# **2025 PRE-FILED TESTIMONY**

### TOP AREAS OF CONCERN FOR HEALTH PLANS AND PROVIDERS:



Federal policy changes



Health equity



Primary and behavioral health care



Prescription drug costs



of health plans and providers expressed concerns with the anticipated impacts of federal policy changes on health equity and access, including:

- Changes to Medicaid and ACA Marketplace eligibility
- Reductions in funding for Medicaid, scientific research, and enhanced ACA premium tax credits
- Opposition to gender-affirming and reproductive health care
- · Increased immigration enforcement

### **PHARMACEUTICAL**

**MANUFACTURERS** highlighted the need to reform the federal 340B program and PBM industry to increase transparency.

## **PHARMACY BENEFIT MANAGERS**

**(PBMs)** called for greater transparency across all parts of the drug supply chain.

### SIGNIFICANT EQUITY INVESTORS

shared their belief that their investments in the Massachusetts health care system can increase efficiency.

# MANAGEMENT SERVICES ORGANIZATION (Brady Health

**Buyer)** stated that its MSO model enabled its affiliate, Revere Medical, to focus its attention and resources on clinical care.

#### **HEALTH PLANS**



Emphasize the value they see in **utilization management** tools



Have implemented policies to strengthen members' access to **primary care** 



Cite **provider price increases** as a main challenge in slowing spending growth





Support policies to streamline prior authorization processes



Have implemented policies to integrate behavioral health care into primary care



Prioritize keeping patients in their community at **lower-cost settings** 



The full list of entities required to file testimony and submissions are available on the HPC's website at MassHPC.gov/2025-CTH

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#### PRIMARY CARE

- 88% of providers mentioned primary care and behavioral health providers as the roles facing the greatest shortages.
- 78% of health plans prioritize the adoption of value-based payment models to incentivize high-value care, including primary care.
- 67% of health plans are making strategic investments to support their members' access to primary care



- 100% of pharmaceutical manufacturers called for reform to the federal 340B drug pricing program to ensure that the program benefits the low-income patients it is intended to serve.
- 100% of PBMs use their **formularies to drive utilization of biosimilars** and to lower spending.
- 67% of health plans highlighted the role of GLP-1s, and 56% highlighted the role of specialty drugs in driving pharmacy spending.
- 56% of health plans have adopted strategies to shift patients to generic and biosimilar drugs to lower costs.
- 43% of pharmaceutical manufacturers have publicly expressed plans to participate in the TrumpRx program.



#### **ADMINISTRATIVE COMPLEXITY**

- 100% of health plans are making **technological improvements** to streamline administrative processes.
- 67% of health plans signed an industry pledge committing to improve prior authorization processes.
- 36% of providers highlighted the programs they have implemented to increase organizational efficiency and reduce operating costs.



#### **POLICY RECOMMENDATIONS**

- 75% of PBMs called for federal patent reform to address manufacturers' ability to set high drug prices and limit competition.
- 64% of providers recommend that the state invest in financial supports for health care education, training, clinical fellowships and practicums, and loan forgiveness.
- 60% of providers called on the state to implement policies that support MassHealth enrollees in remaining enrolled to the maximum extend possible.
- 44% of health plans recommended policies that support **interoperability initiatives**.
- 36% of providers called on the state to address existing and anticipated funding gaps in the Health Safety Net program.
- Community health centers advocated for the establishment of a commercial rate floor equal to Medicaid rates for services provided by Federally Oualified Health Centers.



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