Components of Strengthening Primary Care Legislation:

- 1. PC spend target 11.5%
  - a. Payments for non-PC spend will be adjusted to compensate for the increase in PC spend, to meet a targeted overall increase in total cost of care, as determined by the benchmarking process
- 2. Incremental increase in PC investment to reach PC spend target
  - a. At least an annual 1.5% increase in PC spend 2022-2025
  - b. To bring PC spend in 2021 up to at least a 5.5% PC spend floor with an immediate increase in all PC reimbursement to 150% of Medicare rates
  - c. At least 60% of PC investment will be through alternative payment models with components of value based care as determined by the PCRC
  - d. Eliminate sunset on SB227
- 3. Expand DOI regulatory authority for oversight of compliance with spend targets, including authority over hospital price unit rates
- 4. Establish regulatory authority to monitor uptake and compliance of providers with a value based care delivery model, as above