June 25, 2020

The Honorable Sherrod Brown United States Senate Washington, D.C. 20510 The Honorable Patty Murray United States Senate Washington, D.C. 20510

Dear Senators Brown and Murray:

On behalf of the undersigned organizations, who together represent more than 500,000 physicians, we write in support of the *Ensuring Access to Primary Care for Women and Children Act of 2020*. This legislation would match Medicaid payment rates for primary care clinicians to at least those of Medicare, which would help alleviate barriers to care for patients who are most in need.

Our physicians are working together to ensure that our nation's primary care needs are met during the COVID-19 pandemic and beyond. The Medicaid program is a critical component of this response, providing health insurance to 1 in 5 Americans and covering some of our most vulnerable populations, including low-income children, pregnant women, and families, children with special health care needs, non-elderly adults with disabilities, and other adults, many of whom are uniquely susceptible to COVID-19 and a host of other adverse health outcomes.

Our physicians' efforts to mobilize against COVID-19, including prioritizing telehealth services for patients and delaying certain in-person visits, has slowed COVID-19 transmission and prevented countless deaths. The tradeoff inherent in this arrangement, however, has led to a significant drop in patient visits and increasing financial challenges for practices, disproportionately concentrated among those independent practices in rural and urban underserved communities. According to a recent survey, 40% of primary care practices have had to lay off or furlough staff and 19% temporarily closed due to financial constraints.¹

Physician practices that accept large numbers of Medicaid patients face further challenges still. The low payment rate for Medicaid services compared to that of Medicare or private payers is exacerbating their financial instability. Nationwide, Medicaid payment is 66% of the Medicare rate for primary care services and can be as low as 33% of the Medicare rate, depending on the state. Lack of parity between these rates threatens access to care for some of the most disadvantaged patients when physicians do not have adequate resources to meet their complex care needs.

Data suggest that Americans' health and well-being are in jeopardy if Congress and the administration do not act now to put primary care on a more sustainable path, a reality made all the more clear by the COVID-19 pandemic. While primary care practices are struggling to remain open, 62% of patients said they would be panicked, heartbroken or otherwise find it difficult if their primary care practice were to close.² In the last three months, an additional 12.7 million individuals became newly eligible for Medicaid coverage.³ The demand for primary care physicians in the Medicaid program is more acute than ever.

Inadequate Medicaid payment threatens access to primary care services in areas hardest hit by COVID-19. Without proper support during this public health emergency and beyond, these practices could close forever.

When Congress raised Medicaid primary care payment rates to Medicare levels in 2013 and 2014, patient access improved.⁴ Primary care physicians commit themselves to a long-term relationship with their patients and provide not only first-contact and preventive services but also long-term care for chronic conditions. Vulnerable populations need access to comprehensive primary care, especially now. The *Ensuring Access to Primary Care for Women and Children Act* would return Medicaid payments for primary care services to Medicare payment levels for two years and expand the number of clinicians eligible for this increase to ensure that all Medicaid enrollees have access to the primary and preventive care they need.

The legislation also raises Medicaid payment rates to those of Medicare for the duration of any public health emergency and six months thereafter. During this time of crisis and once things return to normal, it is critical that the Medicaid program be able to respond to take on any qualified new individuals and ensure physicians have the means to serve these new patients.

Your targeted and timely legislation, along with additional financial support for primary care clinicians, will help strengthen our nation's primary care infrastructure and preserve critical health care access for Americans as our country rebounds from the COVID-19 pandemic and in the event of future public health emergencies.

We are pleased to support this important legislation and look forward to working with you to ensure its passage. If you have any questions, please contact Erica Cischke, <u>ecischke@aafp.org</u>.

Sincerely,

American Academy of Family Physicians American College of Obstetricians and Gynecologists American College of Physicians American Osteopathic Association

¹ Etz, Rebecca: "Quick COVID-19 Primary Care Survey" <u>https://www.pcpcc.org/2020/05/26/primary-care-covid-19-week-11-surveys</u>

² Etz, Rebecca: "Quick COVID-19 Primary Care Survey" <u>https://www.pcpcc.org/2020/05/26/primary-care-covid-19-week-11-surveys</u>

³ Garfield, Rachel; Claxton, Gary; Damico, Anthony; Levitt, Larry: "Eligibility for ACA Health Coverage Following Job Loss" <u>https://www.kff.org/coronavirus-covid-19/issue-brief/eligibility-for-aca-health-coverage-following-job-loss/</u>

⁴ Polsky, Daniel; Richards, Michael; Basseyn, Simon; Wissoker, Douglas; Kenney, Genevieve; Zukerman, Stephen; Rhodes Karin: "Appointment Availability After Increases in Medicaid Payments for Primary Care" <u>https://pubmed.ncbi.nlm.nih.gov/25607243/</u>