



## Website Postings by Week for 2018

These documents are available on the [Montana Healthcare Programs Provider Information website.](#)

### April 13, 2018

<b><i>Page/Provider</i></b>	<b><i>Item</i></b>	<b><i>Date Approved</i></b>	<b><i>Date Posted</i></b>	<b><i>Document Date</i></b>
<ul style="list-style-type: none"> <li>• Pharmacy DUR</li> </ul>	DUR Agenda – Revised	04/09/2018	04/09/2018	04/25/2018
<ul style="list-style-type: none"> <li>• Outpatient Hospital</li> <li>• CAH</li> <li>• IDTF</li> <li>• Physicians</li> <li>• Mid-Levels</li> </ul>	Provider Notice MRI of the Brain – Revised	04/09/2018	04/09/2018	04/09/2018
<ul style="list-style-type: none"> <li>• Outpatient Hospital</li> <li>• CAH</li> <li>• IDTF</li> <li>• Physicians</li> <li>• Mid-Levels</li> </ul>	Provider Notice CT of the Brain - Revised	04/09/2018	04/09/2018	04/09/2018

**Website Postings by Week for 2018**

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**April 6, 2018**

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
• ASC	Fee Schedule January 2018 Revised	04/02/2018	04/02/2018	01/01/2018
• Passport	REMOVED What is Passport Document	04/02/2018	04/02/2018	2014
• Passport	RMEOVED HIP Referral Form	04/02/2018	04/02/2018	2014
• HIP	PAGE REMOVED	04/02/2014	04/02/2014	N/A
• Pharmacy DUR	DUR March 18 Meeting Minutes	04/02/2018	04/02/2018	03/18/2018
• Hospital Inpatient	Fee Schedule OPPS	04/02/2018	04/02/2018	01/01/2018
• Presumptive Eligibility	2018 Income Tool	04/03/2018	4/03/2018	04/03/2018
• Presumptive Eligibility	Training Dates Added	04/02/2018	04/03/2018	04/03/2018
• Home	AMDD Rule and Manual Postponement	04/03/2018	04/03/2018	04/03/2018
• All Providers	Provider Notice Passport Populations and Reimbursement	04/04/2018	04/04/2018	04/03/2018
• ASC	Fee Schedule & Cover Sheet ASC April 2018 Fee Schedule	04/04/2018	04/04/2018	04/012018
<ul style="list-style-type: none"> <li>• Hospital Inpatient</li> <li>• Hospital Outpatient</li> <li>• Podiatrist</li> <li>• ASC</li> <li>• Family Planning</li> <li>• Pharmacy</li> <li>• Optometric</li> <li>• Optician</li> <li>• Physician</li> <li>• HCBS</li> <li>• Lab Services</li> <li>• Social Worker</li> <li>• Mid-Levels</li> <li>• Eyeglasses</li> <li>• Home Health</li> <li>• Psychiatrist</li> <li>• Clinical Pharmacist</li> <li>• IDTF</li> </ul>	Rebateable Labelers	04/04/2018	04/04/2018	04/04/2018



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<b><i>Page/Provider</i></b>	<b><i>Item</i></b>	<b><i>Date Approved</i></b>	<b><i>Date Posted</i></b>	<b><i>Document Date</i></b>
• Hospital Inpatient	Fee Schedule January 2018 APR-DRG Excel version enabled calculations	04/06/2018	04/06/2018	01/01/2018
• Hospital Outpatient	Cover Sheet OPPS	04/06/2018	04/06/2018	01/01/2018
• Hospital Outpatient	Cover Sheet OPPS	04/06/2018	04/06/2018	03/01/2018

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### March 30, 2018

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• Pharmacy DUR	Agenda DUR April 25, 2018 – revised	03/27/2018	03/27/2018	04/25/2018
• All Manuals	All manuals were reviewed and updated with current EDI links and MPQH telephone and address information.	03/27/2018	03/28/2018	03/27/2018
• FQHC • RHC	FQHC/RHC Manual Revised	03/27/2018	03/27/2018	03/22/2018
• Hospital Inpatient	APR-DRG – Excel version, calculations enabled	03/29/2018	03/29/2018	03/29/2018
• Mid-Levels	Fee Schedule January 2018 revised	03/29/2018	03/29/2018	03/29/2018
• Ambulance	Fee Schedule January 2018 Ambulance revised	03/29/2018	03/28/2018	03/30/2018
• Psychiatrist	Fee Schedule January 2018 Psychiatrist revised	03/29/2018	03/28/2018	03/30/2018
• Physician	Fee Schedule January 2018 Physician revised	03/29/2018	03/28/2018	03/30/2018
• IHS/635 Tribal Registration Page	Agenda Posted for May Spring Training	03/29/2018	03/29/2018	03/29/2018

