Maine Quality Forum

MEASURING TO IMPROVE

MAINE PRIMARY CARE ADVISORY COUNCIL

October 31, 2025

2:00-3:30 Virtual Meeting

Agenda for the First Meeting of the Primary Care Advisory Council (PC AC)

2:00-2:45	I. Welcome and Introductions
2:45-3:00	II. Overview of Public Law 2025, Chapter 218 & Rural Health Transformation Program
3:00-3:10	III. PC AC Strategic Planning Process
3:10-3:20	IV. Action Items
3:20-3:30	V. Next Steps and Timeline

Meet Members of the PC AC

Please share the following (1-2 minutes per member):

- Your name
- Organization
- The seat you have been appointed to on the Council
- Overview of current responsibilities
- What do you see as the most immediate need that, if addressed, will help support a sustainable, high-functioning primary care system in Maine?

Meet the Team that will Staff the PC AC

- Karynlee Harrington, Executive Director of the Maine Health Data Organization and Maine Quality Forum
  - Primary deliverable in the MQF and USM Cooperative Agreement is supporting the MQF's work specific to Primary Care, including annual PC reporting, analysis, and staffing support for new PC AC.
- Kimberley Fox, Senior Research Associate and Project Lead on MQF/USM Cooperative Agreement, University of Southern Maine
  - Other USM MQF team members and consultants
    - Carolyn Gray, Research Associate
    - Jennifer MacKenzie, Policy Associate
    - Erin Ervin, Research Associate
    - Consultants - Jean Talbot, Cathy McGuire, Judy Loren

Summary of Public Law 2025 Chapter 218

PL 2025, Chapter 218, *An Act to Amend the Laws Governing Primary Care Reporting by the Maine Quality Forum **and** to Establish the Primary Care Advisory Council*, requires MQF to establish, convene, and staff the Primary Care Advisory Council (PC AC) https://legislature.maine.gov/backend/App/services/getDocument.aspx?documentId=119436

- PL 2025, Chapter 218, effective September 24, 2025

Annual MQF Report (starting with the report submitted to the Legislature and the Commissioner of DHHS in January 2026)

- Expands the reporting requirement to at least one of the following measures reflecting the status of primary care in the State. Spending, Utilization, Workforce Capacity, Access, and Overall Health Status of Mainers.

Summary of Public Law 2025 Chapter 218

Primary Care Advisory Council

Creates an 18-member Primary Care Advisory Council (PC AC) responsible for identifying specific actions required to create a sustainable, high-functioning primary care system in the State.

Terms: Except for legislators and ex officio members, members of the advisory council serve three-year terms. A member may not serve more than 2 consecutive terms.

- The terms of Legislators serving as members of the advisory council coincide with those members' legislative terms of office.

Staggered Terms Required as follows: of the initial non-legislative and non-ex officio appointments made to the Primary Care Advisory Council,

- 4 members must be appointed to one-year terms
- 5 members must be appointed to 2-year terms and
- 5 members must be appointed to 3-year terms

Summary of Public Law 2025 Chapter 218

Primary Care Advisory Council

Beginning January 15, 2026, and annually thereafter, the PC AC must submit a report (to the Commissioner of the Department of Health and Human Services and the Legislative Committee on Health Coverage, Insurance and Financial Services) detailing its activities and recommendations for specific policy changes to address identified gaps that will

(a) Ensure **sufficient investment in primary care services** that will result in better health for residents of the State and lower overall health expenditures

(b) Ensure **a sufficient number and geographic distribution of primary care providers** so that each resident of the State has a primary care provider near that resident's home, with a focus on ensuring equity in all counties

(c) Ensure a resident's ability to **access services from a primary care provider in a timely manner**; and

(d) Improve the health of residents by ensuring **adequate access to preventive and screening services**

Summary of Public Law 2025 Chapter 218

Primary Care Advisory Council

Meetings are Public and will be held virtually to accommodate schedules and distance

- Council must meet at least 4 times a year
- A quorum is a majority of members of the council (10 members)
- Council must choose one of its members to serve as chair for a 2-year term
- The chair may request additional meetings as needed
- Meetings will be 1.5-2 hours, depending on the meeting agenda
- Meeting agendas and supporting documentation will be released to the Council in advance of each meeting
- MQF has created a Primary Care Advisory Council page on its website where all meeting documentation will be posted.

