When I needed help, PrimeWest Health was there and I got the services I needed.
– Richard, McLeod County
**What is PrimeWest Health?**
PrimeWest Health is a partnership of 13 rural Minnesota counties governed by a Joint Powers Board (JPB). Our JPB includes two county commissioners (one primary and one alternate) from each of our owner counties. We are headquartered in Alexandria, Minnesota. Since 1997 we have administered a County-Based Purchasing (CBP) health plan owned by the counties we serve. Through this health plan, we manage and pay for the health care, wellness, and human services of over 36,000 residents in our counties.

What makes us different is our local county ownership structure and employees and the connection they have to the people we serve—because those people are our neighbors, family, or friends.

**Who do we serve?**
PrimeWest Health provides health coverage to residents of our 13 counties who qualify for Minnesota Health Care Programs (MHCP) and enroll in one of several Federally and/or State-funded health care coverage programs.

- People who are eligible for **Medical Assistance**. Medical Assistance is the State of Minnesota’s name for the Medicaid program. Medical Assistance is a health care coverage program funded jointly by the Federal and State governments. Eligibility for Medical Assistance is determined by income level and status (e.g., children, pregnant women).

- People who are eligible for both **Medical Assistance and Medicare**. Those who are age 65 or over are in our Minnesota Senior Health Options (MSHO) program and people with certified disabilities are in our Special Needs BasicCare (SNBC) program.

- People who qualify for **MinnesotaCare**, a health care coverage program for those whose incomes are over the limit for Medical Assistance, but are still below income levels set by the Affordable Care Act (ACA). MinnesotaCare recipients pay some level of premium for their coverage, depending on their income.

"Ortonville Area Health Services feels confident in our interactions with PrimeWest Health. We feel fortunate to have this local health plan."

– Site Manager, Ortonville Area Health Services
Supporting members

- **Enrollment** – Enrolling in a PrimeWest Health program is done through the county or State. But, we work with county financial workers and the Minnesota Department of Human Services (DHS) to make sure our enrollment information is accurate and current so members can access their benefits and services when they need them.

- **Member services** – Members are always pleased to discover that our Member Contact Center representatives answer the phone directly—there is no automated system to deal with. Also, our representatives know it is their responsibility to help members navigate the health care system. So, they act as advocates—not gatekeepers—to help members get the care they need.

- **Coordinating care and fostering quality** – For many members, local county case managers coordinate the care they receive—medical, dental, pharmacy, behavioral health, public health, and human services. We think this is important because locally based staff know and understand the communities where our members live. This knowledge helps ensure that members get the quality care they need and deserve. It also helps members focus on wellness and prevention so they can lead healthier lives.

Supporting providers

- **Provider network management** – The key to PrimeWest Health’s success is a strong provider network capable of delivering cost-effective, high-quality health care, human services, and health and wellness products to our members in a timely manner. We invest substantial resources to ensure provider satisfaction with PrimeWest Health and, as a result, the PrimeWest Health provider network includes over 10,000 contracted health care and human services providers and facilities that represent the entire continuum of health care services. One reason providers like PrimeWest Health is that we process claims quickly. Nearly 100 percent of claims are processed electronically, and the average turnaround time to pay “clean” claims (claims that are complete and accurate) is 8 – 12 days. The regulatory requirement is 30 days.

*PrimeWest Health staff are easily accessible, knowledgeable, and provide timely responses to our requests.*  
– Administrator, Alexandria Clinic
Serving responsibly using technology and best practices

- **Information systems technology** – While PrimeWest Health is committed to providing services in a way that is personal and easy-to-understand, behind the scenes we apply cutting-edge technology and automation to improve our operations and outcomes whenever practical. Through technology and a highly experienced team of health care information technology professionals, PrimeWest Health is continually applying or developing new electronic solutions to support our members, providers, and county partners.

- **Regulatory compliance** – Federal and State tax dollars pay for the care and care management of our members enrolled in Medicare, Medical Assistance, and other publicly funded health care programs. So it’s important to implement compliance programs and activities that are designed to prevent, identify, and address fraud, waste, and abuse of health care resources and to protect the health information and privacy of our members.