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### March 23, 2018

<i>Page/Provider</i>	<i>Item</i>	<i>Date Approved</i>	<i>Date Posted</i>	<i>Document Date</i>
<ul style="list-style-type: none"> <li>Forms</li> </ul>	MA-3 Original MA-3 returned to the website now 508 compliant	03/21/2018	03/21/2018	03/21/2018
<ul style="list-style-type: none"> <li>Prior Authorization</li> </ul>	PA Criteria For Breast Reconstruction – Revised	03/21/2018	03/21/2018	03/21/2018
<ul style="list-style-type: none"> <li>Physicians</li> <li>Mid-Levels</li> <li>Outpatient Hospital</li> <li>ASC</li> </ul>	Provider Notice Criteria for Breast Reconstruction PA	03/21/2018	03/21/2018	03/22/2018
<ul style="list-style-type: none"> <li>Pharmacy DUR</li> </ul>	DUR Meeting Agenda 04/25/2018 – Revised	03/22/2018	03/22/2018	04/25/2018
<ul style="list-style-type: none"> <li>IHS/Tribal 635 Training Registration</li> </ul>	Spring Training Registration Added	03/22/2018	03/22/2018	03/22/2018
<ul style="list-style-type: none"> <li>Training</li> </ul>	WebEx Power Points Children’s Mental Health Bureau Training	03/22/2018	03/22/2018	03/22/2018
<ul style="list-style-type: none"> <li>CJ Newsletters</li> </ul>	April 2018 Claim Jumper	03/23/2018	03/23/2018	03/23/2018

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### March 16, 2018

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
<ul style="list-style-type: none"> <li>• Ambulance</li> </ul>	Ambulance Services Manual Revised	03/12/2018	03/12/2018	03/09/2018
<ul style="list-style-type: none"> <li>• Mental Health Centers</li> <li>• Licensed Professional Counselors</li> <li>• School-Based Services</li> <li>• Therapeutic Foster Care</li> <li>• Therapeutic Group Homes</li> </ul>	Provider Notice Prior Authorization for Genetics Testing for Youth Mental Health	03/13/2018	03/13/2018	03/12/2018
<ul style="list-style-type: none"> <li>• FQHC</li> <li>• RHC</li> </ul>	FQHC/RHC Fee Schedule January 2018	03/13/2018	03/13/2018	01/01/2018
<ul style="list-style-type: none"> <li>• DME</li> </ul>	DME Fee Schedule March 2018 Revised	03/13/2018	03/14/2018	03/14/2018
<ul style="list-style-type: none"> <li>• Home Announcements</li> <li>• Training</li> </ul>	Webex Announcement March and April Training Announced	03/14/2018	03/14/2018	03/14/2018
<ul style="list-style-type: none"> <li>• Home Announcements</li> </ul>	AMDD Training Announcement	03/14/2018	03/14/2018	03/14/2018
<ul style="list-style-type: none"> <li>• ASC</li> </ul>	January 2018 Fee Schedule Revised	03/14/2018	03/14/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Outpatient Hospitals</li> <li>• Critical Access Hospitals</li> </ul>	Provider Notice Elimination of Provider-Based Clinic Status - Revised	03/14/2018	03/14/2018	03/14/2018
<ul style="list-style-type: none"> <li>• Outpatient Hospital</li> <li>• Critical Access Hospitals</li> <li>• IDTF</li> <li>• Physicians</li> <li>• Mid-Levels</li> </ul>	Provider Notice CT of the Brain	03/15/2018	03/15/2018	03/14/2018
<ul style="list-style-type: none"> <li>• Outpatient Hospital</li> <li>• Critical Access Hospitals</li> <li>• IDTF</li> <li>• Physicians</li> <li>• Mid-Levels</li> </ul>	Provider Notice MRI of the Brain	03/15/2018	03/15/2018	03/14/2018

