



# Big Sky Impact

FALL 2021

NEWS AND EVENTS

## PATIENT EXPERIENCE AT PLANNED PARENTHOOD OF MONTANA

**Providing a high quality experience** for patients at PPMT is a priority every day. Through partnership with Press Ganey, a national leader in health care data analytics, PPMT patients are invited to complete satisfaction surveys after their visits. Our focus on patient experience led to the creation of an **experience strategic plan**. The work is led by Kate Nesson, PPMT’s Director of Learning and Experience. Putting patients at the center is key to our success, as is sharing our patient satisfaction scores transparently with all staff.

Each month our health center managers look at how likely our patients are to recommend PPMT, how well patients think our staff work together, and how satisfied patients are with their overall experience. And staff celebrate these results: for example, in August of 2021, the patients at the Billings West Health Center gave the care team perfect scores in each of these areas. Staff also enjoy reading patient comments and getting telehealth visit feedback so they can continue to learn and provide even better care.

Patients recognize the importance we place on a positive experience with their responses and comments, and for the second year in a row, our surveyor has also recognized our efforts.

Planned Parenthood of Montana has received the Press Ganey 2021 Guardian of Excellence Award®, for scoring in the 95th percentile of all providers!

## Patient Comments

“I was made to feel heard and supported the whole time I was at the health care center.”

“My provider was absolutely amazing! Best provider I’ve ever been to in my life!”

“The staff is always professional and courteous and I feel it is sincere which is important.”



Each year Press Ganey recognizes select health care organizations with awards that commend efforts to improve the quality and safety of patient care, provide a positive and collaborative environment for employees and physicians, and ultimately deliver exceptional patient experiences.



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# A Message from MARTHA



Dear Friends,

**On September 1, people in the United States woke up to an abortion access landscape like none we have seen in decades.** For many years, the restrictive laws of many states — bans on abortion after a certain point in pregnancy, laws requiring abortion providers to comply with nonsensical and arbitrary restrictions that only apply to them, etc. — have been passed and then rendered unenforceable, as they are in conflict with *Roe v. Wade*. Underneath constitutional protections lurk a patchwork of accessibility and hostility, lying in wait for a court ruling that would strip away the protections of *Roe* that keep access to abortion somewhat equal across our country. That's not to say that all people have access to abortion. The allowable restrictions (waiting periods, parental involvement laws, and more) in conjunction with, and separately from, financial realities, geographic and travel barriers, and provider numbers mean that access to abortion was already dictated by much more than the court's rulings in *Roe v. Wade* and subsequent cases, like *Whole Women's Health*.

But in Texas, on September 1, abortion after six weeks of pregnancy, measured from the first day of the pregnant person's last menstrual period (LMP) became illegal when Senate Bill 8 (SB 8) became law. Many people have written about SB 8 and its intricacies, and the status of this unconstitutional law may have changed by the time you read this, so I'll leave the details to coverage of breaking news. However, one thing is clear — we have entered a time of uncertainty about the future of abortion in the United States.

In Montana, our state constitution has an incredibly strong right to privacy, a right that case law clearly applies to decisions about abortion. Yet, for two days at the end of September, right before three anti-abortion laws were set to go into effect here, the uncertainty felt overwhelmingly real to abortion providers like Planned Parenthood. A series of confusing twists in our lawsuit challenging these laws preceded a last-minute temporary restraining order, issued just six hours before the looming deadline. On October 7, that temporary order was replaced with an injunction that will protect access until a final ruling in the case.

**Every single person seeking an abortion is an individual, and at Planned Parenthood of Montana, we see them. And we will continue to fight for their right to be seen by us, as patients and as people.**

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In this moment, abortion providers have two jobs: defending access in the courts, and taking care of their patients, both physically and mentally, as they fear for their ability to get care in many places. Over the next year, the U.S. Supreme Court will rule on Mississippi's 15 week abortion ban. Montana's courts will look at the constitutionality of the laws we are challenging. The legal battles of SB 8 in Texas will continue. When we filed our challenge to Montana's new laws, a reporter asked me "which law is the worst?" My answer: for any one patient, it is the one that means they can't get care. Every single person seeking an abortion is an individual, and at Planned Parenthood of Montana, we see them. And we will continue to fight for their right to be seen by us, as patients and as people. That's what we mean when we say: **"Care. No matter what."**

Onward,

Martha Stahl, *President and CEO*



## TOGETHER: HOW CONNECTION CREATES IMPACT



Emmalea C., Advocacy Campaign Intern  
Planned Parenthood Advocates of Montana

**" ... we are bound together in our fight for bodily autonomy and reproductive freedom."**

**In January I launched into uncharted waters** as the advocacy campaign intern for Planned Parenthood Advocates of Montana (PPAMT). Realistically, the organizing tactics I learned became the most accessible and impactful way to take part in the intense legislative session. Rising to the demands of running a virtual-based program comes with its platitudes, but I'm proud of the amount of movement we were able to build. The ongoing work required to keep the momentum needs a continued creativity that I hope to further witness and engage in.

