SENATE BILL REPORT SB 5084

As of January 16, 2025

Title: An act relating to health carrier reporting on primary care spending.

Brief Description: Concerning health carrier reporting.

Sponsors: Senators Robinson, Muzzall, Dhingra, Hasegawa, Krishnadasan, Nobles and

Salomon.

Brief History:

Committee Activity: Health & Long-Term Care: 1/16/25.

Brief Summary of Bill

• Directs the Office of the Insurance Commissioner to consider the existing primary care definition and data reporting requirements developed by the Health Care Authority when determining the form and content of health carrier primary care reporting requirements.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Greg Attanasio (786-7410)

Background: The Office of the Insurance Commissioner (OIC) is permitted in statute to include an assessment of health carriers' primary care expenditures as part of its reviews of health plan form or rate filings.

The Health Care Cost Transparency Board (Board), a board within the Health Care Authority (HCA), is responsible for the analysis of total health care expenditures in Washington, identifying trends in health care cost growth, and establishing a health care cost growth benchmark. As part of its work, the Board was tasked with developing a definition of primary care for purposes of calculating primary care expenditures as a proportion of total health care expenditures, as well as measuring and reporting on primary

Senate Bill Report - 1 - SB 5084

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care expenditures in Washington and the progress towards increasing it to 12 percent of total health care expenditures.

HCA uses a single definition of primary care in its contracts with managed care organizations and health carriers for Medicaid and employee benefits coverage, and as part of those contracts, collects a standard set of primary care data.

Summary of Bill: OIC is permitted to require health carriers to annually report primary care expenditures in previous calendar years, or anticipated expenditures for upcoming calendar years. OIC may determine the form and manner of this reporting, however, it must consider the definition of primary care expenditures and any primary care expenditure targets established by the Board as well as primary care expenditure reporting systems implemented by HCA for the Medicaid and employee benefits coverage programs.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: More investment in primary care leads to savings in the system. This bill provides a slight statutory change to align data collection systems across all health insurance markets. This data is an important step toward measuring and understanding overall spending on primary care. Increased spending in primary care is associated with slowing of growth of health care costs overall. Those with chronic conditions rely on primary care providers to manage their condition and increased access is important.

Persons Testifying: PRO: Senator June Robinson, Prime Sponsor; Kevin Wren, Washington #insulin4all; Nico Janssen, Office of the Insurance Commissioner; Jonathan Staloff, Washington Academy of Family Physicians (WAFP).

Persons Signed In To Testify But Not Testifying: No one.

Senate Bill Report - 2 - SB 5084