

As the unified voice of Montana hospitals and health systems, Montana Hospital Association (MHA) works year-round to develop public policy, address issues in the interest of our members and improve the health of Montanans. We exist to provide programs and services that help you deliver quality healthcare and to make Montana communities healthier.

Thank you for your continued investment and engagement in MHA. We appreciate the opportunity to serve you, your community and patients.



EDUCATION & EVENTS

Throughout 2025, MHA remained committed to supporting Montana's healthcare workforce, which continues to operate at maximum capacity amid rising costs and shifting demands. Our goal has been to provide flexible, accessible and affordable educational resources that strengthen and sustain our entire membership.

KEY HIGHLIGHTS:

• High-Quality Conferences at Lower Costs

MHA delivered annual conferences at costs 25% - 50% below the national average. To further support professional development, MHA provided financial assistance designed to promote peer connection, shared learning and statewide collaboration.

• Growing Partnerships & Webinars Access

Through strategic partnerships with federal and state agencies, fellow state hospital associations and year-round sponsors, MHA delivered more than 60 webinars in 2025. Participation spanned nearly every member facility, underscoring the value and accessibility of these educational offerings.

• Free Virtual Learning Opportunities

MHA hosted peer-to-peer roundtables for compliance professionals, human resources professionals, communications leaders, foundation directors and supply chain managers — at little to no cost — to help member facilities stay current with regulatory updates, industry trends and emerging challenges.

POLICY AND ADVOCACY

SUCCESS IN THE 2025 STATE LEGISLATIVE SESSION:

- Removed the sunset on Medicaid Expansion with no other changes to the program.
- Helped secure 3% rate increase for all Medicaid provider types for State Fiscal Years (SFY) 2026 and 2027.
- Helped secure 3.3% rate increase for the Medicaid physician program for SFY 2026 and 2027.
- Achieved reasonable community benefit definitions for hospitals, such as setting the non-profit community benefit threshold at the state taxable value as defined by the MT Department of Revenue.
- Passed legislation to reform medical malpractice by raising the cap for noneconomic damages; this proactive legislative approach enhanced protections for patients while improving the practice climate for physicians.
- Defeated Senate Bill 372, which would have established nurse staffing ratios in the hospital setting.
- Passed legislation to improve timely healthcare professional licensing by supporting the standardization of substantive equivalency determinations in professional licensing (House Bill 246) as well as bills supporting healthcare compacts for licensed professionals including physician assistants, psychologists, respiratory therapists and dietitians.

FEDERAL ADVOCACY:

- Enhanced federal advocacy strategy and increased outreach to federal delegation; additional detail will be coming in early 2026.

RELATIONSHIP BUILDING:

- Worked with DPHHS to issue hospital supplemental payments of more than \$381 million to Montana hospitals.
- Continued relationship-building with MT Department of Health and Human Services (DPHHS), Department of Labor (DLI) and the Governor's Office through monthly meetings.
- Worked closely with DPHHS and DLI on the state's Rural Healthcare Transformation Program (RHTP) application, representing the most pressing needs of all MHA members.
- Represented members' interests on various statewide committees, including House Bill 29 Transition Review Committee, State Workforce Innovation Board (SWIB) and HOSA-Future Health Professionals Board.
- Conducted site visits and CEO meetings with nearly 100% of member facilities to better understand unique member challenges, opportunities and needs.

MHAPAC:

- Exceeded the 2025 fundraising goal for the MHAPAC by more than 10%.

MONTANA HEALTH RESEARCH & EDUCATION FOUNDATION

Securing and administering grant programs to enhance access to high-quality care in Montana

The Montana Health Research and Education Foundation (MHREF) secures and manages federal, state and private foundation grants to advance healthcare across Montana. Our initiatives deliver education, technical assistance and program development to support healthcare facilities, emergency medical services (EMS) and educational institutions, including high schools and post-secondary healthcare programs.

KEY HIGHLIGHTS FOR MHREF IN 2025 INCLUDE:

- MHREF secured funding from two new private funders to expand programming to improve patient outcomes in both the inpatient and outpatient settings.
- The MHREF Endowment awarded two graduate level scholarships, supported WWAMI education, and supported healthcare workforce pipeline training.
- MHREF convened statewide partner groups to respond to and inform DPHHS's Rural Health Transformation Program (RHTP) application. In addition, MHREF has provided DPHHS with data and strategic input to guide RHTP planning and implementation.