- **Financial and insurance risk management** – Experienced professionals excel in monitoring, reporting, and managing the finances of PrimeWest Health to safeguard resources and ensure we have sufficient funds to meet all obligations and minimize risk to member/owner counties. Activities include financial and data reporting to Federal and State agencies, actuarial analysis of obligations and capital requirements, revenue and medical expense budgeting, and new program financial evaluation. Because PrimeWest Health is a county-owned organization, our operations are fully transparent, accessible, and accountable to the public.

### PrimeWest Health History

- **1997**
  - County commissioners, public health and human services officials, health care providers, and PrimeWest Health staff collaborate on rolling out PrimeWest Health System in Big Stone, Douglas, Grant, McLeod, Meeker, Pipestone, Pope, Renville, Stevens, and Traverse counties.

- **1997–2003**
  - Minnesota legislators recognize the importance of County-Based Purchasing and how it can make a positive contribution to managed care of public programs.

- **2003**
  - PrimeWest Health begins health coverage operations with two MHCP programs for children and families and single adults. By the end of 2003, PrimeWest Health serves an average of 5,441 members per month.

- **2005**
  - PrimeWest Health adds three new MHCP programs. Our membership averages 9,745 per month.

- **2006**
  - PrimeWest Health begins offering fully integrated Medical Assistance and Medicare coverage, including Medicare Part D, for people over age 65.
Serving responsibly using technology and best practices

While PrimeWest Health is committed to providing services in a way that is personal and easy-to-understand, behind the scenes we apply cutting-edge technology and automation to improve our operations and outcomes whenever practical. Through technology and a highly experienced team of health care information technology professionals, PrimeWest Health is continually applying or developing new electronic solutions to support our members, providers, and county partners.

Regulatory compliance –

Federal and State tax dollars pay for the care and care management of our members enrolled in Medicare, Medical Assistance, and other publicly funded health care programs. So it’s important to implement compliance programs and activities that are designed to prevent, identify, and address fraud, waste, and abuse of health care resources and to protect the health information and privacy of our members.

Financial and insurance risk management –

Experienced professionals excel in monitoring, reporting, and managing the finances of PrimeWest Health to safeguard resources and ensure we have sufficient funds to meet all obligations and minimize risk to member/owner counties. Activities include financial and data reporting to Federal and State agencies, actuarial analysis of obligations and capital requirements, revenue and medical expense budgeting, and new program financial evaluation. Because PrimeWest Health is a county-owned organization, our operations are fully transparent, accessible, and accountable to the public.

Serving with innovation – a leader in health care reform

Health care reform is all about what the Institute for Healthcare Improvement (IHI) has called “Triple Aim”—improved care, improved individual and population health, and reduced health care spending. PrimeWest Health believes that these are exactly the goals the health care industry should focus on, and we are transitioning our operational approach from traditional managed care to an approach of provider-payer shared accountability and value-based health care and human services delivery and financing. To achieve Triple Aim in our rural areas and to remain good stewards of the public resources entrusted to us, PrimeWest Health has developed an approach we call “Accountable Rural Community Health” or ARCH. Through ARCH, PrimeWest Health uses cutting-edge technology, person-centered health care homes, proven wellness management approaches, innovative community reinvestment and development strategies, and alternative provider payment methods to deliver high-quality health care services, achieve optimal care and treatment outcomes, and improve individual and population health in the most cost-effective way possible. Almost 60 percent of our over 36,000 members now participate in ARCH through five clinic locations. This means that over half of our members are benefitting from successful accountable care partnerships in our service area.

ACMC enjoys the close working relationship we have with PrimeWest Health in serving our patients who have PrimeWest Health coverage. They understand the needs of rural providers and are in touch with the changing landscape of health care in our community.

– Administrator, Affiliated Community Medical Center

Serving with innovation – a leader in health care reform

Beltrami, Clearwater, and Hubbard counties join PrimeWest Health. We add programs for people with disabilities. These expansions increase average monthly enrollment to 16,137 members.