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### March 9, 2018

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
<ul style="list-style-type: none"> <li>• Optometrics</li> <li>• Opticians</li> <li>• Eyeglasses</li> </ul>	Optometric FAQ Revised	03/05/2018	03/05/2018	03/01/2018
<ul style="list-style-type: none"> <li>• Physician</li> <li>• Mid-Levels</li> <li>• Outpatient Hospital</li> <li>• FQHC</li> <li>• RHC</li> </ul>	Provider Notice Physician Administered Drug Updated – Kymriah <sup>®</sup> and Fasenra <sup>®</sup>	03/05/2018	03/05/2018	03/02/2018
<ul style="list-style-type: none"> <li>• Prior Approval</li> </ul>	Physician Administered Drug Panel Kymriah <sup>®</sup> criteria	03/05/2018	03/05/2018	03/02/2018
<ul style="list-style-type: none"> <li>• Prior Approval</li> </ul>	Physician Administered Drug Panel Fasenra <sup>®</sup> criteria	03/05/2018	03/05/2018	03/02/2018
<ul style="list-style-type: none"> <li>• Dental Services</li> <li>• Oral Surgeon</li> <li>• Denturist</li> </ul>	Dental Services Manual	03/05/2018	03/05/2018	03/02/2018
<ul style="list-style-type: none"> <li>• TCM (Non-Mental Health)</li> <li>• FQHC</li> </ul>	Provider Notice Eligibility and Care Team Updates	03/05/2018	03/05/2018	03/02/2018
<ul style="list-style-type: none"> <li>• Pharmacy DUR</li> </ul>	DUR Meeting Minutes 02/28/2018	03/05/2018	03/05/2018	03/02/2018
<ul style="list-style-type: none"> <li>• Prior Authorization</li> </ul>	Physician Administered Drug Panel Sprinraza <sup>®</sup> criteria revised	03/08/2018	03/08/2018	03/01/2018
<ul style="list-style-type: none"> <li>• Prior Authorization</li> </ul>	Physician Administered Drug Panel Prolia <sup>®</sup> criteria revised	03/08/2018	03/08/2018	03/01/2018
<ul style="list-style-type: none"> <li>• Prior Authorization</li> </ul>	Physician Administered Drug Panel Entyvio <sup>®</sup> criteria	03/08/2018	03/08/2018	03/01/2018
<ul style="list-style-type: none"> <li>• Prior Authorization</li> </ul>	Physician Administered Drug Panel Simponi Aria <sup>®</sup> criteria	03/08/2018	03/08/2018	03/01/2018
<ul style="list-style-type: none"> <li>• Physicians</li> <li>• Mid-Levels</li> <li>• FQHC</li> <li>• RHC</li> </ul>	Provider Notice Physician Administered Drug Updated – Simponi Aria <sup>®</sup> and Entyvio <sup>®</sup> criteria	03/08/2018	03/08/2018	03/01/2018

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**March 2, 2018**

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
<ul style="list-style-type: none"> <li>All Providers</li> </ul>	Provider Notice New Rendering Only Provider Enrollment Application	02/26/2018	02/26/2018	02/26/2018
<ul style="list-style-type: none"> <li>DME</li> <li>Physicians</li> <li>Mid-Levels</li> </ul>	Provider Notice DME Incontinence Supply Rates	02/28/2018	02/28/2018	02/27/2018
<ul style="list-style-type: none"> <li>Home Health</li> </ul>	Provider Notice Clarification Home Support Services	02/28/2018	02/28/2018	02/27/2018
<ul style="list-style-type: none"> <li>PTRF</li> </ul>	Provider Notice Out of State Reimbursement Limit	02/28/2018	02/28/2018	02/27/2018
<ul style="list-style-type: none"> <li>Psychologists</li> <li>PRTF</li> <li>Social Workers</li> <li>School-Based Services</li> <li>Licensed Professional Counselor</li> <li>Mental Health Center</li> <li>Targeted Case Management (Mental Health)</li> <li>Therapeutic Group Home</li> <li>Public Health Clinic</li> <li>Therapeutic Foster Care</li> </ul>	Fee schedule Youth Mental Health	02/28/2018	02/28/2018	03/01/2018
<ul style="list-style-type: none"> <li>Provider Enrollment</li> </ul>	Limited Enrollment Form - revised	02/28/2018	02/28/2018	02/28/2018
<ul style="list-style-type: none"> <li>Pharmacy DUR</li> </ul>	DUR – PDL Meeting (rev. 03/02/2018)	02/28/2018 03/02/2018	02/28/2018 03/02/2018	03/28/2018 03/258/2018
<ul style="list-style-type: none"> <li>Hospital Inpatient</li> <li>Hospital Outpatient</li> <li>Podiatrist</li> <li>ASC</li> <li>Family Planning</li> <li>Pharmacy</li> <li>Optometric</li> <li>Optician</li> <li>Physician</li> <li>HCBS</li> <li>Lab Services</li> <li>Social Worker</li> <li>Mid-Levels</li> <li>Eyeglasses</li> <li>Home Health</li> </ul>	Rebateable Labeler January 2018 revised	02/28/2018	02/28/2018	01/01/2018



