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#### Your Care is at Our Core

# Physicians are Patients' Strongest Allies in Health: Every Step of the Way

Montana Medical Association has joined other state medical associations to launch a campaign to elevate physician's reputations, fight legislative battles, and amplify the patient-physician relationship.



In recent years physicians have faced reputational challenges brought on by broader frustrations with the healthcare system. Recognizing the need to better understand and address these challenges, the American Medical Association's Advocacy Resource Center conducted extensive opinion research and found that Americans want to see more of their physicians. 89% of national voters agree that the doctor-patient relationship is central to health care – but structural factors have habituated them to the idea that physicians are hard to schedule and that they are forced to spend too little time with them. As a result, Your Care is at Our Core was developed directly from these research findings and was created to elevate the message of what drives physicians: trust, empathy, compassion, and time caring and fighting for their patients. Since its launch in January 2024, more than half of state medical associations have chosen to participate in Your Care is at Our Core, including us. Learn more: <a href="https://www.mmaoffice.org/your-care-is-at-our-core/">https://www.mmaoffice.org/your-care-is-at-our-core/</a>

If you are interested in sharing atestimonial to be posted on our social media platforms, please contact **Lexie Gleasman** lexie@mmaoffice.org



#### Your Membership Drives Impactful Change

Join your colleagues in renewing your membership to build upon the recent successes to maintain and expand access for patients and keep the physician profession viable, including banning of non-compete agreements, reforming prior authorization laws, preserving the current Medicaid program, protecting non-economic damages cap, and establishing system change to address burnout.

Don't let your membership drift away like autumn leaves — join or renew today and carry your voice into 2026!

If you need assistance renewing your membership, please call the MMA Executive office at (406)-443-4000

#### The Physicians Foundation Survey

BOSTON, October 28, 2025 — The Physicians Foundation today announced findings from its 2025 Survey on Physician Autonomy and Impact on Patient Care, revealing a stark new reality: when physicians lose control over how they practice medicine—known as the loss of physician autonomy—patients pay the price. The survey of more than 1,000 U.S. physicians shows that physicians overwhelmingly view the loss of autonomy as a major threat to the workforce and a key driver of worsening access to care.

Key findings underscore the impact on patients and the physician workforce:

- Nearly two-thirds (64%) of physicians say limits on autonomy negatively affect the quality and timeliness of patient care, and more than half (57%) report declines in patient satisfaction.
- About three-quarters (73%) report autonomy limits are increasing their stress, with more than four in ten (45%) indicating these pressures are pushing them toward career changes or earlier retirement.
- Nine in ten (91%) physicians say the loss of autonomy is a major threat to U.S. medicine and will worsen the physician shortage; seven in ten (71%) know colleagues who have already left the profession due to loss of autonomy.

 Physicians identify third-party practice acquisition (83%) and rapid consolidation (74%) as major contributors to autonomy loss, and more than seven in ten (75%) support stronger state oversight to safeguard physician leadership in care decisions.

#### Full Press Release Here

#### **About The Physicians Foundation**

The Physicians Foundation is a public charity seeking to advance the work of practicing physicians and help them facilitate the delivery of high-quality health care to patients. As the U.S. health care system continues to evolve, The Physicians Foundation is steadfast in strengthening the physician-patient relationship, supporting medical practices' sustainability and helping physicians navigate the changing health care system. The Physicians Foundation pursues its mission through research, education and innovative grant making that improves physician wellbeing, strengthens physician leadership, addresses drivers of health and lifts physician perspectives. For more information, visit <a href="https://www.physiciansfoundation.org">www.physiciansfoundation.org</a>

#### Gov. Gianforte, DPHHS Submit Rural Health Transformation Plan

DPHHS (11/05) HELENA, Mont. – Governor Greg Gianforte and Department of Public Health and Human Services (DPHHS) Director Charlie Brereton today announced that Montana has officially submitted its application for the federal Rural Health Transformation Program (RHTP), a critical initiative that could secure over \$1 billion in federal funding to modernize health care in rural areas of the state over the next five years.

"The Rural Health Transformation Program is a historic investment in Montana's future," Gov. Gianforte said. "Since taking office, we've led on fixing what's broken, making investments to improve access to quality health care. With the Rural Health Transformation Program, we will continue delivering better outcomes for families across Montana."

