

PCMH Payer Subcommittee Meeting
April 9, 2015

Attendees

Dr. Doug Carr, New West Health Services
Maddie Tormey, NewWest Health Services
Jo Thompson, Montana Medicaid
Anna Buckner, Montana Medicaid
Kelley Gobbs, Montana Medicaid
Mary LeMieux, Montana Medicaid
Paula Block, Montana Primary Care Association
Patty Estes, BCBS of MT
Todd Lovshin, PacificSource

CSI Staff

Amanda Roccabruna Eby
Cathy Wright

CSI staff began the meeting by asking for confirmation from the subcommittee that all the payors were in support of adding the clarifications that were made to the utilization measure guidance to the guidance for next year's report. BCBS incorporated the clarifications in their report and supported including them moving forward. PacificSource needed to check with the company before supporting on going inclusion, but they did include the clarifications in their report. Medicaid was able to make the clarifications in their report without any issues and supported keeping them. There was consensus that no further discussion was needed on the Mathematica worksheet.

The focus of the rest of the meeting was on education payors can do to their members about PCMH. Amanda started by asking the payors if they already had any previous or current plans for education. BCBS educates their members about PCMH on their patient portal where they can see the participation payment PCMH providers receive with an explanation for them. They also have other general explanations of PCMH on their website's landing page for members and others. BCBS has done some education on PCMH to providers through the MMA. They plan to move to full member education in 2015 with a focus on the value directed toward the consumer through PCMH as part of an overarching value-based care education campaign. BCBS has also given presentations to employers on PCMH.

PacificSource's focus is on requiring members to select a Primary Care Provider (PCP). Their education is more provider rather than patient focused. They have also done some education to employers in network discussions. They are developing education in accordance their 2016 health plans.

Medicaid's Passport to Health program requires members to choose their provider. However, providers can only participate in either the Passport program or the PCMH program. Their PCMH program will require clinics they contract with to do outreach to their identified Medicaid members within 20 days of confirmed attribution. Medicaid has not dictated how this outreach can be done but they know a Missoula clinic will be using mailed letters. Medicaid is convening a workgroup on their PCMH program that will study best practices, including education to patients.

Todd Lovshin of PacificSource asked about the difference between the provider education and payor education and what is considered effective. Amanda referenced research she had done on PCMH in

other states that showed education form providers and payors but she had not read any studies on what was most effective. However, she was using trusted sources such as the Patient-Centered Primary Care Collaborative website. Amanda offered to collect more examples of payor education and send them to Todd and the others.

CSI staff said that they would rely on the payors to develop language that aligns with the work of the Education Subcommittee. Amanda explained the Education Subcommittee's recommended priorities for payor education: payors should highlight PCMH practices, establish a value proposition, maintain consistency with education materials in PCMH practices, and maintain alignment and consistency with the state program's education materials and messaging.

CSI referenced the education work plan and asked the payors about including educational materials on PCMH in enrollment mailings to their new members and EOB mailings. All of the payors said they would have to check on their IT system and budget capabilities for doing any kind of mailing before they could move forward or commit to anything.

Medicaid commented that they would be limited by some federal guidelines such as the requirement of content being in a 6th-8th grade reading level and that they don't have EOBs for their members but could consider a separate mailing. CSI staff said that reading level is fairly standard anyway and whatever the payors do would need to be consistent with information on the CSI website and the education that providers are doing.