

David Hilden, MD, MPH, FACP Governor

Sally Berryman, MD, FACP Health Policy Committee Chair

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Senator Ron Latz Minnesota Senate Building St. Paul, MN 55155 nicole.kaplan@senate.mn

Dear Senator Latz and Members of the Senate Judiciary and Public Safety Committee:

On behalf of the Minnesota chapter of the American College of Physicians, we respectfully encourage you to support and vote in favor of **SF302** to more fully disclose certain payments made to health care providers, make modifications to the all-payer claims data system and increase the transparency of health care payments. The Minnesota chapter of the American College of Physicians (MN-ACP) represents nearly 2500 internal medicine physicians and internal medicine trainees that take care of adult patients in clinics and hospitals throughout the state.

- The All Payer Claims Database (APCD) has been a useful tool to understand healthcare spending in Minnesota and to identify health disparities and under/over utilization in regions of our state.
- Currently, non-claims payments from insurance/health plans are unreported. Only health care claims data is collected/reported.
- Medical, Behavioral health and dental health payments made based on improved patient outcomes, to encourage care coordination, and reduce unnecessary care are not collected.
- The American College of Physicians envisions a health care system where financial incentives are aligned to achieve better patient outcomes and lower costs and to reduce inequities in healthcare (1).
- Internists have unique training and skills in providing primary, preventive and comprehensive care to adults, particularly in the diagnosis, treatment, and management of patients with complex conditions. Access to primary care has been associated with higher quality of care (2,3), lower system costs (4,5,6,7), higher patient satisfaction (8), and lower mortality rates (9,10).
- Reporting care coordination done at the primary care clinic and hospital level to encourage improved patient outcomes, care coordination and reduce unnecessary testing and care is not collected in the current Minnesota APCD system. Minnesotans deserve high value health care.

Thank you for your consideration. Please contact Minnesota.ACP@gmail.com if you have any additional questions.

Sincerely yours,

David Attilden

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cc: Senators Mann, Draheim, and Utke

- 1. Reforming Physician Payments to Achieve Greater Equity and Value in Health Care: A Position Paper of the American College of Physicians. Ann Intern Med. July 2022. <u>https://www.acpjournals.org/doi/10.7326/M21-4484</u>
- 2 Influence of primary care on breast cancer outcomes among Medicare beneficiaries. Ann Fam Med. 2012.
- 3 Contribution of primary care to health systems and health. Milbank Quarterly. 2005.
- 4 National study of barriers to timely primary care and emergency department utilization among Medicaid beneficiaries. Ann Emerg Med. 2012
- 5 Health care utilization and the proportion of primary care physicians. Am J Med. 2008.
- 6 Can PC visits reduce hospital utilization among Medicare beneficiaries at the end of life? J Gen Intern Med.

- 8 Linking primary care performance to outcomes of care. J Fam Pract. 1998
- 9 Primary care attributes and mortality: A national person-level study. Ann Fam Med. 2012. 10

10 Primary Care Physician Supply and Population Mortality:2005-2015. JAMA. 2019. https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2724393

⁷ Medicare spending, the physician workforce, and beneficiaries' quality of care. Health Aff. 2004.