

BEFORE THE COMMISSIONER OF SECURITIES AND INSURANCE
MONTANA STATE AUDITOR

In the matter of the adoption of NEW) NOTICE OF PUBLIC HEARING ON
RULE I, pertaining to Patient-) PROPOSED ADOPTION
Centered Medical Homes)

TO: All Concerned Persons

1. On September 11, 2014, at 10:00 a.m., the Commissioner of Securities and Insurance, Montana State Auditor, will hold a public hearing in the 2nd floor conference room, at the Office of the Commissioner of Securities and Insurance, Montana State Auditor (CSI), 840 Helena Ave., Helena, Montana, to consider the proposed adoption of the above-stated rule.

2. The CSI will make reasonable accommodations for persons with disabilities who wish to participate in this public hearing, or need an alternative accessible format of this notice. If you require an accommodation, contact the CSI no later than 5:00 p.m., September 4, 2014, to advise us of the nature of the accommodation that you need. Please contact Darla Sautter, CSI, 840 Helena Avenue, Helena, Montana, 59601; telephone (406) 444-2726; TDD (406) 444-3246; fax (406) 444-3499; or e-mail dsautter@mt.gov.

3. The New Rule as proposed to be adopted provides as follows:

NEW RULE I PATIENT-CENTERED MEDICAL HOME REPORTING—
SPECIFIC QUALITY MEASURES REQUIRED (1) A qualified or provisionally qualified patient-centered medical home (PCMH) shall report annually to the commissioner on its performance related to certain standards and health care quality measures, as prescribed by the commissioner. A PCMH health care provider that provides care to adults only, or both children and adults, shall choose at least three of the four quality measures listed in (2)(a) through (d) to report to the commissioner. A PCMH health care provider that provides care only to children shall choose only the child immunization performance measure in (2)(c).

(2) The following are the quality measures to be reported as specified in (1):

- (a) control of blood pressure among adults with diagnosed hypertension;
- (b) screening for tobacco use and tobacco cessation counseling for adults;
- (c) age appropriate immunization for children; and
- (d) control of A1C levels in adults with diagnosed diabetes.

(3) If a PCMH health care provider has no patient data regarding a particular quality measure, the provider may indicate, "not applicable."

(4) A PCMH health care provider may not change the reporting measures the provider chooses until the end of the 2016 reporting year or until otherwise instructed by the commissioner.

(5) Annually, the data on standards and quality measures are due to the commissioner on March 31 for the previous calendar year. For the initial report, data

must be submitted to the commissioner for the reporting period January 1, 2014 through December 31, 2014, by March 31, 2015.

(6) The commissioner shall provide detailed instructions on the agency web site for reporting by qualified and provisionally qualified PCMHs on the quality measures described in (2). Data reporting requirements must be aligned with the federal Physician Quality Reporting System (PQRS), except for childhood immunizations, and the instructions provided on the commissioner's web site.

(7) The report referenced in ARM 6.6.4906 is separate from the report required for the quality measures in (2).

(8) The commissioner may report to the public only aggregate information about quality measures.

(9) Payers who choose to participate in the Montana PCMH program, and who use quality measure reporting in their payment model shall include, but are not limited to, the four measures specified in (2). Those payers must also use the data reporting requirements prescribed by the commissioner.

AUTH: 33-40-104, MCA

IMP: 33-40-104, 33-40-105, MCA

4. STATEMENT OF REASONABLE NECESSITY: NEW RULE I is necessary to provide specific guidance to patient-centered medical homes regarding the "uniform set of health care quality and performance measures that include prevention services," as required by 33-40-105(2)(c), MCA. These rules also satisfy in part the commissioner's duties to adopt rules on quality measures as required in 33-40-104(1)(a) and 33-40-105(2), MCA. In addition, these specific measures aid the Department of Public Health and Human Services with specific goals related to the improvement of public health in Montana.

These rules are specifically aligned with PQRS reporting measures because most health care providers already report on PQRS measures. Aligning the PCMH data reporting with PQRS measures will reduce data reporting burdens and complications.

5. Concerned persons may submit their data, views, or arguments concerning the proposed actions either orally or in writing at the hearing. Written data, views, or arguments may also be submitted to Christina L. Goe, General Counsel, Office of the Commissioner of Securities and Insurance, Montana State Auditor, 840 Helena Ave., Helena, Montana, 59601; telephone (406) 444-2040; fax (406) 444-3499; or e-mail cgoe@mt.gov, and must be received no later than 5:00 p.m., September 19, 2014.

6. Christina Goe, General Counsel, has been designated to preside over and conduct this hearing.

7. The CSI maintains a list of concerned persons who wish to receive notices of rulemaking actions proposed by this agency. Persons who wish to have their name added to the list shall make a written request that includes the name and mailing address of the person to receive notices and specifies for which program the

person wishes to receive notices. Such written request may be mailed or delivered to Darla Sautter, Office of the Commissioner of Securities and Insurance, Montana State Auditor, 840 Helena Ave., Helena, Montana, 59601; telephone (406) 444-2726; fax (406) 444-3499; or e-mail dsautter@mt.gov, or may be made by completing a request form at any rules hearing held by the CSI.

8. An electronic copy of this proposal notice is available through the Secretary of State's web site at <http://sos.mt.gov/ARM/Register>. The Secretary of State strives to make the electronic copy of the notice conform to the official version of the notice, as printed in the Montana Administrative Register, but advises all concerned persons that in the event of a discrepancy between the official printed text of the notice and the electronic version of the notice, only the official printed text will be considered. In addition, although the Secretary of State works to keep its web site accessible at all times, concerned persons should be aware that the web site may be unavailable during some periods due to system maintenance or technical problems.

9. Pursuant to 2-4-302, MCA, the bill sponsor contact requirements apply. Christine Kaufmann is the bill sponsor, and she was contacted by e-mail on May 9, 2014.

10. The CSI has complied with the requirements of 2-4-111, MCA, and determined that NEW RULE I will not have a significant adverse impact on small businesses. The reporting requirement discussed in NEW RULE I already exists under 33-40-105, MCA. NEW RULE I clarifies the health care quality and performance measures that are subject to that requirement, and the timeline for reporting the data. Additionally, the affected parties already report the quality measures in NEW RULE I to other entities. Thus, NEW RULE I does not require the parties to collect and collate substantial amounts of additional information.

/s/ Nick Mazanec
Nick Mazanec
Rule Reviewer

/s/ Christina L. Goe
Christina L. Goe
General Counsel

Certified to the Secretary of State August 11, 2014.