

Mission Statement:

The mission of the Montana State Patient-Centered Medical Home (PCMH) Stakeholder Council is to advise the insurance commissioner and direct state PCMH program development, establish and monitor PCMH performance standards, and ensure that PCMH efforts support the Triple Aim goals of simultaneously improving the health of the population, enhancing the experience and outcomes of the patient, and reducing per capita cost of care for the benefit of communities across Montana.

The Montana PCMH Program serves to provide a foundation and sustainability model to orchestrate and support consistent, standardized PCMH implementation efforts across Montana, advance an efficient and effective healthcare system built on a foundation of primary care in Montana, and provide a common framework for care delivery system reform, payment reform, patient engagement, and health information management.

A patient-centered medical home in Montana is a model of healthcare that is directed by a primary care provider offering family-centered, culturally effective care that is coordinated, comprehensive, continuous, and, whenever possible, located in the patient's community and integrated across systems; characterized by enhanced access, with an emphasis on prevention, improved health outcomes, and satisfaction; qualified by the commissioner as meeting the standards of a patient-centered medical home; and reimbursed under a payment system that recognizes the value of services and clinical prevention services.

Governance

The Montana Patient Centered Medical Home Stakeholder Council is governed by and reports to the Montana Commissioner of Securities and Insurance. The Stakeholder Council works collaboratively with all parties and individuals interested in the Montana State PCMH program. The Stakeholder Council has the authority to submit recommendations to the Commissioner regarding legislation, documentation, and guidelines applicable to the Council's areas of responsibility.

Stakeholder Council Functions & Responsibilities

- Montana State PCMH Program strategy development
- PCMH definition & site recognition advisement
- PCMH payment model oversight advisement
- PCMH data management oversight advisement
- PCMH quality outcomes oversight/advisement
- PCMH operational oversight/advisement
- PCMH education and public awareness oversight/advisement

PCMH Council Membership

The Commissioner may appoint interested parties, including but not limited to representatives of the department, public health agencies, health plans, government health plans, primary health care providers, and health care consumers.

Role of a PCMH Stakeholder Council Member

Individually, PCMH Council members are expected to:

- Attend Council meetings. Members failing to attend 50% will be contacted by the chair to determine interest in ongoing membership
- Participate in educational activities
- Reach a quorum, which is defined as fifty percent (50%) of committee members
- Understand the strategic implications and outcomes of recommendations and approvals
- Be genuinely interested and engaged in the PCMH stakeholder council process and outcomes
- Support the decisions of the PCMH stakeholder council
- Help balance conflicting priorities and interests
- Provide feedback and updates regarding PCMH stakeholder council activities to organizations represented

PCMH Stakeholder Council Meeting Schedule and Process

- The PCMH Council will meet monthly or as required based on need, but no less than twice yearly.
- The PCMH Council Chair finalizes agendas and facilitates the meetings.
- Meeting minutes are the responsibility of the Insurance Commissioner's staff and are distributed for review to council members no later than seven days prior to the next scheduled Montana PCMH Program Stakeholder Council meeting.