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<ul style="list-style-type: none"> <li>Psychiatrist</li> <li>Clinical Pharmacist</li> <li>IDTF</li> </ul>				
<ul style="list-style-type: none"> <li>TCM Non-Mental Health</li> </ul>	Fee Schedule March 2018 TCM Non-Mental Health	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Chemical Dependency</li> </ul>	Fee Schedule March 2018 Substance Use Disorder Non-Medicaid	v	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Chemical Dependency</li> </ul>	Fee Schedule March 2018 Substance Use Disorder Medicaid	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>DME</li> </ul>	Fee Schedule March 2018 DME	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Dental Hygienist Services</li> </ul>	Fee Schedule March 2018 Dental Hygienist	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Dental Services</li> </ul>	Fee Schedule 2018 March 2018	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Oral Surgeon</li> </ul>	Fee Schedule March 2018 Oral Surgeon	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Denturist</li> </ul>	Fee Schedule March 2018 Denturist	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Hospital Inpatient</li> </ul>	Fee Schedule March 2018 DRG rev. 03/02/2018	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Hospital Outpatient</li> </ul>	Fee Schedule March 2018 APC	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Hospital Outpatient</li> </ul>	Fee Schedule March 2018 OPP	02/28/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>IHS/635</li> </ul>	IHS Agenda 02/28/2018	03/01/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>IHS/635</li> </ul>	IHS Training - Pharmacy	03/01/2018	03/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Licensed Professional Counselor</li> <li>Mental Health Center</li> <li>Social Worker</li> </ul>	Provider Notice Changes to Outpatient Psychotherapy for Youth	03/02/2018	03/02/2018	03/01/2018
<ul style="list-style-type: none"> <li>Chemical Dependency</li> </ul>	Provider Notice Substance Use Disorder Treatment Procedure Codes	03/02/2018	03/02/2018	03/01/2018
<ul style="list-style-type: none"> <li>Physician</li> <li>Mid-Level</li> <li>Outpatient Hospital</li> <li>FQHC</li> <li>RHC</li> </ul>	Provider Notice Physician Administered Drug Update	03/02/2018	03/02/2018	03/01/2018
<ul style="list-style-type: none"> <li>Pharmacy DUR</li> </ul>	DUR-PDL Agenda for March 28, 2018 revised	03/02/2018	03/02/2018	03/28/2018
<ul style="list-style-type: none"> <li></li> </ul>				

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### February 23, 2018

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
• Prior Authorization	Physician Administered Drug Pane Exondys® 51 Criteria	02/16/2018	02/16/2018	02/16/2018
• IHS/638 Tribal	Provider Notice	02/16/2018	02/19/2018	02/16/2018
• Newsletters	March 2018 Claim Jumper	02/16/2018	02/19/2018	03/01/2018
• Prior Authorization	Physician Administered Drug Pane Kymriah® (MPQHF) Criteria	02/16/2018	02/19/2016	02/016/2018
• Site Index • Pharmacy	PDL (revised_	02/19/2018	02/15/2018	02/15/2018
• FQHC • RHC	Provider notice Substance Use Disorder CPT Code Update	02/20/2018	02/20/2018	02/20/2018
• Mid-Level	Fee Schedule January 2018 Mid-Level Services Fee Schedule - revised	02/20/2018	02/20/2018	01/01/2018
• Physician	Fee Schedule Physician Fee Schedule – revised	02/20/2018	02/20/2018	01/01/2018
• Public Health	Fee Schedule Public Health Fee Schedule - revised	02/20/2018	02/20/2018	01/01/2018
• Hospital Inpatient	Fee Schedule OPP Fee Schedule - revised	02/20/2018	02/20/2018	01/01/2018
• Pharmacy DUR	DUR Agenda 02/28/2018	02/20/2018	02/20/2018	02/28/25018
• TCM (non-mental health) • FQHC	Provider Notice TCM Social Determinant Diagnosis Code Update	02/21/2018	02/21/2018	02/21/2018
• Outpatient Hospital • Physician • Mid-Level • IDTF • ASC	Provider notice Advanced Imaging Prior Authorization	02/21/2018	02/21/2018	02/20/2018
• Ophthalmologist • Optometrist • Optician	Provider Notice Optometric Exam and Eyeglass Changes	02/22/2018	02/22/2018	02/22/2018



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<ul style="list-style-type: none"><li>• Oral Surgeons</li><li>• Dentists</li><li>• Dental Hygienists</li><li>• Denturists</li></ul>	Provider Notice Adult Dental Benefit Changes	02/22/2018	02/22/2018	02/22/2018
<ul style="list-style-type: none"><li>• Outpatient Hospitals</li><li>• Critical Access Hospitals</li></ul>	Provider Notice Elimination of Provider-Based Clinic Status	02/22/2018	02/22/2018	02/22/2018