The RHTP, established by the U.S. Centers for Medicare and Medicaid Services (CMS), is authorized to provide up to \$50 billion nationally to participating states through 2030. This funding is specifically earmarked for stabilizing, transforming, and restructuring rural hospitals and other essential health care providers.

"We are appreciative of the hundreds of Montanans and organizations who engaged in this process over the past several weeks," DPHHS Director Charlie Brereton said. "Their participation was essential in shaping a quality application rooted in sustainability and the needs of our communities, and we are extremely proud to submit it today."

Montana submitted its Rural Health Transformation Plan ("Plan") in advance of the Nov. 5, 2025, deadline. States were given approximately six weeks to develop their plans.

During the plan development process, DPHHS closely scrutinized proposals for sustainability and prioritized transformative initiatives that don't require ongoing RHTP funding to remain in effect. With award decisions expected in late December, DPHHS will now shift to implementation planning, including establishing and hiring for an internal RHTP unit responsible for administering

the program over a five-year period.

Montana's plan outlines five core initiatives, all designed to address the unique challenges of rural health care delivery in a sustainable manner:

- Workforce Development: Focuses on increasing recruitment, expanding clinical training, and retaining various levels of rural health care providers in strong partnership with the Montana Department of Labor and Industry.
- Sustainable Access: Stabilizes rural facility finances through restructuring recommendations and increased clinical and administrative partnerships. This component includes funding for the expansion of telehealth services, linking rural hospitals with statewide specialists and providing one-timeonly awards for necessary telehealth equipment.
- Innovative Care Models: Strengthens and expands value-based payment models and better leverages EMS and pharmacy services, with an emphasis on reducing emergency room admissions and other high-cost care interventions.
- Community Health and Prevention: Provides for infrastructure upgrades and initiatives that incentivize healthy lifestyles, including expanding primary, behavioral, and dental health services in schools through partnerships with Federally Qualified Health Centers and other providers.
- Technology Innovation: Focuses on using technology to increase access and improve data quality and sharing. This component includes funding for rural providers to modernize their Electronic Health Record systems.

DPHHS incorporated vital rural health metrics, including those pertaining to glycemic status, hypertension, obesity, and suicide rates, into its long-term commitment to evaluating and monitoring Plan outcomes.

The plan was developed using public input collected over several weeks, including a Request for Information (RFI), a statewide webinar with nearly 900 registrants, a formal tribal consultation, direct engagement with over 20 external stakeholder groups, all eight tribal nations and Urban Indian Organizations, and close collaboration with several other state agencies. RHTP funding will be allocated to states based on a formula: 50% divided equally among all approved states, 25% based on states' rurality, and 25% based on how well each state's proposed plan aligns with CMS criteria. Montana's application may be found <a href="https://example.com/here">here</a>.

More detailed information about the RHTP can be found atruralhealth.mt.gov.

# Maximus will stop operating the Montana Recovery Program in the new year, labor department says.

MTFP (11/10) Maximus will stop operating the Montana Recovery Program in the new year, labor department says.

The national private company operating a highly scrutinized addiction monitoring program for nurses, doctors and other medical providers will exit its contract with Montana's labor department at the end of January 2026, launching a sprint to find a new vendor.

The planned departure of Maximus, Inc., was announced by Sarah Swanson, the commissioner of the Department of Labor and Industry, during a Monday morning meeting of a public advisory group tasked with reviewing the assistance program for more than 60,000 medical licensees.

The Medical Assistance Program Advisory Council was formed after <u>a critical audit</u> by nonpartisan legislative staff in August and media reporting about participant discontent, including <u>one nurse's suicide in January reported by Montana Free Press.</u>
Late last month, a group of nurses and one doctor <u>filed a class-action lawsuit against Maximus</u> in federal court, alleging the company prioritized profits over participant well-being, among other things.

**Read More** 

## Calendar Year (CY) 2026 Medicare Physician Fee Schedule Final Rule (CMS-1832-F)

CMS (10/31) On October 31, 2025, the Centers for Medicare & Medicaid Services (CMS) issued a final rule that announces final policy changes for Medicare payments under the Physician Fee Schedule (PFS), and other Medicare Part B issues, effective on or after January 1, 2026.