The anti-reproductive health care legislation introduced and passed frustrates and saddens me, knowing that the power and control exercised will continue to rise in Montana. However, the work our team did to meet the threats by centering patient storytellers is especially meaningful and relevant in light of the renewed efforts nationally and locally to restrict reproductive rights.

I believe advocating for others and encouraging folks to do so for themselves can counteract much of the denial of services and pain people may face in the near future. My internship connected me with so many generous and thoughtful people, which made the difficult moments all the more bearable and worth it. I will continue to fight for them and the countless others I may never meet because we are bound together in our fight for bodily autonomy and reproductive freedom.

## IF ROE V. WADE FALLS

New research from Planned Parenthood Federation of America, and In Our Own Voice: National Black Women's Reproductive Justice Agenda shows **more than 36 million women — nearly half of the women of reproductive age (18–49) in the United States — and more people who can become pregnant could lose abortion access** if the Supreme Court overturns Roe v. Wade.

- When this report was last published in 2018, 20 states were primed to ban access to safe, legal abortion should Roe fall, totaling 25 million women of reproductive age. **Just three years later, 26 states are poised to move to ban abortion — putting at least 11 million more women, trans men, and nonbinary and gender-nonconforming people at risk of losing access to abortion.**

**It is a crisis moment: the threat to the constitutional right to an abortion has never been greater.** This is the culmination of anti-abortion politicians and activists' decades-long plan to outlaw abortion. Steadily, they've pushed harsher abortion restrictions, defunded essential community health centers and programs, and stacked the federal courts to ensure these policies stay in place.

- **In 2021 alone, nearly 600 abortion restrictions were introduced nationwide, with 90 enacted into law — more than in any year since Roe v. Wade was decided.**
- **In the coming months, the U.S. Supreme Court could allow states to ban abortion altogether.**

### PPAMT Board of Directors



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## Health Care Services Provided

Total number of patient visits	13,384
LARC* provided	786
Contraceptive cycles dispensed	10,669
Emergency contraception dispensed	416
Breast exams performed	1,649
Cervical cancer screenings (Pap smears)	1,120
Tests for sexually transmitted infections	10,177
Medication Abortions	934
Surgical Abortions	258

\* Long-Acting Reversible Contraceptives



2,847  
Telehealth  
visits



**NEW**  
Integrated  
Behavioral  
Health program  
had 153 IBH  
visits since  
January '21



PPMT Health Center Staff across Montana.

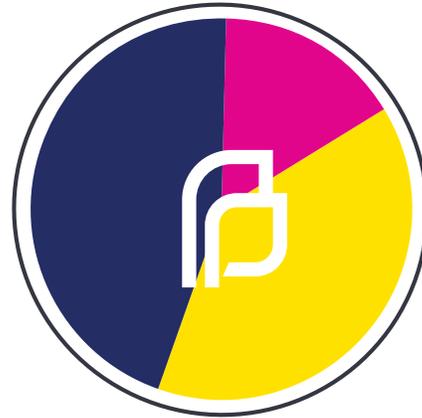


## OUR NEW PATIENT PORTAL

Planned Parenthood of Montana has recently transitioned to the **MyChart® web-based medical record system**. MyChart® will offer patients the opportunity to communicate securely with health care staff, request prescription refills, view lab results and medical records, review care instructions from previous visits, review and schedule upcoming appointments, and access trusted health information resources — all in one place. The online portal is accessible via computer or mobile phone, making access to care even more attainable for patients. Patients’ records will be available across other participating affiliates which means patients can seamlessly, and securely, change health centers while traveling or if they relocate.