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<ul style="list-style-type: none"> <li>• Physicians</li> <li>• Mid-Levels</li> </ul>	Provider Notice	02/12/2018	02/12/2018	02/12/2018
<ul style="list-style-type: none"> <li>• Hospital Outpatient</li> </ul>	Fee Schedule & Coversheet APC	02/12/2018	02/12/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Hospital Outpatient</li> </ul>	Fee Schedule & Coversheet OPP rev. 02/14/2018 and 02/15/2018	02/12/2018	02/12/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Pharmacy</li> </ul>	Provider Notice	02/14/2018	02/14/2018	02/14/2018
<ul style="list-style-type: none"> <li>• Proposed Fee Schedules</li> </ul>	Substance Use Disorder Medicaid revised	02/14/2018	02/14/2018	03/01/2018
<ul style="list-style-type: none"> <li>• Proposed Fee Schedules</li> </ul>	Substance Use Disorder Non-Medicaid revised	02/14/2018	02/14/2018	03/01/2018
<ul style="list-style-type: none"> <li>• Hospital Inpatient</li> </ul>	Provider Notice Reimbursement Rate Change	02/15/2018	02/15/2018	02/15/2018
<ul style="list-style-type: none"> <li>• Hospital Outpatient</li> </ul>	Provider Notice Reimbursement Rate Change	02/15/2018	02/15/2018	02/15/2018
<ul style="list-style-type: none"> <li>• IHS/635 Tribal</li> </ul>	Provider Notice Substance Use Disorder Billing	02/15/2018	02/15/2018	02/15/2018
<ul style="list-style-type: none"> <li>• Left Menu</li> <li>• Pharmacy</li> </ul>	Montana PDL	02/15/2018	02/15/2018	02/15/2018
<ul style="list-style-type: none"> <li>• Laboratory</li> </ul>	Fee Schedule Lab Services Revised	02/15/2018	02/15/2018	01/01/2018



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• DME	January 2018 Cover Sheet revised	02/05/2018	02/05/2018	01/01/2018
• Laboratory Services	Fee Schedule Lab Services January 2018 revised	02/05/2018	02/05/2018	01/01/2018
• Dental	Fee Schedule Dental Services January 2018 Revised	02/07/2018	02/07/2018	01/01/2018
• Denturist	Fee Schedule Denturist January 2018 Revised			
• Hospital Inpatient	APR-DRG FAQs Revised	02/08/2018	02/08/2018	02/06/2018

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<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
<ul style="list-style-type: none"> <li>Dental Services</li> <li>Denturist</li> </ul>	Proposed Dental Manual	01/30/2018	01/30/2018	03/01/2018
<ul style="list-style-type: none"> <li>Physicians</li> <li>Mid-Levels</li> <li>Psychiatrist</li> </ul>	Provider Notice Psych Care Management New Codes 99492 - 99494	01/30/2018	01/30/2018	01/30/2018
<ul style="list-style-type: none"> <li>Site Index</li> </ul>	RBRVS January 2018 Fee Schedule	01/30/2018	01/30/2018	01/01/2018
<ul style="list-style-type: none"> <li>Lab and Imaging</li> <li>Physicians</li> <li>Mid-Levels</li> <li>Inpatient Hospital</li> <li>Outpatient Hospital</li> </ul>	Provider Notice Fetal Chromosomal Aneuploidy Testing	01/30/2018	01/30/2018	01/30/2018
<ul style="list-style-type: none"> <li>DME</li> <li>Direct Entry Midwives</li> <li>Physicians</li> <li>Mid-Levels</li> <li>Inpatient Hospital</li> <li>Outpatient Hospital</li> <li>RHC</li> <li>FQHC</li> <li>IHS</li> </ul>	Provider Notice Montana Healthcare Programs Covered Double Electric Breast Pumps - E0603	01/31/2018	01/30/2018	02/01/2018
<ul style="list-style-type: none"> <li>Optometrics</li> </ul>	Fee Schedule January 2018 Optometrics Revised	01/31/2018	01/31/2018	01/01/2018
<ul style="list-style-type: none"> <li>Laboratory Services</li> </ul>	Fee Schedule & Cover Sheet January 2018 Lab Services	02/01/2018	02/01/2018	01/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	Fee Schedule March 2018 Substance Abuse Disorder Non-Medicaid	02/01/2018	02/01/2018	03/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	Fee Schedule March 2018 Substance Abuse Disorder Medicaid	02/01/2018	02/01/2018	03/01/2018