QUALITY PROGRAMS

Enhancing patient safety, healthcare quality and financial stability of rural healthcare providers

- Programming and financial support for a variety of educational opportunities designed to support a wide range of leaders at Critical Access Hospitals (CAH) and Rural Health Clinics (RHC), including CEOs, Quality Improvement Coordinators, Directors of Nursing, Rural Health Clinic Managers and more:
 - 45 facility staff supported at 2025 Montana Healthcare Conference
 - 66 facility staff supported at 2025 MHA Health Summit
 - 100 facility staff participated in webinar series on Conditions of Participation, Billing and Coding
 - 8 facility staff supported in earning certification as Certified Professional in Healthcare Quality
 - 55 facility staff participated in webinar series on the Rural OB Collaborative, with demonstrated improvements to OB plans and resources in participating hospitals
- Technical assistance to facilities navigating conversion and certification to different operating and reimbursement models, such as CAH and Rural Emergency Hospital (REH) designations.

- 8 CAH projects funded and facilitated through the annual summer Lean Intern Rapid Improvement Program with Montana State University and a contracted coach/faculty.
- 7 CAHs participated in a funded and facilitated cohort to improve revenue cycle "front end" encounters to improve accuracy of claims, reduce denials and increase cash flow from co-pays and deductibles.
- Workshops focused on Chronic Care Management in the Rural Health Clinic setting, held in Miles City and Helena with attendance from 38 RHC staff at 25 CAHs.
- Initiated a comprehensive evaluation of industry standard financial indicators for all of Montana's Flex-eligible Critical Access Hospitals. The outcomes of the evaluation will be delivered by a live workshop in spring 2026 with outcomes used to develop improvement cohorts and focus.

Establishing a Strong Network of Shared Learning and Best Practices

The Montana RHC Network, facilitated by MHREF Quality Programs, Montana Health Network and the State Office of Rural Health, funded a consultant-led improvement cohort for Chronic Care Management (CCM) for 10 CAH-owned Rural Health Clinics. The cohort aimed to optimize CCM processes to improve patient outcomes, enhance clinic staff's capacity for CCM implementation and operations, and to develop tailored strategies for care coordination, patient engagement, and adherence to care plans.



HEALTHCARE PREPAREDNESS PROGRAM

Improving disaster and emergency response at healthcare facilities

Medical Response and Surge Exercises

The Montana Health Care Coalitions (HCCs) successfully hosted their annual Medical Response and Surge Exercise (MRSE), a mandatory functional exercise required of each coalition as part of the Hospital Preparedness Program (HPP).

The MRSE is designed to evaluate a coalition's ability to manage a medical surge during emergencies, ensuring readiness and a coordinated, effective response. These exercises help strengthen the capacity of healthcare coalitions to respond to large-scale incidents and identify opportunities for improvement in planning, communication and patient movement.

From March through May 2025, HCCs across the state conducted their MRSEs with outstanding engagement. Each HCC successfully placed 100% of their required simulated patients, and more than 500 participants contributed to the exercises. Participants represented hospitals, EMS, law enforcement, public health, Disaster and Emergency Services and many additional partners.

Trauma Designation Support

- Support for hospitals preparing for trauma designation exercises
- Assisting with both tabletop and full-scale exercises to ensure readiness and compliance

Lunch and Learn Sessions

- CMS Emergency Preparedness Tags - over 150 participants
- The Stress Continuum - 75 participants
- PIO (Public Information Officer) Training - 2 sessions reaching 100 participants

Additional Training Opportunities

- Certified Hospital Emergency Coordinator (CHEC) courses - 45 participants
- Regional Incident Command System (ICS) training - 60 participants across all coalitions
- Basic Disaster Life Support (BDLS) - 22 participants
- Advanced Disaster Life Support (ADLS) - 22 participants
- SIM-Mental Health Training - more than 400 participants (including healthcare providers, public health staff, EMS, and law enforcement) trained to improve recognition, response and coordination during mental health emergencies

AREA HEALTH EDUCATION CENTERS

*Developing the next generation of healthcare workers
Innovating health improvement systems*

The North Central and South Central Montana Area Health Education Centers (NC AHEC and SC AHEC) held **MedStart Camp** in Great Falls and Bozeman. MedStart is a five-day pathway program aimed at developing the next generation of healthcare providers. *With sponsorship from MHA members, 43 high school students from 26 Montana communities participated in the programs at no-cost.*

NC AHEC and SC AHEC hosted a **Heads Up Camp** in Helena. Heads Up is a five-day pathway program aimed at developing the next generation of behavioral health providers. *With sponsorship from Montana Office of Public Instruction, 10 high school students from 9 Montana communities participated in the program.*

NC AHEC and SC AHEC collaborated with MHA member facilities to provide **REACH Camp**. REACH is a one-day pathway program aimed at developing the next generation of healthcare providers. *Four Montana communities and 54 high school students participated in the program.*

