



*Commonwealth of Virginia*

*Virginia Department of Medical Assistance Services*

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Contact: Christina Nuckols

[christina.nuckols@dmas.virginia.gov](mailto:christina.nuckols@dmas.virginia.gov)

## **Virginia Medicaid Agency Releases Report on Access to Primary Care**

*~ Statewide provider network is adequate to handle  
expansion, but inequities persist based on race, income ~*

**Richmond** – The Virginia Department of Medical Assistance Services (DMAS) today released a [report demonstrating that the state has an adequate network of primary care providers](#) to ensure access to care in the Commonwealth, with a significant majority of providers currently treating Medicaid members and accepting new patients with Medicaid coverage.

“Primary care providers are crucial to our agency’s mission of improving the health and well-being of Virginians through access to high-quality health care coverage,” said Karen Kimsey, DMAS Director. “They serve on the front lines of our health system, responding to a majority of the health needs for Virginians and their families. They are trusted advisers and healers, offering preventive care, chronic disease management, emergency treatment and behavioral health services. This report gives us valuable insights as we develop measures to preserve and strengthen our provider network at a time when the need for their skills is most urgent.”

DMAS contracted with Virginia Commonwealth University to evaluate the primary care network in preparation for the state’s expansion of Medicaid eligibility in January 2019. More than 440,000 Virginia adults are now enrolled and receiving services under the expanded program.

“Research tells us that individuals with a primary care provider are healthier and more likely to receive cost-effective, evidence-based medical care,” said Ellen Montz, DMAS Chief Deputy Director and Chief Health Economist. “As the Medicaid program grows to serve more Virginia adults, it is vital that our new and existing members have meaningful access to primary care to ensure better health outcomes. This reports offers guidance on how to make the best and most efficient use of existing resources to achieve this goal.”

While assessing the statewide capacity of the health workforce, the report acknowledges inequities that create barriers to care for Virginians living in communities with a higher proportion of racial and ethnic minorities, as well as rural areas of the Commonwealth.

“Primary care providers are essential to our work to address health inequities within our Commonwealth,” said Chethan Bachiredy, DMAS Chief Medical Officer. “They are the foundation for a health care system that guarantees continuous, coordinated and comprehensive care for all Virginians. This analysis gives us hope that we have the tools to make this vision a reality, but it also reminds us that there is much work to do.”

Last month, Governor Ralph Northam approved an estimated \$30 million in emergency support for primary care doctors, pediatricians and other providers who offer general health care services to Virginia Medicaid members during the COVID-19 public health crisis. The initiative enables swift relief for struggling health care providers without the need for new expenditures from the state budget. The plan redirects existing dollars in the FY 2020 state budget to fund a 29% rate increase for patient office visits related to the evaluation and management of health conditions.

The new report documents a primary care workforce in Virginia that includes more than 1,600 adult primary care practices and more than 5,300 primary care clinicians. With a ratio of 83 primary care clinicians for every 100,000 state residents, Virginia ranks 25 out of 50 states. In a survey of primary care physicians, 76% reported that they accept Medicaid coverage. However, a separate analysis suggests that the number of physicians providing care to Medicaid members is even greater than those who reported serving these Virginians, with 82% of primary care physicians in Virginia submitting claims for treatment of Medicaid members in 2016.

Among survey respondents, 58% said they are taking new Medicaid patients, and 14% were actively expanding capacity by hiring new staff or broadening services. Most primary care practices have implemented strategies to increase access to care, and many routinely address the mental and behavioral health needs, including substance use disorders, of their patients.

The report underscored the inequities that exist in Virginia, inhibiting access to primary care for racial and ethnic minorities, lower-income individuals and families, and those with lower educational attainment. The analysis also noted that rural communities experience barriers due to lengthy travel requirements to visit a primary care clinician.