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### January 26, 2018

<i><b>Page/Provider</b></i>	<i><b>Item</b></i>	<i><b>Date Approved</b></i>	<i><b>Date Posted</b></i>	<i><b>Document Date</b></i>
<ul style="list-style-type: none"> <li>• Physical Therapist</li> <li>• Speech Therapist</li> <li>• Physician</li> <li>• Inpatient Hospital</li> <li>• Outpatient Hospital</li> </ul>	Provider Notice HCPC Code G0515 Replaces 97532	01/22/2018	01/22/2018	01/17/2018
<ul style="list-style-type: none"> <li>• HIS/Tribal 635</li> </ul>	IHS Tribal Agenda January 22, 2018	01/22/2018	01/*22/2018	01/22/2018
<ul style="list-style-type: none"> <li>• IHS/Tribal 635</li> </ul>	Diabetes Prevention and Education Training PDF	01/22/2018	01/22/2018	01/22/2018
<ul style="list-style-type: none"> <li>• Hospital Outpatient</li> </ul>	Fee Schedule October 2017 APC Revised	01/22/2018	01/22/2018	10/01/2017

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### January 19, 2018

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
• Audiology	Fee Schedule & Cover Sheet January 2018 Audiology Fee Schedule	01/15/2018	01/15/2018	01/01/2018
• Podiatry	Fee Schedule & Cover Sheet January 2018 Podiatry Fee Schedule	01/15/2018	01/15/2018	01/01/2018
• Hearing Aid	Fee Schedule & Cover Sheet January 2018 Hearing Aid Fee Schedule	01/15/2018	01/15/2018	01/01/2018
• Optometric	Fee Schedule & Cover Sheet January 2018 Optometric Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Dental	Fee Schedule January 2018 Dental Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Oral Surgeon	Fee Schedule January 2018 Oral Surgeon Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Denturist	Fee Schedule & Cover Sheet January 2018 Denturist Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Proposed Fee Schedule	Proposed Fee Schedule March 2018 Dental Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Proposed Fee Schedule	Proposed Fee Schedule January 2018 Oral Surgeon Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Proposed Fee Schedule	Proposed Fee Schedule January 2018 Denturist Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Proposed Fee Schedule	Proposed Fee Schedule January 2018 DME Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• DME	Fee Schedule January 2018 DME Fee Schedule revised	01/16/2018	01/16/2018	01/01/2018
• Physician • Mid-Level • Outpatient Hospital • FQHC • RHC	Provider Notice Xgeva® Prior Authorization Criteria	01/17/2018	01/17/2018	01/17/2017
• Newsletters	Claim Jumper February 2018 Issue	01/18/2018	01/18/2018	02/01/2018



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<ul style="list-style-type: none"> <li>Mobile Imaging</li> </ul>	Cover Sheet for January 2018 Fee Schedule Mobile Imaging Revised	01/19/2018	01/19/2018	01/01/2018
<ul style="list-style-type: none"> <li>Mobile Imaging</li> </ul>	New Provider Type Page	01/19/2018	01/19/2018	01/19/2018
<ul style="list-style-type: none"> <li>Direct Entry Midwife</li> </ul>	New Provider Type Page	01/19/2018	01/19/2018	01/19/2018
<ul style="list-style-type: none"> <li>Provider Type</li> </ul>	Added Mobile Imaging and Directed Entry Midwife links to page	01/19/2018	01/19/2018	01/19/2018

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### January 12, 2018

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
• IHS/635 Tribal	Fee Schedule January 2018 IHS Fee Schedule	01/08/2018	01/08/2018	01/01/2018
• Chemical Dependency	Fee Schedule January 2018 Chemical Dependency Standard Fee Schedule	01/08/2018	01/08/2018	01/01/2018
• Chemical Dependency	Fee Schedule January 2018 Chemical Dependency Contract Fee Schedule	01/08/2018	01/08/2018	01/01/2018
• ASC	Fee Schedule January 2018 ASC Fee Schedule	01/09/2018	01/09/2018	01/01/2018
• Proposed Fee Schedules	Proposed Fee Schedule March 2018 Youth Medicaid Mental Health	01/09/2018	01/09/2018	03/01/2018
• Proposed Fee Schedules	Proposed Cover Sheet January 2018 OPPS Coversheet revised	01/10/2018	01/10/2018	01/01/2018
• EPSDT	Fee Schedule January 2018 CSHS	01/10/2018	01/10/2018	01/01/2018
• EPSDT	Fee Schedule January 2018 Nutrition	01/10/2018	01/10/2018	01/01/2018
• Home Infusion	Fee Schedule & Cover Sheet Home Infusion	01/10/2018	01/10/2018	01/01/2018
• IDTF	Fee Schedule & Cover Sheet January 2018 IDTF	01/10/2018	01/10/2018	01/01/2018
• Oral Surgeon	Fee Schedule & Cover Sheet January 2018 Oral Surgeon	01/10/2018	01/10/2018	01/01/2018
• Ambulance	Fee Schedule & Cover Sheet January 2018 Ambulance	01/10/2018	01/10/2018	01/01/2018