NC AHEC and SC AHEC hosted **Montana Clinical Connect** during the Montana Healthcare Conference, a networking event connecting medical residents and health professional students with potential employers. *11 healthcare organizations, including MHA members, participated in the program.*

NC AHEC and SC AHEC are project partners for **PAVE: Pathways by AHECs** using Virtual Reality (VR) Education. PAVE provides students with health career exploration and/or health career training through VR. *In 2025, 1,095 students completed health career simulation experiences—more than a 100% increase over the prior year.*



DATA & INFORMATION SERVICES

Supporting statewide health partnerships

Information Services (MHA Data Programs) provides data to support individual hospital strategic planning, performance management, the association's advocacy efforts, and inform public health efforts.

- Provided data to update the Montana Economic Impact of Hospitals report.
- Provided ongoing hospital inpatient, maternal discharge data to the Montana Obstetric and Maternal Support (MOMS) program, contributing toward program efforts to reduce Montana's rate of maternal death.
- Provided Medicaid expansion county-level reports.
- Provided consultation support through data program enhancements.
- Providing de-identified discharge data to Montana DPHHS to support their work to "improve and protect the health of Montanans by advancing conditions for healthy living" and conduct county-level disease surveillance.
- Participated in the Healthcare Cost and Utilization Project (HCUP) a project to enable researchers, insurers, policymakers and others to study healthcare delivery and patient outcomes over time, and at the national, regional, state and community levels.

Informing operations, finance and advocacy

Data programs support individual hospital strategic planning, performance management and the association's advocacy efforts.

- **The MHA COMPdata Program** offers the most comprehensive source of comparative health care utilization, financial, demographic, clinical, quality and severity-adjusted information in Montana. Members submit their inpatient and outpatient discharge data quarterly and have access to reporting, graphing, charting and mapping capabilities through COMPdata's online portal.
- **The MHA DATABANK** is the ideal source for comparable information on inpatient and outpatient utilization, charges and expenses per day/per stay, uncollected charges, profitability, personnel statistics as well as other financial and utilization statistics. DATABANK provides timely information to know the financial health of Montana hospitals.
- **DataGen** provides healthcare data analytic support to hospitals and health systems as they strive to improve quality, health care payment change, outcomes and financial performance, providing informative reports available to member hospitals covering everything from quality reporting and value-based purchasing to changes in DRG and APC payment rules.

MHA VENTURES

Business solutions built on trust. Focused on impact. Proven with outcomes.

MHA Ventures, Inc. (MHAV) is the for-profit subsidiary of the Montana Hospital Association, created by the MHA Board of Directors in 1987 to strengthen Montana hospitals through high-value partnerships, innovative programs and shared-service solutions. Our role is to enhance patient outcomes, optimize hospital operations and improve member financial performance across the state — while generating non-dues revenue to support MHA's strategic priorities. Key accomplishments in 2025 include:

MHA Member Purchasing Coalition: In 2025, MHA Ventures secured a direct contract with Premier Inc., ensuring seamless continuity of contract access, rebates, analytics and GPO benefits. Montana hospitals now maintain uninterrupted access to billions in aggregated purchasing volume through Premier's Acurity, Surpass and Texas Health Resources portfolios. This transition preserves pricing advantages, expands contract visibility and strengthens our supply-chain footing in a rapidly shifting national GPO landscape.

Workforce Development: MHA Connections is our dedicated advanced practice, nursing and allied health recruitment program. In 2025, we sourced more than 1,000 candidates,

visited every Connections member facility, and represented hospitals at workforce events statewide and regionally. The program generated nearly 3,000 3RNet referrals, supported RN and provider pipeline development and helped hospitals address chronic staffing shortages.

Community Impact: MHA Ventures and US Foods have partnered with School Systems of MT to leverage MHA member food volume to support local schools. More than 160 schools and districts have joined MHAV's discounted food program — expanding purchasing volume, strengthening regional distribution and improving access to fresh foods for both healthcare facilities and local communities. This is one of the largest cross-sector community-benefit initiatives in our history.

MHA Member Business Advocacy: MHA Ventures now manages 400+ partner contracts across 40 endorsed partners, helping Montana hospitals access vetted, Montana-aligned solutions that improve care, reduce cost and streamline operations. New 2025 partnerships include AblePay (patient financial engagement and affordability solutions), CMPS (workplace violence prevention and site security programs), Roshal Health (mobile echo and ultrasound service access, enabling rapid diagnostics) and Synergy Health Partners (shared general and orthopedic surgical services for rural hospital coverage).