

SENATE BILL 734

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By: **Senator Lam**

Introduced and read first time: February 7, 2022

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Health and Health Insurance – Primary Care Reform Commission**

3 FOR the purpose of establishing the Primary Care Reform Commission to review, examine,
4 and make certain determinations and recommendations regarding primary care
5 spending by certain payors of health care services and improvements to the quality
6 of and access to primary care services; and generally relating to the Primary Care
7 Reform Commission.

8 BY adding to

9 Article – Health – General

10 Section 20–2201 and 20–2202 to be under the new subtitle “Subtitle 22. Primary
11 Care Reform Commission”

12 Annotated Code of Maryland

13 (2019 Replacement Volume and 2021 Supplement)

14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
15 That the Laws of Maryland read as follows:

16 **Article – Health – General**

17 **SUBTITLE 22. PRIMARY CARE REFORM COMMISSION.**

18 **20–2201.**

19 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
20 INDICATED.

21 (B) “COMMISSION” MEANS THE PRIMARY CARE REFORM COMMISSION.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (C) "PRIMARY CARE" MEANS HEALTH CARE PROVIDED IN THE FOLLOWING
2 FIELDS OUTPATIENT SETTINGS:

3 (1) FAMILY PRACTICE;

4 (2) GENERAL PEDIATRICS;

5 (3) PRIMARY CARE INTERNAL MEDICINE; AND

6 (4) PRIMARY CARE OBSTETRICS AND GYNECOLOGY.

7 (D) "PRIMARY CARE SPENDING" MEANS ANY EXPENDITURE OF FUNDS MADE
8 BY THIRD-PARTY PAYORS, PUBLIC ENTITIES, OR THE STATE FOR THE PURPOSE OF
9 PAYING FOR PRIMARY CARE SERVICES OR SUPPORTING PRIMARY CARE PROVIDERS,
10 REGARDLESS OF PAYMENT METHODOLOGY.

11 20-2202.

12 (A) THERE IS A PRIMARY CARE REFORM COMMISSION.

13 (B) (1) THE COMMISSION CONSISTS OF THE FOLLOWING MEMBERS:

14 (I) THREE MEMBERS APPOINTED BY THE GOVERNOR;

15 (II) FOUR MEMBERS APPOINTED BY THE PRESIDENT OF THE
16 SENATE;

17 (III) THREE MEMBERS APPOINTED BY THE SPEAKER OF THE
18 HOUSE;

19 (IV) ONE MEMBER DESIGNATED BY THE MARYLAND HOSPITAL
20 ASSOCIATION;

21 (V) ONE MEMBER DESIGNATED BY THE MARYLAND NURSES
22 ASSOCIATION; AND

23 (VI) ONE MEMBER DESIGNATED BY MEDCHI, THE MARYLAND
24 STATE MEDICAL SOCIETY.

25 (2) TO THE EXTENT PRACTICABLE, THE MEMBERSHIP OF THE
26 COMMISSION SHALL:

1 **(I) HAVE EXPERIENCE IN HEALTH CARE FINANCING,**
2 **REIMBURSEMENT, AND REGULATION;**

3 **(II) BE COMPOSED OF:**

- 4 1. **PRACTICING PRIMARY CARE PROVIDERS;**
- 5 2. **REPRESENTATIVES OF FEDERALLY QUALIFIED**
6 **HEALTH CENTERS;**
- 7 3. **PROVIDERS FROM PROFESSIONAL PRACTICE**
8 **GROUPS;**
- 9 4. **PRIMARY CARE ADVOCATES;**
- 10 5. **PRIMARY CARE CONSUMER ADVOCATES;**
- 11 6. **REPRESENTATIVES OF BUSINESSES;**
- 12 7. **HEALTH PLAN REPRESENTATIVES; AND**
- 13 8. **REPRESENTATIVES OF HOSPITALS OR HEALTH**
14 **SYSTEMS; AND**

