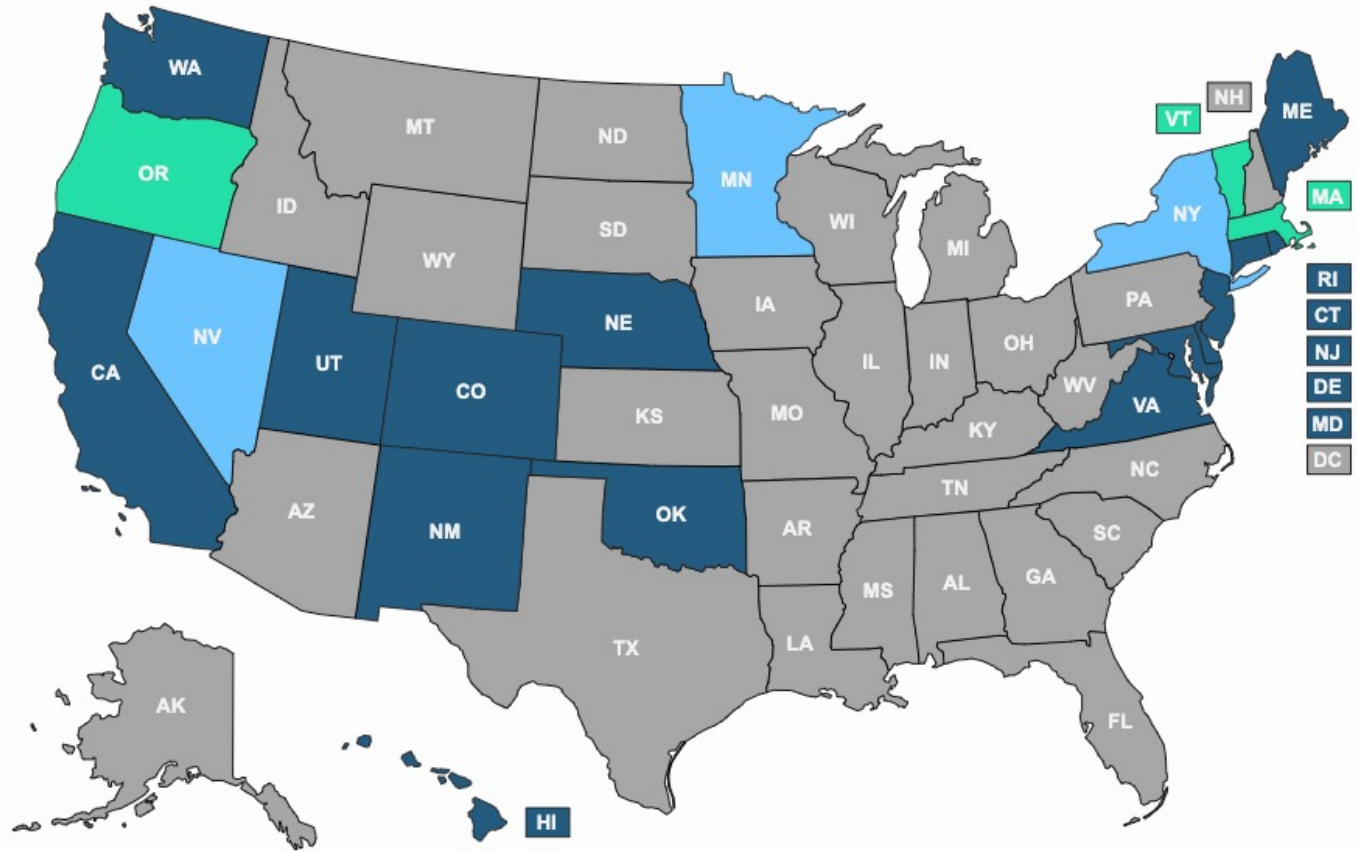
## **Rhode Island:**

- Carriers required to spend 10.7% of total medical expense on primary care.
- Carriers must make practice support payments to encourage and sustain PCMH.
- Practices seeking PCMH designation shall receive both infrastructure and care management payments, while those meeting the PCMH standards receive the care management payments.
- Actual amounts for each provider group are negotiated between the insurers and providers.

## **Oregon:**

- Carriers, public employees, Medicaid required to spend 12% of total medical expense on primary care.
- Public employees provide an age-adjusted, PMPM incentive payment to recognized primary care.
- Medicaid Coordinated Care Organizations (CCO) provide PMPM PMPMs will vary by PCPCH tier level and increase each year over a five-year contract.

## State Primary Care Investment Initiatives



 Enacted  Pending  Combination

# National Momentum

We are not alone

<https://www.pcpcc.org/primary-care-investment/legislation/map>