The State begins auto-enrollment in managed care programs for people with disabilities, increasing PrimeWest Health’s average monthly membership to 23,907.

PrimeWest Health expands the number of programs offered in Beltrami, Clearwater, and Hubbard counties. Monthly membership climbs to an average of 20,975.

More than 20,000 members now participate in ARCH in five clinic locations, meaning that over half of our members are benefitting from accountable care partnerships.

The Affordable Care Act (ACA) goes into effect and significantly increases the number of people eligible for Medical Assistance. PrimeWest Health’s membership climbs to 36,027 by the end of the year. PrimeWest Health is recognized with the Commissioner’s Circle of Excellence award from the Minnesota Department of Human Services.

2008

2010

2012

2014

2015
I am 68 years old...and this is the first time in my life my family and friends don’t need to worry about my health care because I have PrimeWest Health looking out for me. – Joan, Stevens County

Community Reinvestment Grant Program
Because PrimeWest Health is county-owned, our resources belong to the counties and communities we serve. So, when we are able, we share these resources by investing in our communities. The best example of this is the PrimeWest Health Community Reinvestment Grant Program. Through this program, PrimeWest Health uses surplus revenue from operations to fund programs, projects, and services that will benefit the health and well-being of our members and support the efforts of providers to provide quality care. Since 2006, PrimeWest Health has awarded over $12 million in grants to providers and community organizations that serve PrimeWest Health members. This includes more than $3,850,000 to behavioral health providers; $2,200,000 for wellness, prevention, and health promotion; $1,680,000 to oral health providers; and $830,000 for transportation.
A message from the PrimeWest Health Joint Powers Board of Directors and staff

For those of us who govern and work at PrimeWest Health, doing our jobs means being good neighbors, plain and simple. It may seem unusual to hear the word “neighbor” coming from a health plan. But at PrimeWest Health, we are neighbors. We are located right here in rural Minnesota and we live and work in the same communities as our members, providers, and county partners. We don’t just offer a local presence, however. We are also a high quality health plan that provides excellent service and programs to our members and providers. In fact, we have gained a reputation for our dedication to quality. Where did this commitment to quality come from? It goes back to why we started in the first place.

PrimeWest Health was created in response to the statewide implementation of managed care for public programs in the mid-1990s. At the time, rural county commissioners were concerned that existing health plans weren’t poised geographically or operationally to address the unique needs of rural members and providers. The commissioners believed that a health plan owned and operated locally by counties and based on the following set of guiding principles would be better able to provide high-quality services to members and a strong support system to our local providers.

- All members must be treated with **dignity** and **respect**. They are more than just numbers; they are our neighbors, family, and friends, and we care for them.
- Integration with other **local community resources** increases quality, provides members with better service, and reduces costs.
- To ensure **transparency** and **accountability**, board meetings and financial records must be open to the public. Risk assumption, management, and payment should be managed locally and be fully transparent and accountable to communities, providers, and members.
- **Local control** ensures that decisions are based on what’s best for our members, providers, and communities.
- **Access to local providers** should be maintained and improved. This includes contracting with all qualified and willing providers in the covered counties.
- Access to a **large and diverse provider network** in and out of the service area should be maintained and improved.
- **Reinvestment in the community** is essential. Savings achieved by the plan should be reinvested into the local health care communities to increase rural access.
- **Adaptability** and **flexibility** are crucial. The plan must continually strive to develop innovative solutions for rural health needs.

These principles still guide PrimeWest Health today.

If you would like to learn more about PrimeWest Health, please contact Jim Przybilla, CEO, at 1-320-335-5250 or jim.przybilla@primewest.org, or Beth Hendrickson, Director of Communications, at 1-320-335-5338 or beth.hendrickson@primewest.org.
Caring Hands Dental Clinic has seen firsthand the high-quality health care that PrimeWest promotes and provides its members. We also enjoy and can attest to the outstanding services and support they provide our organization. Thank you, PrimeWest Health! – Clinic Director, Caring Hands Dental Clinic