15 **(III) REFLECT THE GEOGRAPHIC DIVERSITY OF THE STATE.**

16 **(C) A CHAIR OF THE COMMISSION SHALL BE SELECTED BY A VOTE OF THE**
17 **MEMBERS OF THE COMMISSION.**

18 **(D) THE MARYLAND INSURANCE ADMINISTRATION AND THE DEPARTMENT**
19 **SHALL PROVIDE STAFF FOR THE COMMISSION.**

20 **(E) (1) THE TERM OF A MEMBER OF THE COMMISSION IS 4 YEARS.**

21 **(2) THE TERMS OF THE MEMBERS ARE STAGGERED AS REQUIRED BY**
22 **THE TERMS FOR MEMBERS OF THE COMMISSION ON OCTOBER 1, 2022.**

23 **(3) A VACANCY IN THE COMMISSION SHALL BE FILLED IN THE SAME**
24 **MANNER AS THE MEMBER BEING SUCCEEDED WAS APPOINTED.**

25 **(F) (1) THE COMMISSION SHALL MEET AS OFTEN AS ITS DUTIES**
26 **REQUIRE, BUT NOT LESS THAN QUARTERLY.**

1 **(2) THE CHAIR OF THE COMMISSION SHALL PROVIDE ALL MEMBERS**
2 **WITH NOTICE OF A MEETING AT LEAST 1 WEEK BEFORE THE DATE OF THE MEETING.**

3 **(3) THE CHAIR OF THE COMMISSION SHALL CALL A MEETING AT THE**
4 **REQUEST OF A MAJORITY OF THE COMMISSION MEMBERS.**

5 **(4) SEVEN MEMBERS OF THE COMMISSION CONSTITUTE A QUORUM.**

6 **(5) ACTION BY THE COMMISSION REQUIRES THE AFFIRMATIVE VOTE**
7 **OF A MAJORITY OF THOSE PRESENT ONCE A QUORUM IS MET.**

8 **(G) A MEMBER OF THE COMMISSION:**

9 **(1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE**
10 **COMMISSION; BUT**

11 **(2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE**
12 **STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.**

13 **(H) THE COMMISSION SHALL:**

14 **(1) REVIEW, EXAMINE, AND MAKE DETERMINATIONS REGARDING**
15 **PRIMARY CARE SPENDING BY ALL PAYORS IN THE CONTEXT OF OVERALL HEALTH**
16 **CARE SPENDING IN THE STATE; AND**

17 **(2) MAKE RECOMMENDATIONS REGARDING:**

18 **(i) WAYS TO IMPROVE THE QUALITY OF AND ACCESS TO**
19 **PRIMARY CARE SERVICES, WITH SPECIAL ATTENTION TO INCREASING HEALTH CARE**
20 **EQUITY, REDUCING HEALTH CARE DISPARITIES, AND AVOIDING INCREASED COSTS**
21 **TO PATIENTS AND THE HEALTH CARE SYSTEM;**

22 **(ii) MEANS OF REDUCING BARRIERS TO PRIMARY CARE ACCESS**
23 **AND UTILIZATION IDENTIFIED BY THE COMMISSION;**

24 **(iii) PROPOSED CHANGES TO THE DEFINITION OF “PRIMARY**
25 **CARE” FOR THE PURPOSES OF THE COMMISSION’S FUTURE WORK; AND**

26 **(iv) RECOMMENDATIONS TO INCREASE SPENDING ON PRIMARY**
27 **CARE BY THE MARYLAND MEDICAL ASSISTANCE PROGRAM AND HEALTH INSURERS,**
28 **NONPROFIT HEALTH SERVICE PLANS, AND HEALTH MAINTENANCE ORGANIZATIONS.**

1 **(I) (1) (I) EACH MANAGED CARE ORGANIZATION PARTICIPATING IN**
2 **THE MARYLAND MEDICAL ASSISTANCE PROGRAM SHALL PROVIDE THE**
3 **FOLLOWING INFORMATION TO THE COMMISSION:**

