ROCKY MOUNTAIN
HEALTH NETWORK, Inc.

Collaboration as a Catalyst for Change

As healthcare continues to evolve, so must the way we work together. Meaningful change in Montana healthcare will require true collaboration among providers, payers, healthcare systems, policymakers, and employers—moving beyond traditional boundaries to align incentives, share accountability, and develop sustainable solutions centered on the needs of the patients and communities we collectively serve.

Montana's payer landscape is broad and diverse. Medicare serves more than 266,000 beneficiaries; Medicaid expansion provides coverage to nearly 76,000 Montanans; and commercial insurance remains a significant part of our market. Each population has different needs, and each payer approaches coverage and reimbursement differently. Yet across the market, we are seeing a common direction emerge.

CMS is accelerating the transition toward value-based, accountable care, with a goal that by 2030 all Traditional Medicare fee-for-service beneficiaries—and many Medicaid beneficiaries—will be part of accountable care relationships. This represents more than a change in payment. It reflects a fundamental evolution in reimbursement methodologies, moving from models that have historically rewarded the volume of services delivered toward approaches that increasingly recognize quality, outcomes, efficiency, coordination, and the total cost of care.

For providers, navigating this transition will require us to operate successfully across multiple reimbursement methodologies. Fee-for-service will not disappear overnight, and value-based arrangements will continue to vary by payer, population, and program. Our challenge is to understand these models, align incentives where possible, and ensure that reimbursement appropriately supports the resources and infrastructure required to deliver high-quality, coordinated care.

This is particularly important in Montana. Our aging population, Medicaid expansion, rural geography, workforce pressures, and rising healthcare costs create challenges that cannot be addressed through reimbursement changes alone. Payment methodologies must recognize the realities of delivering care in Montana while creating the right incentives for access, quality, sustainability, and improved outcomes.

For Rocky Mountain Health Network, these changes reinforce both the importance of our role in bringing stakeholders together and our responsibility to ensure the network is positioned for the future. We are actively reviewing our current payer agreements and reimbursement methodologies to ensure they reflect the evolving healthcare landscape and allow RMHN and our participating providers to remain relevant, competitive, and financially sustainable.

As part of this effort, RMHN is committed to maintaining open and transparent communication with our participating providers. As payer agreements and reimbursement methodologies evolve, we will communicate changes to reimbursement rates, fee schedules, or payment methodologies to affected providers in a timely manner. We encourage you to remain engaged, ask questions, and carefully review these communications. Staying informed and maintaining an open dialogue will be increasingly important as payment models continue to evolve.

As we look toward 2030, our role is not simply to adapt to where healthcare is going. It is to help shape that future—creating greater alignment across Montana's healthcare community while keeping the individuals, families, and communities we collectively serve at the center of that work.

I also want to hear from you as we move through this process. If you have questions, concerns, or perspectives you would like to share regarding these changes or RMHN's direction, I encourage you to reach out to me directly. Open communication and candid dialogue will be essential as we navigate this changing environment together.

Darik Croft
President & CEO
Rocky Mountain Health Network
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RMHN MEMBER SPOTLIGHT: Rimrock Foundation

Overview of Services

Rimrock Foundation is a behavioral health treatment provider based in Billings, Montana, serving individuals and families impacted by substance use disorders, mental health conditions, and co-occurring disorders. Rimrock provides a comprehensive continuum of care designed to meet individuals at the appropriate level of treatment and support them throughout recovery.

Services include withdrawal management/detoxification, residential and inpatient treatment, day treatment, intensive outpatient and outpatient services, medication-assisted treatment (MAT), mental health and substance use assessments, individual and family therapy, and continuing care and recovery support. Rimrock also provides specialized mental health services and treatment for co-occurring conditions.

Beyond direct treatment, Rimrock works with employers, healthcare providers, and community organizations through education, professional training, prevention, employee assistance consultation, referral coordination, DUI education, and Substance Abuse Professional (SAP) services for DOT safety-sensitive employees. These partnerships help increase awareness, reduce stigma, strengthen access to care, and support healthier individuals, families, workplaces, and communities.

To contact Rimrock Foundation and learn more about their services, please see their contact information below.

1231 N 29th St, Billings, MT 59101
406-248-3175
Website: Alcohol, Drug, Gambling Addiction, Eating Disorder Treatment -Rimrock | Leading Addiction Treatment

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EDUCATION

Optum 2026 National Documentation and Coding Education Calendar for September

- Documentation and Coding: Depressive and personality disorders - September 15th from 9-9:30am
- Documentation and Coding: Alcohol and substance use disorders - September 15th from 1-1:30pm
- Documentation and Coding: Vascular disease, stroke, and vascular dementia - September 16th from 10-10:30am
- Documentation and Coding: Gastrointestinal Disorders - September 16th from 12-12:30pm
- Documentation and Coding: Cardiovascular Disease - September 17th from 9-9:30am
- Documentation and Coding: Vascular disease, stroke, and vascular dementia - September 17th from 11-11:30am

Humana Risk Adjustment 2026 Medical Coding CEU Sessions for September

- Peripheral Vascular Disease (1 CEU) - September 9th from 10-11:00am
- Peripheral Vascular Disease (1 CEU) - September 10th from 1-2:00pm
- Medicare Risk Adjustment Overview (1 CEU) - September 16th from 10-11:00am
- Current Procedural Terminology (1 CEU) - September 23rd from 10-11:00am
- Current Procedural Terminology (1 CEU) - September 24th from 1-2:00pm

Humana Coding Education for September

- AWV Documentation & Coding (1 CEU) - September 10th at 12:00pm
- Transition Care Management Documentation & Coding Basics - September 28th at 1:00pm
- Advanced Illness & Frailty with Diagnosis Documentation Best Practices (1 CEU) - September 21st at 6:00pm

Rocky Mountain Health Network
2475 Village Ln, Ste 302, Billings, MT 59102
406-238-6066

Contact Us by Email

Find More Information On Our Website