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<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
• Dental	Fee Schedule & Cover Sheet January 2018 Dental Hygienist	01/10/2018	01/10/2018	01/01/2018
• Denturist	Fee Schedule & Cover Sheet January 2018 Denturist	01/10/2018	01/10/2018	01/01/2018
• Dental	Fee Schedule & Cover Sheet January 2018 Dental Services	01/10/2018	01/10/2018	01/01/2018
• Proposed Fee Schedules	Proposed Fee Schedule APR-DRG	01/10/2018	01/10/2018	01/01/2018
• Direct Entry Midwife	Fee Schedule & Cover Sheet January 2018 Direct Entry Midwife	01/10/2018	01/10/2018	01/01/2018
• Mobile Imaging	Fee Schedule & Cover Sheet January 2018 Mobile Imaging	01/10/2018	01/10/2018	01/01/2018
• Psychiatrist	Fee Schedule & Cover Sheet January 2018 Psychiatrist	01/10/2018	01/10/2018	01/01/2018
• Targeted Case Management (Mental Health)	Fee Schedule Name change from Targeted Case Management Mental Health to Medicaid Behavioral Health Targeted Case Management	01/10/2018	01/10/2018	01/01/2018
• Podiatrist	Fee Schedule & Cover Sheet January 2018 Podiatry	01/10/2018	01/10/2018	01/01/2018
• Mid-Levels	Fee Schedule & Cover Sheet January 2018 Mid-Levels	01/10/2018	01/10/2018	01/01/2018
• Public Health	Fee Schedule & Cover Sheet January 2018 Public Health	01/10/2018	01/10/2018	01/01/2018

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<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	March 2018 Proposed Fee Schedule & Cover Sheet Targeted Case Management Non-Mental Health	01/11/2018	01/11/2018	03/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	March 2018 Proposed Fee Schedule & Cover Sheet Dental Services	01/11/2018	01/11/2018	03/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	March 2018 Proposed Fee Schedule & Cover Sheet Dental Hygienist	01/11/2018	01/11/2018	03/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	March 2018 Proposed Fee Schedule & Cover Sheet Denturist	01/11/2018	01/11/2018	03/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	March 2018 Proposed Fee Schedule & Cover Sheet Oral Surgeon	01/11/2018	01/11/2018	03/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	March 2018 Proposed Fee Schedule & Cover Sheet APC	01/11/2018	01/11/2018	03/01/2018
<ul style="list-style-type: none"> <li>Proposed Fee Schedules</li> </ul>	March 2018 Proposed Fee Schedule & Cover Sheet OPPs	01/11/2018	01/11/2018	03/01/2018
<ul style="list-style-type: none"> <li>Physicians</li> </ul>	Fee Schedule & Cover Sheet Physician	01/11/2018	01/11/2018	01/01/2018
<ul style="list-style-type: none"> <li>Prior Authorization</li> </ul>	Physician Administered Drug page, Revised Xgeva® document	01/12/2018	01/12/2018	01/11/2018
<ul style="list-style-type: none"> <li>Outpatient Hospital</li> <li>FQHC</li> <li>RHC</li> </ul>	Provider Notice Infertility Treatment Code – J0725	01/12/2018	01/12/2018	02/01/2018
<ul style="list-style-type: none"> <li>Physician</li> <li>Mid-Level</li> <li>Outpatient Hospital</li> <li>FQHC</li> <li>RHC</li> </ul>	Provider Notice Zinplava Prior Authorization Criteria (revised)	01/12/2018	01/12/2018	01/02/2018

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<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
• Hospital Inpatient	Fee Schedule & Cover Sheet January 2018 APR-DRG	01/12/2018	01/12/2018	01/01/2018
• Optician	Fee Schedule & Cover Sheet January 2018 Optician	01/12/2018	01/12/2018	01/01/2018
• EPSDT	Fee Schedule & Cover Sheet January 2018 Orientation & Mobility	01/12/2018	01/12/2018	01/01/2018
• Physical Therapy	Fee Schedule & Cover Sheet January 2018 Physical Therapy	01/12/2018	01/12/2018	01/01/2018
• Speech Therapy	Fee Schedule & Cover Sheet January 2018 Speech Therapy	01/12/2018	01/12/2018	01/01/2018
• School-Based Services	Fee Schedule & Cover Sheet January 2018 School Based Services	01/12/2018	01/12/2018	01/01/2018
• Optometric	Fee Schedule & Cover Sheet January 2018 Optometric	01/12/2018	01/12/2018	01/01/2018
• Occupational Therapy	Fee Schedule & Cover Sheet January 2018 Occupational Therapy	01/12/2018	01/12/2018	01/01/2018
• Proposed Fee Schedules	Proposed Fee Schedule & Cover Sheet March 2018 Durable Medical Equipment	01/12/2018	01/12/*2018	03/01/2018

