The Future of Primary Care to be Debated

Primary Care in Delaware is struggling. More and more practitioners are leaving private practice, joining hospital systems, or adopting concierge and similar models. The constricts are being felt by patients of all ages and new practitioners coming to Delaware to practice are becoming a rarity. For more than a decade, real action on this significant problem has been pushed off in favor of waiting for larger, system-wide change.

Improving Access to Primary Care (SB 199) - Representative David Bentz and Senator Bryan Townsend, the respective Health Committee Chairs, have introduced Senate Bill 199, first of its kind legislation, drafted with the Medical Society of Delaware, which would compel implementation of short-term and long-term fixes to our crumbling primary care system.

SB 199 will (1) establish a temporary reimbursement floor at Medicare rates, many practices being reimbursed as low as 65-85 percent of Medicare by commercial insurers, and (2) start a system-wide shift of insurance and programmatic resources to primary care at a rate of 1 percent a year for a total of 12 percent by the year 2025. Similar investment in other states has been shown to pay for itself, bend the cost curve, and lead to better patient outcomes.

This legislation faces challenges. While the legislation cleared committee, thanks to an outpouring of support from the primary care community, insurers and hospitals in committee expressed opposition. Consensus with the hospitals seems possible, but the pathway for passage by June 30th is not assured without continued physician engagement. It's time for meaningful action. Primary care can't wait any more!

Benchmark Initiative (Executive Order 19) - Secretary Walker and her team continue to host regular meetings regarding the Benchmark initiative. A report from the Health Care Advisory Committee is due June 30th.

Physician-Assisted Suicide (HB 160) - Representative Paul Baumbach's (D-Newark) End of Life Options Act, which would legalize physician-assisted suicide, made it to a House agenda for the second time this session. It was again not brought to a vote after it appeared there wasn't enough support for passage. The Medical Society of Delaware joined with other opposition leaders including the Delaware Healthcare Association, the disability community, and faith community. Read MSD's position statement.

PIP Fee Schedule (SB 161) - Insurance Commissioner Trinidad Navarro is
hosting stakeholder meetings to discuss the path forward on addressing his concerns regarding the Personal Injury Protection (PIP) insurance system. Filed legislation would use the Workers Compensation fee schedule as the basis for PIP payments. After accepting robust feedback, led by MSD, alternative pathways to address systemic concerns are being considered and new legislation is expected next year after continuing conversations.

**Experimental Treatment Coverage (HB 319)** - Retiring House Insurance Chair Bryon Short (D-Brandywine) carried MSD legislation that would give patients consistency in treatment options between insurers, requiring that no treatments may be denied on the basis of being "experimental" if Medicare covers it. HB 319, drafted by the Medical Society of Delaware and vetted by a large stakeholder group, passed the House and Senate unanimously. It awaits the Governor’s signature.

**Expedited Partner Therapy (SB 157)** - The Delaware Chapter of the American College of Obstetricians and Gynecologists (ACOG) drafted and advocated for the codification of the CDC’s expedited partner therapy program. Aimed at curbing the rising sexually transmitted infection rate, more than forty states have created a pathway for allowing physicians to prescribe treatment not only for a patient who presents with an STI, but also his or her partner or partners. It cleared the Senate unanimously in April, House committee in May, and now awaits a House vote in June.

**Infertility Insurance Coverage (SB 139)** - The Delaware Chapter of American College of Obstetricians and Gynecologists (ACOG) closely reviewed and supports legislation to update Delaware’s coverage of infertility treatment. SB 139, a replacement bill for Senate Bill 132, cleared the Senate unanimously and now awaits action by the House.

**Marijuana (HB 110, HB 374, and HB 401)** - The future of adult use recreational marijuana remains uncertain, however, the committee tasked with its study has released its report. In the meantime, legislation to create a pathway to market for FDA-approved marijuana-based products and the inclusion of new disease states to the medical marijuana act have been introduced.

**Opiate Tax (HB 358) and Impact Fees (SB 176)** - Two bills have been filed to build state funds directed at treatment and education around addiction and opiates. The tax is a flat 10 percent tax of the opiate purchase price. The impact fee is a $0.01 per morphine milligram equivalent. The latter bill also connects the fee to prescriptions made in conjunction with the prescription monitoring program to avoid also pulling in prescriptions for medication-assisted treatment (MAT). Both bills aim to ensure that the funds come from the manufacturer and not the patient, but concerns around enforcement of this mechanism have been raised.

**Mental Health and Guns (HB 302)** - Rep. David Bentz’s "Beau Biden Gun Violence Prevention Act" was signed into law by the Governor on April 30th after unanimous passage in both chambers. It is named after the 2015 efforts by former Attorney General Beau Biden.

**Paid Family Leave (HB 3)** - Governor Carney is asking for physician support regarding legislation giving state employees paid family leave after the birth of a child. This legislation is supported by MSD and the Delaware Chapter of the American College of Obstetrics and Gynecology. If signed, state employees would receive 12 weeks of parental leave.
June 30th Approaches - There is an extra May budget week in this year’s legislative calendar. Historically, the larger General Assembly breaks for two weeks to allow the smaller Joint Finance and Bond Committees to meet and do their work. This year an extra week has been added to that process which results in the legislature breaking May 10th and not convening again until June for their mad dash to the Constitutional deadline to finish their work this session.

MSD actively monitors all health related legislation and maintains an active and visible presence in Legislative Hall on your behalf.

If you have questions, please contact Mark B. Thompson, Executive Director at 302-444-6958, Mark.Thompson@medsocdel.org or Drew Wilson, Esq. at 302-888-6878, awilson@morrisjames.com.

*The Medical Society of Delaware Legislative e-update is a benefit to our members, providing information on legislative activity of interest in the 149th General Assembly in Dover.*