Exhibit 1
Primary Care Coverage Provisions

Number of states that reference a given subtopic in their contractual agreements

- Medical necessity, children: 9
- Medical necessity, adults: 36
- Prior authorization barred for primary care: 7
- EPSDT vision, oral, hearing care: 36
- EPSDT developmental assessment: 26
- ACIP-recommended immunization for adults: 19
- Adult preventive services: 26
- Family planning and related services: 36
- Primary care defined: 9

Data: George Washington University analysis of 40 state Medicaid managed care purchasing documents including requests for proposals, model contracts, and/or executed contracts publicly available as of October 1, 2019.
Exhibit 2
Contract Provision Related to Social Determinants of Health

Number of states that reference a given subtopic in their contractual agreements

- Member education for SDOH: 5
- Care coordination spanning SDOH: 24
- SDOH quality performance measures: 11
- Dedicated managed care organization staff: 17
- Provider training in SDOH: 10
- Social determinant expenditure requirements/incentives: 3
- Managed care/social service provider relationship: 31
- Collection and reporting of social determinant information: 7
- Value-added services that involve paying for social determinant–related interventions: 7
- Social determinant screening in primary care: 24

Note: SDOH = social determinants of health.

Data: George Washington University analysis of 40 state Medicaid managed care purchasing documents including requests for proposals, model contracts, and/or executed contracts publicly available as of October 1, 2019.
Exhibit 3
Primary Care Patient Supports

Number of states that reference a given subtopic in their contractual agreements

- Community health workers: 12 states
- Continuity of care and transition across health care settings/plans: 40 states
- Beneficiary access supports: 40 states
- "In lieu of" flexibility to allow substitution of services under certain conditions: 30 states

Data: George Washington University analysis of 40 state Medicaid managed care purchasing documents including requests for proposals, model contracts, and/or executed contracts publicly available as of October 1, 2019.
Exhibit 4
Performance Measurement and Quality Improvement

Number of states that reference a given subtopic in their contractual agreements

- Consumer primary care experience: 40
- Auto-assignment tied to primary care performance: 24
- Primary care practice support: 26
- Value-based payment linked to primary care effectiveness: 29
- Women’s preventive health: 39
- Primary care performance linked to payment: 36
- Care teams: 34
- Pediatric preventive care: 40
- Adult preventive care: 40

Data: George Washington University analysis of 40 state Medicaid managed care purchasing documents including requests for proposals, model contracts, and/or executed contracts publicly available as of October 1, 2019.
# Primary Care Payment Methods and Incentives

Number of states that reference a given subtopic in their contractual agreements

<table>
<thead>
<tr>
<th>Payment Type</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payment tied to clinical outcomes</td>
<td>27</td>
</tr>
<tr>
<td>Payment tied to utilization</td>
<td>14</td>
</tr>
<tr>
<td>Payment tied to health outcomes</td>
<td>6</td>
</tr>
<tr>
<td>Payment tied to investment in practice transformation</td>
<td>19</td>
</tr>
</tbody>
</table>

Data: George Washington University analysis of 40 state Medicaid managed care purchasing documents including requests for proposals, model contracts, and/or executed contracts publicly available as of October 1, 2019.

Source: Sara Rosenbaum et al., *How States Are Using Comprehensive Medicaid Managed Care to Strengthen and Improve Primary Health Care* (Commonwealth Fund, July 2020).
Exhibit 6
Information Exchange and Health Information Technology

Number of states that reference a given subtopic in their contractual agreements

- Submission of health information to generate performance reports and use of decision support tools: 22 states
- Adaptive technology: 35 states
- Mobile technology: 32 states
- Information exchange with other agencies/programs: 36 states
- E-prescribing: 13 states
- Information exchange across practice settings: 39 states

Data: George Washington University analysis of 40 state Medicaid managed care purchasing documents including requests for proposals, model contracts, and/or executed contracts publicly available as of October 1, 2019.

Source: Sara Rosenbaum et al., How States Are Using Comprehensive Medicaid Managed Care to Strengthen and Improve Primary Health Care (Commonwealth Fund, July 2020).