



# IMPROVING MINNESOTA'S INVESTMENT IN PRIMARY CARE

## *Understanding Health Care Spending in Minnesota*

---

Primary care, when given the appropriate infrastructure and support, delivers **better health, better care and lower costs.**

---

(Primary Care Collaborative, 2020)

---

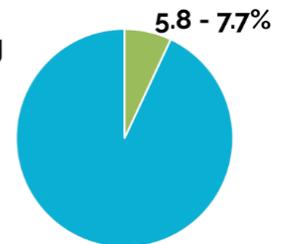
### The Problem

Health care costs are high and unaffordable for many Minnesotans, and primary care—*taking care of the whole patient*—is not valued and is underfunded.

- **In the U.S., spending on office visits to primary care providers continues to decline** (Patient-Centered Care Collaborative, 2019). This pattern of spending runs counter to the goal of meeting patient needs in a manner that contains or reduces costs and also increases the primary care workforce shortage by incentivizing non-primary care specialties.
- **Our health care system's current fee-for-service payment model isn't working.** Fee-for-service rewards provision of more services versus efforts to prevent patients from getting sick in the first place, overvaluing procedures/interventions and undervaluing management of chronic conditions, prevention and wellness care.

### U.S. Health Care Spending

- Other Health Care Spending
- Primary Care Spending



graph source: <https://www.pcpcc.org/topic/primary-care-investment>  
(accessed 1/9/22)

#### References:

Primary Care Collaborative. (2020) Primary Care Investment. Retrieved from: [www.pcpcc.org/topic/primary-care-investment](https://www.pcpcc.org/topic/primary-care-investment)

Patient-Centered Primary Care Collaborative. (July 2019) Investing in Primary Care: A State-Level Analysis (Executive Summary). Retrieved from: [www.pcpcc.org/resource/investing-primary-care-state-level-analysis](https://www.pcpcc.org/resource/investing-primary-care-state-level-analysis).

### The Solution

**We need greater investment in primary care that incentivizes keeping people healthy** and recognizes *the importance of population health through chronic disease management, preventive health services and addressing health disparities.*

# Improving Minnesota's Investment in Primary Care

## Our Next Steps

To improve health care payment models and Minnesota's investment in primary care, **we first need to understand the whole picture of health care spending in our state.** Currently, Minnesota only collects claims data, which misses all non-claims based payments, including value-based payments, infrastructure costs, care coordination and other patient support services.

HF 926 / SF 302 will do the following:

- **Conduct interviews with health plan companies and third-party administrators** to better understand the types of non-claims based payments in use and their goals.
- **Require payers to annually submit non-claims, value-based payment data** to the Minnesota Department of Health (MDH).
- **Require MDH to report Minnesota's current claims and non-claims data and the state's investment in primary care.**

These actions will give policymakers a **clearer, more comprehensive picture of Minnesota's health care spending.** Only with the whole picture can we begin to set a vision for a payment system that is value not volume based, **with a focus on keeping Minnesotans healthy while also addressing health disparities and improving cost efficacy.**

For more information about HF 926 / SF 302 or to connect with a family physician, contact:

**Dave Renner, CAE**

Lobbyist

612-518-3437

[drenner@mnmed.org](mailto:drenner@mnmed.org)

**Jami Burbidge, MAM**

Chief Operating Officer

952-224-3874

[jami@mafpo.org](mailto:jami@mafpo.org)



### What Is Primary Care?

*"[It] is the provision of integrated, accessible health care services by clinicians who are accountable for:*

- *addressing a large majority of personal health care needs*
- *developing a sustained partnership with patients and*
- *practicing in the context of family and community."*

*– Institute of Medicine*

Primary care includes **preventive health services, mental health care, treatment for common illnesses** and **chronic disease management.**

Family physicians provide comprehensive primary care across the lifespan, serving as the entry point for most of a patient's health care needs and helping coordinate care with other specialists.

### About the Minnesota Academy of Family Physicians

Representing **more than 3,100 family physicians, family medicine residents and medical students**, the Minnesota Academy of Family Physicians (MAFP) is a state chapter of the American Academy of Family Physicians (AAFP) and the largest physician specialty organization in Minnesota.