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## January 5, 2018

<b>Page/Provider</b>	<b>Item</b>	<b>Date Approved</b>	<b>Date Posted</b>	<b>Document Date</b>
<ul style="list-style-type: none"> <li>Dialysis Clinic</li> </ul>	Fee Schedule January 2018 Dialysis	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>Personal Assistance/Community First Choice</li> </ul>	Fee Schedule & Cover Sheet January 2018 CFC	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>Personal Assistance/Community First Choice</li> </ul>	Fee Schedule & Cover Sheet January 2018 PAS	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>Chemical Dependency</li> </ul>	Fee Schedule January 2018 Chemical Dependency Standard	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>Chemical Dependency</li> </ul>	Fee Schedule January 2018 Chemical Dependency Contract	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>Chiropractic</li> </ul>	Fee Schedule January 2018 Children's Chiropractic	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>Home and Community Based Services</li> </ul>	Fee Schedule & Cover Sheet January 2018 Elderly and Physically Disabled Big Sky Waiver	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>Psychologist</li> <li>PRTF</li> <li>Social Worker</li> <li>School-Based Services</li> <li>Licensed Professional Counselor</li> <li>Mental Health Center</li> <li>Targeted Case Management Mental Health</li> <li>Therapeutic Group Home</li> <li>Therapeutic Foster Care</li> </ul>	Fee Schedule January 2018 72-Hour Presumptive	01/02/2018	01/03/2018	01/01/2018

### Website Postings by Week for 2018

These documents are available on the [Montana Healthcare Programs Provider Information website.](#)

<ul style="list-style-type: none"> <li>• Psychologist</li> <li>• PRTF</li> <li>• Social Worker</li> <li>• School-Based Services</li> <li>• Licensed Professional Counselor</li> <li>• Mental Health Center</li> <li>• Targeted Case Management Mental Health</li> <li>• Therapeutic Group Home</li> <li>• Therapeutic Foster Care</li> </ul>	Fee Schedule January 2018 Medicaid Mental Health Adults Age 18 and Over	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Psychologist</li> <li>• PRTF</li> <li>• Social Worker</li> <li>• School-Based Services</li> <li>• Licensed Professional Counselor</li> <li>• Mental Health Center</li> <li>• Targeted Case Management Mental Health</li> <li>• Therapeutic Group Home</li> <li>• Therapeutic Foster Care</li> </ul>	Fee Schedule January 2018 MHSP Adults Age 18 and Over	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Home and Community Based Services</li> </ul>	Fee Schedule January 2018 HCBS for Adults with SMDI	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• HIS/635 Tribal</li> </ul>	Fee Schedule January 2018 IHS	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Home Health Services</li> </ul>	Fee Schedule & Cover Sheet January 2018 Home Health	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Private Duty Nursing</li> <li>• EPSDT</li> </ul>	Fee Schedule & Cover Sheet January 2018 Private Duty Nursing	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Targeted Case Management – Non-Mental Health</li> </ul>	Fee Schedule & Cover Sheet January 2018 Targeted Case Management (Non-Mental Health)	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Targeted Case Management – Mental Health</li> </ul>	Fee Schedule January 2018 Targeted Case Management (Mental Health)	01/02/2018	01/03/2018	01/01/2018



### Website Postings by Week for 2018

These documents are available on the [Montana Healthcare Programs Provider Information website](#).

<ul style="list-style-type: none"> <li>• Psychologist</li> <li>• PRTF</li> <li>• Social Worker</li> <li>• School-Based Services</li> <li>• Licensed Professional Counselor</li> <li>• Mental Health Center</li> <li>• Targeted Case Management</li> <li>• Mental Health Therapeutic Group Home</li> <li>• Therapeutic Foster Care</li> </ul>	Fee Schedule January 2018 Youth Mental Health	01/02/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Site Index</li> <li>• Pharmacy</li> </ul>	January 2018 Rebateable Labelers	01/03/2018	01/03/2018	01/01/2018
<ul style="list-style-type: none"> <li>• Home Announcements</li> </ul>	January 2018 Fee Schedule Announcement	01/05/2018	01/05/2018	01/05/2018