

PCMH Legislative Work Group
July 14, 2016

Attendees

Dr. Rob Stenger, Partnership Health Center
Bill Warden, Hospital lobbyist
Paula Block, MTPCA
Patty Estes, Blue Cross Blue Shield of Montana
Desa Osterhout, Blue Cross Blue Shield of Montana
Carla Cobb, RiverStone Health
Dr. Jonathan Weisul, Allegiance Benefit Plan Management
Stacey Anderson, MTPCA
Dr. Jonathon Griffin, Blue Cross Blue Shield of Montana

CSI Staff

Jesse Laslovich
Christina Goe
Amanda Roccabruna Eby
Cathy Wright

Amanda began the meeting with a recap of the work group's last discussion in May which included an agreement for simple legislation to remove the sunset provision on the PCMH Act as part of the CSI agency's legislative package. Further questions and comments on that discussion were solicited. Dr. Stenger commented that the legislation can simply remove the sunset and other adjustments can be made to the program with agency rule-making authority.

Patty Estes commented that at BCBS they are invested in value based care and would like to see more payors make the same investment they have. Dr. Fred Olson, former medical director at BCBS, had stressed in 2013 that one of the main reasons for legislation was the safe harbor from anti-trust laws for multiple payors to participate.

Dr. Weisul commented on Allegiance's investment in value-based care by explaining that they had submitted an application for CPC+. He also said that 95% of their business is third party administration and they are not able to recruit self-funded employers in their PCMH program but they support and believe PCMH is important.

Dr. Griffin commented that CPC+ and MACRA prove that regulatory requirements on providers are increasing that that is something that the state program should consider.

Dr. Stenger suggested that since a payor mandate to get more commercial payors to participate is not politically feasible, then maybe the program should pursue public health plans such as the state health plan. Dr. Weisul mentioned that as the administrator of the state health plan, Allegiance has not seen interest from them in PCMH. The state health plan is focused on the state employee health clinics. Patty Estes said that BCBS has recruited one self-funded employer to their PCMH program and is in discussion with others.

Bill Warden commented that the independent study report to the Children and Families legislative interim committee will set the stage for what will happen to PCMH in the 2017 legislature. Some

attendees commented that if Montana is selected as a CPC+ region that will be hugely significant to the continuation of the PCMH program.

Jesse and Christina told the work group that they could look at draft bill language in September; it will be very simple, just removing the sunset. Other changes can then be made through the rule-making process. Further alterations to the program such as data analysis, staffing, and funding can be explored through the agency budget. The bill will be pre-introduced by October 1 as agency legislation and a sponsor will need to be found for the bill after the election. Bill Warden said that he has spoken with a candidate for state auditor, Matt Rosendale, and he supports removing the sunset on the program.