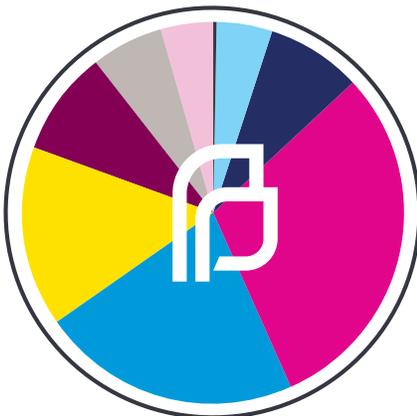


## How Our Patients Pay



■ Third-Party Payer	45.2%
■ Medicaid/Medicare	38.9%
■ Uninsured/Receiving Assistance	15.9%

## Patients By Age



■ Less than 14 years	.4 %
■ 15 – 17 years	4.8 %
■ 18 – 19 years	7.9 %
■ 20 – 24 years	30.2 %
■ 25 – 29 years	22.0 %
■ 30 – 34 years	15.4 %
■ 35 – 39 years	9.0 %
■ 40 – 44 years	6.1 %
■ 45 years or more	4.2 %



## PPMT Education Activities

**11** Teen Council members contributed **828** combined service and volunteer hours to PPMT. **690** meeting hours, **45** hours at special events, and **93** hours for a retreat. They also reported **47** informal education conversations with **63** individuals.





## RESEARCH STUDY CONCLUDES, ABORTION MEDS BY MAIL CONTINUES

In late 2019, Planned Parenthood of Montana began participating in a national research study to assess the feasibility of providing medication abortion via telehealth. In this service model, called Meds by Mail, patients meet with our clinician for a video evaluation and if eligible, PPMT mails abortion medications to the patient and follows up by phone or video. Patients who need an ultrasound or bloodwork can get those close to home, but they never have to travel to one of our health centers to complete their abortion. This is critical and groundbreaking progress for our patients, and is the next frontier of health delivery.

Zip code data from the study helped us better understand how far our patients would have to travel to get their medication abortions at one of our health centers or with another provider. We found that the average roundtrip, assuming no stops and clear roads, took over three hours. In the last year, 22% of the Meds by Mail patients would have had to travel five hours or more, round-trip, to get care. Patients have reported that having to travel this distance would have caused several types of barriers, including lack of reliable transportation, missed work or school, and the need for childcare. Meds by Mail addresses these barriers and in doing so increases health care access and equity, both of which are strategic priorities for PPMT. Medication

abortions, both via telehealth and in person, now account for 78% of abortions performed by PPMT.

Here in Montana, we have provided this service to more than 200 patients through the research study while nationwide over 2,000 patients have been served. Having met its sample size goal, the research has ended, but based on demand and patient and staff feedback, we will continue to provide this critical service for patients across the state. This has been made possible by a court order that lifted the FDA's Risk Evaluation and Mitigation Strategies (REMS), which until the pandemic, did not allow direct to patient medication abortion services via telehealth. Research study sites were already exempted.

This spring the Montana legislature passed a bill, later signed into law by Governor Gianforte, banning the use of telemedicine for medication abortion, and adding unnecessary requirements to patients seeking medication abortion at a health center. The same law would require medication abortion patients come to a health center, not just once, but three times. That would increase the travel time for people who could benefit from Meds by Mail to an average of nine hours. This is just one of the laws PPMT is challenging in the Montana courts. (See "A Message from Martha," on page 2.)

## MEET DAWN, OUR DIRECTOR FOR CLINICAL EXCELLENCE

**Creating a sustainable organization** that meets the health care needs of the community today and in the future requires a culture of continuous clinical quality improvement to ensure our services are effective, efficient, and equitable. Building and maintaining clinical excellence is a multi-faceted task. It includes ensuring good patient outcomes and high patient satisfaction, maintaining a workplace where staff feel valued and have good work-life balance, being cost-efficient, continuously analyzing data for trends that may require us to pivot, and both embracing and rewarding innovation.

Dawn Dockstader has agreed to serve as our first Director for Clinical Excellence and lead this important

work. Dawn started working with PPMT in 2011 and served as the health center manager in Helena for eleven years. In her time at PPMT, she has developed a reputation for being an effective and nimble leader who builds strong relationships, listens well, synthesizes different perspectives, communicates constructively, and turns ambitious ideas into realities. She understands that continuous clinical quality improvement requires not only technical skill building but strong buy-in from staff to learn about clinical advances and embrace feedback and change when necessary.



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## TEEN COUNCIL KICK OFF!

**One of the most fulfilling and exciting programs** in Planned Parenthood of Montana's Education department is the Teen Council in Billings. Nothing fills our collective cups better than spending time with truly amazing youth who are as passionate about PPMT as we are.

Covid-19 has dramatically changed the landscape of education, but PPMT's outstanding education staff continue to bring professionalism, organization, and dedication to all they do.

The **2021–2022 Teen Council** is no exception, and earlier this summer the program kicked off with a virtual retreat.