The calendar year (CY) 2026 PFS final rule is one of several final rules that reflect a broader Administration-wide strategy to create a health care system that results in better quality, efficiency, empowerment, and innovation for all Medicare beneficiaries.

#### **Background on the Physician Fee Schedule**

Since 1992, Medicare payment has been made under the PFS for the services of physicians and other billing professionals. Physicians' services paid under the PFS are furnished in a variety of settings, including physician offices, hospitals, ambulatory surgical centers (ASCs), skilled nursing facilities and other post-acute care settings, hospices, outpatient dialysis facilities, clinical laboratories, and beneficiaries' homes. Payment is also made to several types of suppliers for technical services, most often in settings for which no institutional payment is made.

**Read More** 

#### 2026 Big Sky Pulmonary Conference

The Montana Asthma Control Program (MACP) and the Department of Public Health and Human Services are pleased to announce that the 2026 Big Sky Pulmonary Conference (BSPC) will be held March 5 - March 6, 2026, at the Fairmont Hot Springs Resort. The BSPC is a continuing education conference for health professionals, which highlights promising methods of



preventing and managing respiratory diseases and associated risk factors according to evidence-based guidelines. The 2026 conference will feature topics such as managing cystic fibrosis, considerations for lung transplant, remote monitoring in patients with lung disease, wildfire smoke research, sleep health, breastfeeding and pulmonary health, chronic cough from a primary care perspective, pediatric asthma, and more. This year, MACP is including an optional **pre-conference spirometry training opportunity**. If you are interested, make sure to "opt in" when completing the registration form.

For those unable to attend in person, a virtual option is also available. Conference registration (12 CME/CE hours) is only \$220 if you register prior to February 15th.

Upon registration, MDs, DOs, NPs and FNPs will receive 1 free registration for any office staff also interested in attending the conference. If you are connected with a clinic and interested in attending, consider encouraging the clinic provider to register so you can attend as a team and get 1 free registration. Please contact the BSPC planner, Amy Saltzman, directly to assist with this. Amy can be reached at amy.saltzman@mso.umt.edu or (406) 531-4032.

The MACP is now accepting nominations for the Excellence in Pulmonary Care Award. The Excellence in Pulmonary Care Award honors individuals who have demonstrated outstanding commitment, innovation, and impact in the field of pulmonary health. This award recognizes excellence across all areas of pulmonary health and is open to

professionals working in both clinical and non-clinical roles. If you would like to recognize a colleague, complete the nomination form on the conference website. Awardees will be recognized at the conference.

Interested parties can find conference details and register online at <a href="https://www.umt.edu/ces/conferences/bigskypulmonary.">umt.edu/ces/conferences/bigskypulmonary.</a>

#### 1 in 4 Women in the U.S. don't Receive Prenatal Care in their First Trimester

<u>CNN</u> (11/17, Koda, Howard) says that a <u>report</u> released Monday by the March of Dimes "says that only about 75% of babies last year were born to mothers who started prenatal care in the first trimester of pregnancy." The researchers "identified several systemic barriers that are preventing women from starting or maintaining prenatal care. Areas where there is limited or no access to maternity care, known as maternity care deserts, are one major driving force. More than a third of counties in the United States do not have an ob/gyn, a family physician or a certified nurse-midwife. These counties also do not have birthing facilities or centers in hospitals." Overall, the report "gives the United States a D+ grade."

# FDA approves first interchangeable biosimilar to Perjeta for patients with HER2-positive breast cancer

Managed Healthcare Executive (11/14, Lutton) reported the FDA has approved "Poherdy (pertuzumab), an HER2/neu receptor antagonist, for the treatment of adults with HER2-positive breast cancer." The approval is a "significant milestone, as Poherdy is both the first FDA-approved biosimilar to Perjeta (pertuzumab) and the first interchangeable biosimilar to the therapy. With this approval, clinicians will gain an additional option for patients requiring targeted HER2-directed treatment, potentially expanding access and lowering costs across oncology care."

