

**GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2025**

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**HOUSE BILL 629**

Short Title:    Extend Primary Care Task Force. (Public)

Sponsors:    Representative Reeder.

*For a complete list of sponsors, refer to the North Carolina General Assembly web site.*

Referred to:   Health, if favorable, Rules, Calendar, and Operations of the House

April 2, 2025

A BILL TO BE ENTITLED  
AN ACT TO EXTEND AND CLARIFY THE PRIMARY CARE PAYMENT REFORM TASK  
FORCE.

The General Assembly of North Carolina enacts:

**SECTION 1.** Section 9E.28 of S.L. 2023-134 reads as rewritten:

**"SECTION 9E.28.(a)** There is established the North Carolina Primary Care Payment Reform Task Force (Task Force) within the Department of Health and Human Services, Division of Health Benefits, for budgetary purposes only.

...

**"SECTION 9E.28.(b)** The Task Force established under subsection (a) of this section shall have the following duties:

- (1) Establish a definition of primary care to be utilized by the Task Force. This term should be applicable to services and care provided under the NC Medicaid program, the State Health Plan, and commercial insurance.
- (2) Conduct an actuarial evaluation of the current healthcare spend on primary care services, both as it relates to the NC Medicaid program and the commercial market, including Medicare Advantage plans.
- (3) Determine the adequacy of the primary care delivery system in North Carolina, including the impact this system has on the supply of the primary care providers in this State.
- (4) Study the primary care payment landscape in other states, specifically considering states that have implemented a minimum primary care spend.
- (5) Identify data collection and measurement systems to inform creation of a primary care investment target for the NC Medicaid program, the State Health Plan, and commercial insurance. This includes a method by which to measure improvements made toward that target.
- (5a) Collect and compile data and other information related to healthcare spend on primary care services in a manner that is compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Within 30 days of a request for data or information from the Task Force, all entities shall comply with the Task Force's request.
- (6) Evaluate the need for a permanent Primary Care Payment Reform Task Force, or other similar entity, including which State agency or body is best suited to oversee the work of that group.



(7) Perform any other studies, evaluations, or determinations the Task Force considers necessary.

**"SECTION 9E.28.(b1)** The Department of Health and Human Services shall develop, and the Task Force and the Department of Health and Human Services shall implement, a detailed data security and safeguarding plan for the data requested pursuant to subsection (b) of this section that includes all of the following:

(1) Guidelines for authorizing access to the data, including guidelines for authentication of authorized access.

(2) Privacy compliance standards.

(3) Privacy and security audits.

(4) Breach planning, notification, and procedures.

(5) Data retention and disposition policies.

(6) Data security policies, including electronic, physical, and administrative safeguards such as data encryption and training of employees.

**"SECTION 9E.28.(b2)** The data collected by the Task Force under subsection (b) of this section, regardless of where it is housed, shall not be considered a public record within the meaning of Chapter 132 of the General Statutes.

**"SECTION 9E.28.(c)** No later than April 1, 2024, and April 1, 2026, the Task Force shall submit a report with its findings and recommendations to the Joint Legislative Oversight Committee on Health and Human Services and the Joint Legislative Oversight Committee on Medicaid. These findings and recommendations shall include specific, concrete, and actionable steps to be undertaken by the State and upon which the General Assembly could act.

**"SECTION 9E.28.(d)** This section shall expire on ~~May 1, 2024~~ December 31, 2026."

**SECTION 2.** This act is effective retroactive to July 1, 2023.