

# DOCTOR DAY 2021

## *Advocacy at the Capitol*



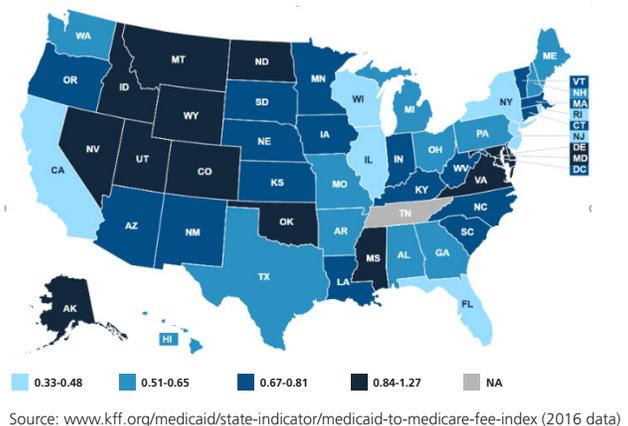
### Access to Care—Strengthening Wisconsin’s Medicaid Program

Physicians from across the state recommend prioritizing improvements to and investments in the state’s Medical Assistance program to ensure citizens throughout Wisconsin have greater access to high quality, physician-led care.

#### Medicaid Lags in Paying for Physician-Provided Services, Including for Emergency and Primary Care

National studies consistently show that Medicaid payment rates correlate with physicians’ ability to accept new Medicaid patients. Unfortunately, current Medicaid reimbursement often falls below the basic costs of providing that care. As the map (right) shows, Wisconsin’s Medicaid reimbursement for the most common primary care office visits is in the bottom quartile when compared to Medicare reimbursement for the same services.

Wisconsin’s emergency physician reimbursements for common Medicaid services also lag significantly behind not only neighboring states, but nationally. The most recent survey data (2019) shows that for one of the most used service codes, Wisconsin’s emergency physicians receive the lowest reimbursement in the nation. Governor Tony Evers’ 2021-23 biennial budget includes \$15.66 million over the biennium (with \$9.7 million of that in federal matching funds) for a much-needed increase in emergency physician reimbursement. This increase is estimated to raise certain Medicaid reimbursement to 50 percent of the Medicare rate.



We ask that you support Gov. Evers’ emergency physician rate increase and also provide increased funding to diminish the payment disparity between Medicaid and Medicare rates for primary care services. Current reimbursement disparities are stark for routine office visits in Wisconsin. For example, CPT billing code 99213 is the most frequently used code for office visits to family doctors and is used at visits that address chronic issues such as diabetes, depression, and high blood pressure, as well as sudden illnesses like sore throats and sinus infections. Wisconsin Medicaid reimbursement for that visit is \$32.12. Medicare reimbursement for the same visit is \$72.05.

A potential funding source for these and other needed Medicaid improvements includes accepting additional federal funding (almost \$1.4 billion over the biennium) as offered through the federal Patient Protection and Affordable Care Act (ACA). But whether funding through this possible mechanism or via existing appropriations, **Wisconsin’s physicians ask you to help ensure Medicaid patients have ready access to these vital physician-led services.**

#### Postpartum Medical Assistance Coverage

Governor Evers’ budget proposal extends Medicaid coverage for MA-eligible pregnant women from 60 days post-partum to one year post-partum. New mothers can face serious health complexities up to one year after delivery, and new mothers with high-risk pregnancies or existing chronic conditions are even more at risk for pregnancy-related health complexities. Disruptions in health care coverage at such a critical time can negatively affect both the mother and the new baby. Extending post-partum coverage will positively impact maternal morbidity and mortality rates and ultimately benefit and strengthen Wisconsin families. Simply put: in a modern health care system, pregnancy-related deaths should never occur. **We request your support for extending post-partum Medicaid coverage for an additional 10-month period.**