You may also be interested in: What doctors wish patients knew about breast-cancer risk

#### Congress ends longest congressional shutdown

#### and includes short-term extension of key Medicare policies

AMA (11/14) Numerous AMA-supported provisions that expired on Oct. 1, including all existing telehealth flexibilities, the hospital-at-home waiver, and 1.0 work geographic practice cost index floor, have been extended through Jan. 30, 2026. **Read More** 

# CDC vaccine panel may vote next month on delaying initial dose of childhood hepatitis B vaccine

Reuters (11/12, Singh, Sunny, Erman) reports the CDC's Advisory Committee on Immunization Practices (ACIP) "is scheduled to meet on December 4 and 5, and could vote on policy concerning shots for hepatitis B, a Federal Register notice from the agency showed on Wednesday." Members of the panel "abandoned a vote at their most recent meeting in September that would have delayed the first hepatitis B vaccine dose for most newborns under federal recommendations." The Federal Register entry "said the meeting's agenda will include discussions on vaccine safety, the childhood and adolescent immunization schedule and hepatitis B vaccines. It said the committee may vote on the hepatitis B shots, but did not provide additional details on the specifics of that vote."

You may also be interested in: <u>How to answer patients' questions about vaccinations</u>

### **MEMBERSHIPS DUES & RENEWALS**

#### 2026 Membership: Renew Your MMA Membership

As the recognized voice of the medical profession in Montana for more than 147 years, the Montana Medical Association and local medical societies have represented Montana's physicians with a keen understanding of unique challenges facing our medical professionals. The ever-changing health care landscape is a reality and the Montana Medical Association is prepared to keep pace with those changing realities.

What we do together, no one physician can do alone. Your membership makes a difference in strengthening the physician's voice, shaping the changing health care landscape, and advancing ambitious clinical and educational initiatives that empowers physicians and positively impacts patient care and the practice of medicine in Montana.

Have an impact through your support of the MMA where the physician voice is unified, patient centered policies are amplified, and capacity can grow to advance medical science. You can easily join or renew now below, or call (406) 443-4000.



#### **ADVOCACY REMINDERS**

You can view our VoterVoice at any time to see what issues we are promoting at this **link**.

If you wish to testify or help with advocacy efforts, please contact Jean Branscum at <a href="mailto:jean@mmaoffice.org">jean@mmaoffice.org</a>, and we can help coordinate.

Additionally, check out our Legislative Advocacy Training video taught by SetPoint Media founder Tara Jensen, which can be viewed <a href="mailto:jean@mmaoffice.org">here</a> with your MMA login.

# **Calendar of Upcoming Events**

Date	Event	Location or where to find more information
January 17, 2026	HELP Class Session 3 Meeting	Webinar
December 2, 2025	MMA Foundation Giving Tuesday	https://www.mmaoffice.org/ montana-medical- association-foundation/

If you would like your event listed, please email the name, date, and a way to find more information to <a href="mailto:mma@mmaofice.org">mma@mmaofice.org</a>.

Reminder that *Know Your Dose* has Resources to Help Combat Substance Use Disorder



# Toolkits Available



www.knowyourdosemt.org

**HELP COMBAT OVERDOSES IN MONTANA** 

**MMA Member Perks** 

ON-DEMAND VIRTUAL DEA MATE ACT Requirements Course





Comprehensive DEA-Compliant CME/CE Course

# IS YOUR DEA CERTIFICATE UP FOR RENEWAL?



Complete Mandatory Renewal Requirements in 1 Day!

Don't forget that Montana Medical Association members can receive a discount

on training requirements under the MATE ACT regulations. Members can register for on-demand online courses or live webinars <u>here</u>. Be sure to use discount codes to save \$100 at checkout for either on-demand online courses (code: MMAWEB100) or live online courses (code: MMA100).

#### 30% Member Discount on Online Training!

Click Here for more information

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#### **Montana Rx Card**

This program is being provided to you to distribute to your patients to help lower their prescription drug costs. Simply distribute the FREE Prescription Drug Card below and your patients can save up to 75% (discounts average roughly 30%) at more than 68,000 national and regional pharmacies. This card can be used as a primary plan and/or it can be used on prescriptions not covered by other plans. This program also includes other value-added programs. which will be listed on the card. This card is pre-activated and can be used immediately.

#### Follow Us On Social Media!

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