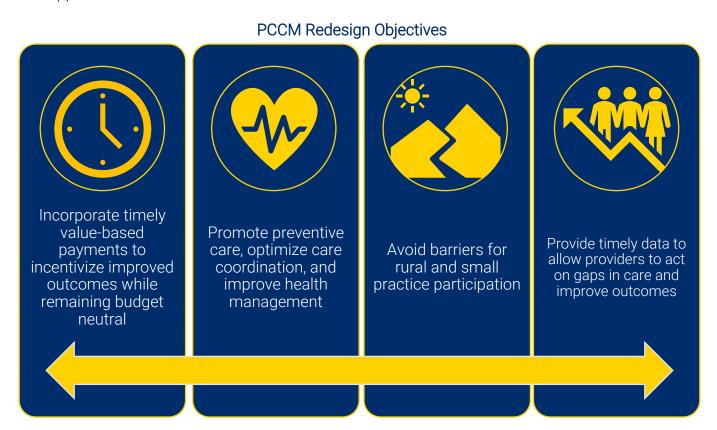


Montana Primary Care Case Management (PCCM) Redesign

The Montana Department of Public Health and Human Services (DPHHS) is transitioning from four distinct primary care case management (PCCM) programs (Passport to Health, Team Care, Patient Centered Medical Home (PCMH), and Comprehensive Primary Care Plus (CPC+)) into one, new, simplified program to improve care coordination and better support health outcomes.



The Tribal Health Improvement Program (T-HIP) is not impacted by the proposed changes.

The proposed program features three tiers designed to accommodate providers with varying capacities and resources. It establishes a glide path toward advanced population health management, with clearly defined expectations for organizational structure and performance that increase as providers move through successive tiers. An Indian Health Service (IHS), Tribal 638, or Urban Indian Organization (UIO) may choose to participate in the proposed program and receive the Per Member Per Month (PMPM) coordination fee.

For American Indian/ Alaskan Native (AI/AN) members, they can continue to receive care at any IHS/Tribal 638/UIO that they like, even if that provider is not enrolled in the new program. However, if the member chooses to go to a provider who is enrolled into the new program, they may receive extra coordination and support.



Proposed Three Tier Model

FIER 1: Ensuring Preventive Services

GOAL

Improve outcomes on select quality metrics

ELIGIBLE PROVIDERS

Any willing primary care provider (PCP); continued participation contingent on meeting performance targets

PAYMENT

Per member per month (PMPM) care coordination fee

GOAL

Care Transitions

ER 2: Managing

Increase post-hospital PCP follow-up visits and reduce readmissions

ELIGIBLE PROVIDERS

PCPs actively managing post-hospital transitions of care; continued participation contingent on meeting performance targets

PAYMENT

PMPM care coordination fee

GOAL

ER 3: Managing Complex Populations

Prevent hospitalizations and ER visits

ELIGIBLE PROVIDERS

Tier 1 and 2-participating providers with a DPHHS-defined minimum number of attributed beneficiaries alone or as part of a clinically integrated network

PAYMENT

PMPM care coordination fee and shared savings opportunity

Pending federal approval, DPHHS plans to implement Tiers 1 and 2 on July 1, 2026, with Tier 3 phased in at a later date.

Impact Summary	
WHO	What Happens After June 30, 2026
IHS, Tribal 638 Clinics, and UIOs	Can continue providing primary care services for AI/AN members. May enroll in the new program and select a Tier that fits their resources.
Members (AI/AN)	Not required to enroll in the new program. Must choose a Primary Care Provider (PCP), but can continue care at IHS, Tribal, or UIO clinics.
Passport to Health Providers	Will no longer receive Passport PMPM payments after June 30, 2026.
Tribal 638 Programs	Can be enrolled in both T-HIP and the new program (Tier 1 or Tier 2).
AI/AN T-HIP Members	Can receive services from both T-HIP and new program Tier 1 or Tier 2 providers, if eligible.