4 **1. FOR 2017, 2018, 2019, 2020, AND 2021, AND FOR**
5 **EACH SUBSEQUENT YEAR ON THE REQUEST OF THE COMMISSION:**

6 **A. THE AMOUNT THE MANAGED CARE ORGANIZATION**
7 **SPENT ON PRIMARY CARE SERVICES FOR ENROLLEES; AND**

8 **B. THE TOTAL AMOUNT THAT THE MANAGED CARE**
9 **ORGANIZATION SPENT ON HEALTH CARE SERVICES FOR ENROLLEES; AND**

10 **2. ANY OTHER INFORMATION REQUESTED BY THE**
11 **COMMISSION.**

12 **(II) THE SECRETARY SHALL:**

13 **1. ENFORCE THE PROVISIONS OF SUBPARAGRAPH (I) OF**
14 **THIS PARAGRAPH; AND**

15 **2. ADOPT REGULATIONS TO PROTECT THE**
16 **CONFIDENTIALITY OF ANY PROPRIETARY INFORMATION PROVIDED TO THE**
17 **COMMISSION UNDER THIS PARAGRAPH.**

18 **(2) (I) EACH INSURER, NONPROFIT HEALTH SERVICE PLAN, AND**
19 **HEALTH MAINTENANCE ORGANIZATION THAT PROVIDES HOSPITAL, MEDICAL, OR**
20 **SURGICAL BENEFITS TO INDIVIDUALS UNDER HEALTH INSURANCE POLICIES OR**
21 **CONTRACTS THAT ARE DELIVERED IN THE STATE SHALL PROVIDE THE FOLLOWING**
22 **INFORMATION TO THE COMMISSION:**

23 **1. FOR 2017, 2018, 2019, 2020, AND 2021, AND FOR**
24 **EACH SUBSEQUENT YEAR ON THE REQUEST OF THE COMMISSION:**

25 **A. THE AMOUNT THE ENTITY SPENT ON PRIMARY CARE**
26 **SERVICES FOR ENROLLEES; AND**

27 **B. THE TOTAL AMOUNT THAT THE ENTITY SPENT ON**
28 **HEALTH CARE SERVICES FOR ENROLLEES; AND**

29 **2. ANY OTHER INFORMATION REQUESTED BY THE**
30 **COMMISSION.**

(II) THE MARYLAND INSURANCE COMMISSIONER SHALL:

1. ENFORCE THE PROVISIONS OF SUBPARAGRAPH (I) OF THIS PARAGRAPH; AND

2. ADOPT REGULATIONS TO PROTECT THE CONFIDENTIALITY OF ANY PROPRIETARY INFORMATION PROVIDED TO THE COMMISSION UNDER THIS PARAGRAPH.

(J) THE COMMISSION MAY ACCEPT FUNDING OR GRANTS TO AID IN THE WORK OF THE COMMISSION.

(K) ON OR BEFORE DECEMBER 1 EACH YEAR, BEGINNING IN 2023, THE COMMISSION SHALL PROVIDE A REPORT TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2-1257 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY THAT INCLUDES:

(1) AN ANALYSIS OF PRIMARY CARE SPENDING OVER THE IMMEDIATELY PRECEDING YEAR, INCLUDING DATA STRATIFIED BY ZIP CODE AND COUNTY, IN RELATION TO TOTAL HEALTH CARE SPENDING OVER THE PREVIOUS YEAR; AND

(2) ANY FINDINGS AND RECOMMENDATIONS OF THE COMMISSION.

SECTION 2. AND BE IT FURTHER ENACTED, That the terms of the initial members of the Primary Care Reform Commission shall expire as follows:

(1) four members in 2024;

(2) four members in 2025; and

(3) five members in 2026.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2022.