

Managed Care in Montana

This profile reflects state managed care program information as of August 2014, and only includes information on active federal operating authorities, and as such, the program start date may not reflect the earliest date that a program enrolled beneficiaries and provided services. Some states report populations and services available to program participants under the federal authority (e.g. Section 1115 waiver), so these features cannot be easily distinguished for each program.

Overview of Current Managed Care Programs

In July 2011, more than three quarters of Medicaid beneficiaries in Montana were enrolled in a primary care case management (PCCM) program. Introduced in 1993, the state's PCCM program is called **Passport to Health**. Enrollment is mandatory for most Medicaid beneficiaries throughout the state. Beneficiaries select a primary care provider as their medical home to coordinate most acute, primary, and behavioral health services. A special program within Passport to Health, called **Team Care**, was introduced in 2004 and is targeted to beneficiaries with a history of excessive use of services. Those enrolled in Team Care cannot change primary care providers without cause and must use only one pharmacy. Primary care providers that serve Team Care members receive a higher monthly case management fee. Also part of Passport to Health is a program, begun in 2009, called the **Health Improvement Program (HIP)**, which provides enhanced case management services to Passport clients who have been identified as high risk, high cost, or referred by their primary care physician for intensive care management. Case management services are provided by community health centers, and tribal health centers. The state also contracts with one entity to operate **Nurse First Line**, a toll-free, confidential nurse triage line, which beneficiaries can call for advice and help managing their health conditions and care.

Participating Plans, Plan Selection, and Rate Setting

The state enters into agreements with primary care providers to serve as care managers/medical homes in the Passport program. The state permits any provider with primary care within his or her professional scope of practice to become a Passport PCP. All Passport PCPs are also Team Care providers. In addition, the state contracts with 14 health centers to provide case management services through the Health Improvement Program. The state also contracts, through a competitive bidding process, with Nurse Response, a subsidiary of Centene Corporation, to operate its Nurse First Line. Rates for Passport PCCM and Team Care providers are established in state law.

Quality and Performance Incentives

The state implements state developed consumer and provider satisfaction surveys, in addition to requiring reporting on a number of access and adequacy measures, to monitor quality of managed care.

Table: Managed Care Program Features, as of August 2014

Program Name	Passport to Health		
Program Type	PCCM	Selective Contracting (FFS) – Nurse First	Enhanced PCCM – Health Improvement Program
Program Start Date	January 1994	2004	2009
Statutory Authorities	1915(b)		
Geographic Reach of Program	Statewide		
Populations Enrolled (<i>Exceptions may apply for certain individuals in each group</i>)			
<i>Aged</i>	X	X	X
<i>Disabled Children & Adults</i>	X	X	X
<i>Children</i>	X	X	X
<i>Low-Income Adults</i>	X	X	X
<i>Medicare-Medicaid Eligibles (“duals”)</i>		X	
<i>Foster Care Children</i>		X	
<i>American Indians/Alaska Natives</i>	X	X	X
Mandatory or Voluntary enrollment?	Mandatory	Voluntary	Voluntary
Medicaid Services Covered in Capitation (<i>Specialized services other than those listed may be covered. Services not marked with an X are excluded or “carved out” of the benefit package.</i>)			
<i>Inpatient Hospital</i>			
<i>Primary Care and Outpatient services</i>	X (case management only)	X (nurse advise line only)	X (case management only)
<i>Pharmacy</i>			
<i>Institutional LTC</i>			
<i>Personal Care/ HCBS</i>			
<i>Inpatient Behavioral Health Services</i>			
<i>Outpatient Behavioral Health Services</i>			
<i>Dental</i>			
<i>Transportation</i>			
Participating Plans or Organizations	1. Participating primary care physicians	1. Nurse Response	1. 14 Federally Qualified Health Centers and Tribal Health Centers*
Uses HEDIS Measures or Similar	X	NA	X
Uses CAHPS Measures or Similar	X	NA	X
State requires MCOs to submit HEDIS or	NA	NA	NA

Program Name	Passport to Health		
CAHPS data to NCQA			
State Requires MCO Accreditation	NA	NA	NA
External Quality Review Organization	NA		
State Publicly Releases Quality Reports	No		

Sources: Centers for Medicare and Medicaid Services (CMS), National Summary of State Medicaid Managed Care Programs as of July 1, 2011.
Kaiser Commission on Medicaid and the Uninsured. Profile of Medicaid Managed Care Programs in 2010. September 2011.
National Committee on Quality Assurance. NCQA Medicaid Managed Care Toolkit 2012 Health Plan Accreditation Standards. State Use of Accreditation as of February 2012.

Notes: Managed Care Organization (MCO); Prepaid Inpatient Health Plans (PIHP); Prepaid Ambulatory Health Plan (PAHP); Mental Health/Substance Use Disorder (MH/SUD); Healthcare Effectiveness Data and Information Set (HEDIS); Consumer Assessment of Healthcare Providers and Systems (CAHPS).
Primary Care and Outpatient Services include physician services, hospice, laboratory, imaging, FQHC, and other specialty services delivered in outpatient offices and clinics. Institutional Long Term Care (LTC) includes Skilled Nursing Facilities (SNF) and/or Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IDD).
External Quality Review Organization activities are only required for MCOs, PIHPs, PAHPs, and other applicable entities with comprehensive risk contracts.
*Participating centers include: Butte Community Health Center (CHC), Northwest CHC Libby, Flathead CHC Kalispell, Partnership CHC Missoula, Cooperative Health Center Helena, Cascade CHC Great Falls, Bullhook CHC Havre, Community Health Partners Livingston, Sweet Medical Center Chinook, Central Montana CHC Lewistown, RiverStone CHC Billings, Ashland CHC, Custer County CHC Miles City, Fort Peck Tribal Health Center Poplar