



March 2, 2018

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## SENATE RESOLUTION No. 29

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### DIGEST OF RESOLUTION

A SENATE RESOLUTION urging the legislative council to assign to the appropriate study committee the topic of a direct primary care pilot program for Indiana Medicaid and Healthy Indiana Plan (HIP) participants.

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## **Koch, Stoops**

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February 20, 2018, read first time and referred to Committee on Health and Provider Services.  
March 1, 2018, reported favorably — Do Pass.

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## SENATE RESOLUTION No. 29

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MADAM PRESIDENT:

I offer the following resolution and move its adoption:

1           A SENATE RESOLUTION urging the legislative council  
2 to assign to the appropriate study committee the topic of a direct  
3 primary care pilot program for Indiana Medicaid and Healthy  
4 Indiana Plan (HIP) participants.

5           *Whereas, As defined in Senate Enrolled Act 303-2017,*  
6 *"direct primary care agreement" means a contract entered into*  
7 *between a primary care provider or an employer of a primary*  
8 *care provider and an individual patient or the patient's legal*  
9 *representative in which the primary care provider or the*  
10 *employer of the primary care provider agrees to provide*  
11 *primary care health services to the individual patient for an*  
12 *agreed upon fee and time, does not bill a third party that*  
13 *provides coverage to the patient for the primary care health*  
14 *services, and charges a periodic fee for the primary care health*  
15 *services;*

16           *Whereas, Direct primary care programs allow individuals to*  
17 *obtain care without worrying about co-pays or insurance*  
18 *claims, deductibles, and limited networks;*

19           *Whereas, Direct primary care program members have direct*  
20 *access to a physician regardless of pre-existing conditions, age,*  
21 *or illness;*

22           *Whereas, Medicaid patients often exhibit complex and*  
23 *expensive co-morbidities and pre-existing conditions, yet are*

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1     *less likely to have regular contact with a dedicated primary*  
2     *care physician, resulting in a less medically compliant, higher*  
3     *cost health population, due to limited acceptance of Medicaid*  
4     *patients by physicians primarily due to Medicaid payments*  
5     *being insufficient to offset the cost of providing such care, and*  
6     *nonclinical administrative burdens placed upon physicians who*  
7     *treat Medicaid patients; and*

8             *Whereas, Direct primary care programs may offer Medicaid*  
9     *and HIP patients improved access to care at a lower cost:*  
10    *Therefore,*

11                             *Be it resolved by the Senate*  
12                             *of the General Assembly of the State of Indiana:*

13             SECTION 1. That the legislative council is urged to assign to  
14     the appropriate study committee the topic of a direct primary  
15     care pilot program for Indiana Medicaid and Healthy Indiana  
16     Plan participants.



COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Resolution No. 29, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said resolution DO PASS.

(Reference is to SR 29 as introduced.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 8, Nays 0

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