Summary of Public Law 2025 Chapter 218

Primary Care Advisory Council

- If an AC member can not attend a PC AC meeting, an alternative representative can not be sent in their place.
- When voting, the Chair will call on each AC member to register their vote verbally. Voting must be done at the public meeting.
- **This new law is repealed on January 15, 2031 (referred to as a sunset provision)**

Rural Health Transformation Program

- **H.R. 1 (July 2025)**
  - Creates changes to Medicaid & Marketplace enrollment → Maine providers projected to lose ~$5B in federal healthcare funding over 10 years
  - Rural health providers at risk for higher costs, more uninsured patients
- **RHTP Program**
  - Funded with in HR1 to provide funds to support rural health at $50B over 5yrs, one-time funding
    - $5B/yr distributed equally across all 50 states = $100M/year per state X 5 yrs
    - $5B/yr distributed to more rural states, as determined by CMS = Amnt TBD
  - CMS administering program → shifted focus from rural provider payments to rural health transformation
- **CMS RHTP Goals**
  - Make rural America healthy again
  - Sustainable access
  - Workforce development
  - Innovative care
  - Technology innovation

Rural Health Transformation Program

- **Maine RHTP Application**
  - CMS directed states to submit with “theoretical” $200M/yr budget (but confident of only $100M/yr X 5yrs)
  - Will get decision from CMS on funding by Dec 31, 2025
  - Rural health providers at risk for higher costs, more uninsured patients
- **Maine RHTP Initiatives**
  1. Population Health: Promoting timely access to high-quality care
  2. Workforce: Strengthening Maine’s rural health workforce
  3. Technology Innovation: Modernizing rural care delivery with digital health technology
  4. Access: Bridging the healthcare affordability gap for rural Mainers
  5. Sustainable rural health ecosystems: Addressing financial instability of rural providers
- **Opportunities for Primary Care: Some highlights…**
  1. Population Health: Evidence-Based Programs; CHWs, Community Paramedicine; Mobile Health
  2. Workforce: “Awards” to recruit providers to rural communities, in exchange for 5yr commitment
  3. Technology Innovation: EMR upgrades, enhancements; telehealth programs; eConsults; AI tools & Rural AI Hub
  4. Access: Funding for uncompensated care, uninsured individuals; transportation initiatives
  5. Sustainable rural health ecosystems: Regional rural health planning; TA for rural providers

Development of a 5-YR Strategic Plan

Staff recommends that the Council support the development of a 5-year strategic plan, grounded in the Council's requirements, which will help organize deliverables and guide the work of the Council and Staff.

- Review Excel Template
- If the Council agrees, staff will draft the plan for the Council’s review, revisions and final approval.

Discussion

Decision of Council

Time Sensitive Actions

Elect a Chair of the Council, establish the meeting schedule for the remainder of 2025 and for CY 2026, and agree on the outline for the first annual report of the PC AC.

Staff Recommendations:

1. Elect a co-chair
2. Meet in December 2025 (12/19 or after), to elect the chair and co-chair, and provide feedback on the PC AC's first annual report and MQF's annual Primary Care Report (60-minute meeting)
    - Email Karynlee.Harrington@maine.gov your interest in the role of Chair and Co-Chair (assumes AC agrees) by November 7th.
3. Meet in the months of February, May, August, and November 2026

PC AC DRAFT Annual Report Outline

Draft Outline for Council's Consideration

1. Overview of PL 2025, Chapter 218**,** *An Act to Amend the Laws Governing Primary Care Reporting by the Maine Quality Forum and to Establish the Primary Care Advisory Council*

2. Council Membership

3. Summary of the first meeting(s) of the PC AC

4. Overview of the development of a 5-year strategic plan (assuming PC AC agrees with this approach)

New Page on MQF Website

Primary Care Advisory Council. All meeting materials, including agendas, supporting documentation, meeting notes, and meeting dates and times, will be posted on this page.

Go to the MHDO website and click on the Maine Quality Forum Logo (top right-hand corner of home page)

mhdo.maine.gov