

**STATE OF MONTANA  
OFFICE OF THE GOVERNOR  
EXECUTIVE ORDER No. 17-2016**

---

**THIRD AMENDMENT TO EXECUTIVE ORDER CREATING THE  
GOVERNOR'S COUNCIL ON HEALTHCARE INNOVATION**

---

**WHEREAS**, the State of Montana, hospitals, medical professionals and insurers have an ongoing responsibility to improve accessibility, affordability, quality, efficiency and transparency in the healthcare system;

**WHEREAS**, innovative payment and delivery reforms are being spearheaded by healthcare leaders in communities across the state, but, presently, there is no forum for sharing best practices or addressing systemic challenges;

**WHEREAS**, effectively preventing, identifying and managing chronic diseases such as cancer, diabetes and heart disease is key to controlling costs and improving the health of Montanans;

**WHEREAS**, accessibility and affordability of effective mental health treatment is a growing concern for Montana families;

**WHEREAS**, reducing health disparities and supporting high-risk patient populations are fundamental components of an improved healthcare delivery system; and,

**WHEREAS**, data sharing and evaluation capabilities are essential to the efficient coordination of care and the identification and measurement of strategies for improving healthcare efficiency and quality.

**NOW, THEREFORE, I, STEVE BULLOCK**, Governor of the State of Montana, by the authority vested in me under the laws and Constitution of the State of Montana, do hereby issue Executive Order No. 17-2016 amending Executive Order No. 15-2015 and providing for the creation of the Governor's Council on Healthcare Innovation (Council) as follows:

**PURPOSE**

The purpose of the Council is to review innovative practices, policies and opportunities for collaboratively increasing efficiency in the healthcare system and improving the health of Montanans.

## **DUTIES**

The Council will:

1. Review promising public and private reform initiatives in Montana and identify opportunities for collaboration, improvement, acceleration, and expansion;
2. Explore models successfully implemented in other communities and states for increasing efficiency and improving care;
3. Provide guidance on the development of a statewide, multi-payer healthcare innovation plan;
4. Solicit diverse stakeholder participation in the design process;
5. Coordinate with the Patient Centered Medical Home (PCMH) Program, public health programs, and other programs to leverage already existing population health and reform efforts; and,
6. Other duties as assigned by the Department of Public Health and Human Services (DPHHS) or the Governor.

## **COMPOSITION AND ORGANIZATION**

The Council will be composed of members who are appointed and serve at the pleasure of the Governor. The Council will be administratively attached to the DPHHS. The Council will be made up of members from the following categories:

1. Public and private payers
2. Indian/Tribal health representatives
3. Healthcare providers
4. Regulators
5. Consumer and/or patient advocates
6. Healthcare experts
7. Government officials

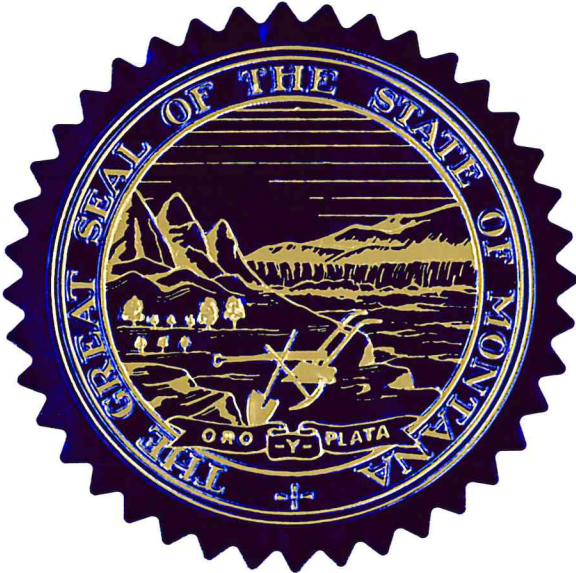
## **COMPENSATION**


Council members shall be eligible for compensation as defined under section 2-15-122(5) MCA, and shall be compensated in an amount to be determined by the DPHHS, not to exceed \$50 for each day in which the member is actually and necessarily engaged in the performance of Council duties. All Council members shall be reimbursed for travel expenses.

**DURATION**

This Order is effective immediately and the Council shall expire or be renewed by April 1, 2018.

Given under my hand and the Great Seal of the State of Montana, this 17<sup>th</sup> day of November, 2016.



  
\_\_\_\_\_  
STEVE BULLOCK, Governor

ATTESTED:

  
\_\_\_\_\_  
LINDA McCULLOCH, Secretary of State