

**Testimony**  
**House Bill No. 1044**  
**Senate Human Services Committee**  
**Senator Lee, Chairman**  
February 20, 2023

Chairman Lee, and members of the Senate Human Services Committee, I am Krista Fremming, Interim Director of Medical Services with the Department of Health and Human Services (Department). I appear before you in support of House Bill No. 1044, which was introduced at the request of the Department.

The proposed changes in Section 1 of this Bill would repeal Section 50-24.1-32 of the North Dakota Century Code, which governs the Primary Care Case Management (PCCM) program. Over the years the Department has received feedback from Medicaid members and providers, in which they have voiced frustration with the PCCM program. We are not proposing to end this program without an alternative, and we anticipate greater satisfaction amongst both members and providers under the new model.

The PCCM program requires that members select or be assigned a primary care provider (PCP) to handle most of their care. The concept of a patient/PCP relationship is an important one, and one that the Department will continue through a new model based on the work that has been done over the past year with the prospective payment system (PPS) health systems across the state.

By eliminating the PCCM program, the Department is not changing who

can be selected by a member as their PCP. It also doesn't eliminate any provider that is currently being reimbursed by North Dakota Medicaid.

The main reason to eliminate PCCM is because members will be attributed to a PCP in the new value-based payment program, and it would be confusing for both members and providers to have two different attribution models. In the value-based payment program, PCPs who are affiliated with a PPS health system, will have members attributed to them and be held accountable for certain quality measures related to preventative screenings, PCP visits and utilization of emergency departments. Members will also be attributed to PCPs outside of PPS health systems, however at this point, providers outside PPS health systems will not be held financially accountable for quality measures. The Department believes this is a better way to move forward for member and primary care provider relationships than would be achieved under PCCM.

Administrative burdens will be reduced for everyone. Members will no longer need to call to change their PCP if they wanted to choose a different PCP. Human Service Zone offices would no longer have to enter, update, or change PCP member selections in the Medicaid Management Information System (MMIS). Providers would no longer have to verify PCP information for members and obtain referrals for visits.

Section 2 of this Bill is requesting that the repeal of section 50-24.1-32 of the North Dakota Century Code is effective on January 1, 2024.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.