



The Commonwealth of Massachusetts

PRIMARY CARE ACCESS, DELIVERY, AND PAYMENT TASK FORCE

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Clerk of the House
24 Beacon Street, Room 145
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Boston, MA 02133

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24 Beacon Street, Room 335
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Dear Clerks of the Massachusetts House and Senate,

Pursuant to Chapter 343 of the Acts of 2024, please see the Primary Care Access, Delivery, and Payment Task Force (PCTF)'s recommendation to the Massachusetts Legislature to develop a standardized set of data and reporting requirements for private and public payers, providers and provider organizations. The recommendation is available to the public on the [HPC's website](#).

In the [PCTF's third deliverable](#), providing recommendations to the Legislature for establishing a primary care spending target, the PCTF emphasized accountability for both payers and providers, and recommended that the Legislature enact sufficient enforcement mechanisms to ensure payer and provider compliance with both the spending target and affordability requirements. Recognizing that there are significant gaps in information about payments to primary care providers, for both non-claims and claims-based payments, the PCTF recommends additional transparency about the flow of primary care payments within health systems.

As 76% of primary care providers (PCPs) in Massachusetts are employed by or affiliated with large provider organizations, transparency is necessary for the goals of accountability and primary care improvement, especially in the context of policies aimed at increasing the share of overall health care spending on primary care. (See [Deliverable #3](#)). The PCTF recommends the following mechanisms for increasing transparency about the flow of primary care payments:

1. **Attestation and Audit.** The Legislature should require that primary care practices and provider organizations that participate in the advanced primary care model described in [PCTF Deliverable #4](#) execute an attestation that payments are paid to or directed to primary care practices in alignment with the MassHealth Sub-Capitation program, and be subject to payer audits to verify that at least 90-95% of payments are supporting primary care practices.
2. **Reporting to the Massachusetts Registration of Provider Organizations Program.** The Legislature should authorize the Center for Health Information and Analysis (CHIA) and the Massachusetts Health Policy Commission (HPC) to collect information from registrants on

the flow of primary care payments within provider organizations, including claims and non-claims revenue or settlements, as a required component of the current [Massachusetts Registration of Provider Organization \(MA-RPO\) Program](#).

3. **Separate Primary Care Contracts/Tax Identification Numbers.** To further facilitate the transparency and accountability of primary care payments within large health systems, payers and providers should work toward establishing distinct primary care payment contracts that are separate from overall health system contracts.

Please see the attached document for details of the task force's recommendations, and please do not hesitate to reach out to Ashley Caunter, HPC Deputy Chief of Staff, at Ashley.Caunter@mass.gov, with any questions.

Thank you,

Secretary Kiame Mahaniah, Executive Office of Health and Human Services
David Seltz, Executive Director, Massachusetts Health Policy Commission
Primary Care Task Force Co-Chairs