Through the powers of Zoom, Teen Council members learned about human sexuality and reproductive anatomy, had a chance to get to know each other, and even got incredibly close to beating a virtual escape room.

Even though we all prefer in-person events, the pillars of the Teen Council Program (high warmth, high structure, and high expectations) are evident in every online meeting. To maintain safety, Teen Council members will continue to meet virtually until public health indicators allow for in-person events.



Teen Council is facing this added challenge after the passage of Senate Bill 99 by the legislature. Senate Bill 99 bans abortion providing organizations from providing sex education in public schools in Montana. Many Teen Council members, past and present, testified against passage of the law. Covid-19 has already given them an opportunity to think innovatively about how to deliver content. This new law, while terribly short-sighted and unjust, will encourage them to be even more innovative in delivering education to their peers.

## MEET DAWN, *continued*

Shar Wadekamper, who has succeeded Dawn as our health center manager in Helena, describes Dawn as someone who “has helped create a happy and healthy work environment, even during busy and stressful times. She inspires her colleagues to go the extra mile.”

Dawn has identified several priorities as she launches this work. The first is to draw on her years as a health center manager to maintain trust and close relationships with staff working on the front lines and to keep her finger on the pulse of the challenges our patients, staff, and health centers face on a daily basis. She will focus on ensuring that health centers have the tools and resources they need to succeed. Dawn is laser focused on helping PPMT be strategic about how we evolve in the clinical space, including finding opportunities to centralize certain aspects of our work to ensure consistency and improve efficiency.

## Making an impact!



Visit our giving page by opening the camera on your mobile phone to scan this code or by using the link below  
[weareplannedparenthood.org/a/ppmt-impact](https://weareplannedparenthood.org/a/ppmt-impact)

## PPMT Health Centers

Health Center hours have been changed to meet our patients' needs.

### Billings West

(406) 656.9980  
1844 Broadwater #4  
Monday – Friday  
8 am – 5 pm

### Billings Heights

(406) 869.5040  
100 W. Wicks Lane  
Monday . . . 8 am – 5 pm  
Closed Tuesday – Friday

### Great Falls

(406) 454.3431  
211 9th Street South  
Monday – Friday  
9 am – 5:30 pm

### Helena

(406) 443.7676  
1500 Cannon Street  
Monday – Friday  
9 am – 6 pm

### Missoula

(406) 728.5490  
219 E. Main Street  
Monday – Friday  
9 am – 4:30 pm

### Billings Administration

Monday – Friday  
(406) 248-3636

[plannedparenthood.org/planned-parenthood-montana](https://plannedparenthood.org/planned-parenthood-montana)

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Twitter: @ppmontana

Instagram: @ppmontana

Facebook: Planned Parenthood Advocates of Montana

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Twitter: @ppadvocatesmt



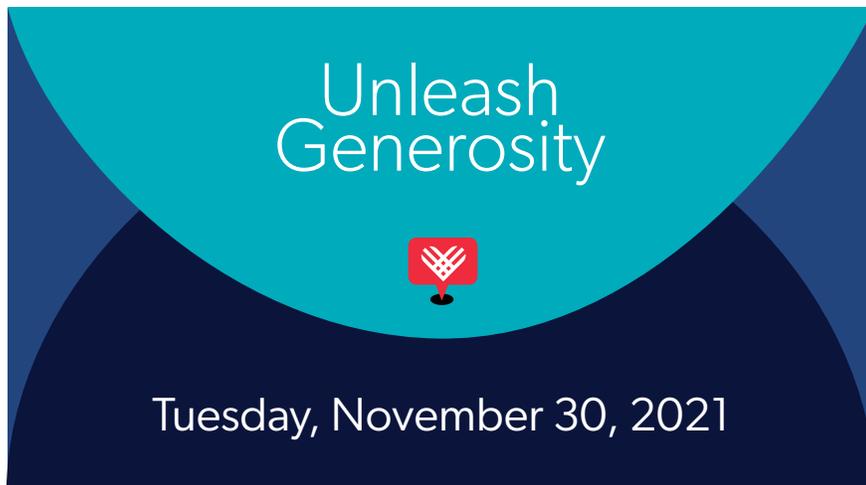
Planned Parenthood of Montana

1116 Grand Ave, Suite 201  
Billings, MT 59102

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## SAVE THE DATE FOR GIVING TUESDAY!

**GivingTuesday** was created in 2012 as a simple idea: a day that encourages people to do good. Join in celebrating this international day of generosity happening this year on **November 30**.



Ellie holds a bouquet that was donated to one of our health centers. The flowers brightened the day for staff and patients.