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Have Feedback?
Have Questions?

Take The Survey!

Upcoming Training

SURS Training
May 21, 2020

PERM
June 18, 2020

Register Now

Inside Provider Relations

Thank you to all providers who are serving Montana Healthcare Programs members during this difficult season. Provider Relations understands that due to the COVID-19 outbreak in Montana and the country that you may have increased calls and visits from members.

Your efforts to meet these new needs have not gone unnoticed and we will continue to support you in your billing efforts through this difficult time. Providers and billers may continue to contact Provider Relations with questions.

- **Call Center: (800) 624-3958** In/Out of state M-F 8am – 5pm Mountain Time
- **IVR: (800) 362-831** 24/7 verify member eligibility, payments, enrollment status etc.)
- **Email: [Enrollment - MTEnrollment@conduent.com](mailto:MTEnrollment@conduent.com)**
- **Email: [Provider Relations - MTPRHelpdesk@conduent.com](mailto:MTPRHelpdesk@conduent.com)**
- **Fax: (406) 442-4402 and (888) 772-2341**
If the primary number is busy, please use the new fax number. Both lines can be used for faxed requests for Provider Relations
- **FaxBack: (800) 714-0075**

Thank you again for your service to our members.

*Submitted by Randy Fontaine
Provider Relations Manager
Montana Provider Relations*

SURS Audit Revelations

Supervision of In-Training Mental Health Practitioners

The SURS unit has recently found several individual mental health providers billing for supervision of unlicensed candidate in-training practitioners. An individual mental health professional cannot bill Montana Medicaid for services provided by the supervised candidates outside of a licensed Mental Health Center. Based on the Administrative Rules of Montana, ARM 37.85.406(16) and 37.87.702(3), a person enrolled as an individual provider may not submit a claim for services they did not personally provide. Only a Mental Health Center can bill and receive reimbursement from Montana Medicaid for services provided by mental health professional candidates in training.

*Submitted by Summer Roberts Program
Integrity Compliance Specialist
SURS
DPHHS*

Montana Healthcare Programs Providers and Third-Party Liability

The DPHHS (referred to as Department for the remainder of this article), Third Party Liability (TPL) unit is responsible for the recovery of funds for medical claims paid by Montana Healthcare Programs when a liable third party had primary responsibility. Administrative Rules of Montana (ARM) § 37.85.407, Third Party Liability, provides the guidance for TPL responsibility and activities.

What to do when a member's attorney says "Bill Medicaid"?

Often, the question is asked, "What do we do when a Montana Healthcare Programs member has been in an accident and the member's attorney is telling us just to bill Medicaid? ". Administrative Rules of Montana § 37.85.407 (5), states:

"If a provider learns of the existence of a known third party, that provider shall bill the third party prior to billing the Department. If the Department has knowledge of a known third party and the provider has not complied with (6) or (7) below, the Department shall deny payment of the services."

What kind of Insurance is considered "Third Party"?

The rule is a stipulation of the Social Security Act 1902 and 42 CFR § 433 Subpart D. Under Montana Healthcare Programs rules, a "third party" is broadly defined to include:

- Health Insurance
- Pharmacy Benefit Managers (PBM)
- Liability Insurance (Including automobile, homeowners, and medical malpractice)
- Managed Care Organizations
- Worker's Compensation
- Indemnity plans
- Any other parties that are by statute, contract or agreement legally responsible for payment of a claim for a health care item or service

What Is the Provider's Responsibility?

The laws govern that providers are responsible to bill the known liable third party prior to billing Montana Healthcare Programs (Medicaid). In short, if an attorney has communicated to a provider to "just bill Medicaid", then, it should be reiterated to the attorney that there is a liable third party and the provider must submit claims to the liable third party first for payment of medical claims.

What Action May a Provider Take to Collect from A Third Party?

To secure the providers interest regarding payment from the liable third party, Administrative Rules of Montana § 37.85.407 (11), states:

"For any service where an identified third party has only a potential liability as a tortfeasor, the provider may file a medical lien against that third party".

This section of the ARM allows the provider to assert a medical lien against the third party and goes further to say that:

*"The provider may bill the Department prior to determination of liability of the third party **if the provider notifies the TPL unit of the identity of the third party and its name and address if known**".*

There's A Resource For That!

Presumptive Eligibility – When can an uninsured individual be covered at a hospital?

Individuals presenting for care at hospitals and their affiliated facilities that are not covered by Montana Healthcare Programs may be covered through short-term, temporary coverage called Presumptive Eligibility. The facility and staff must be trained and certified to make Presumptive Eligibility determinations.

Presumptive Eligibility training allows facility staff to screen and enroll individuals as a short-term Montana Healthcare Programs member and they can elect to help families gather the documents needed to complete the full application process for longer-term coverage.

Presumptive Eligibility is only available once every 12 months (or once per pregnancy) and lasts from the date of the determination until a determination of program eligibility is made, OR until the last day of the month following the month of determination, whichever is earlier.

Presumptive Eligibility is available for the following Montana Healthcare Programs:

- Healthy Montana Kids Plus;
- Healthy Montana Kids;
- Parent/Caretaker Relative Medicaid;
- Pregnant Women (ambulatory prenatal care);
- Adults between the ages of 19 and 64;
- Adults between the ages of 18 and 26 who were in Foster Care and receiving Medicaid at age 18; and
- Women between the ages of 19 and 64 who have been screened and diagnosed with Breast or Cervical Cancer.

Trainings are offered monthly for hospitals and affiliated facilities to gain certification to offer Presumptive Eligibility. Training dates and more information about the Presumptive Eligibility Program are available on the [Presumptive Eligibility](#) page of the provider website.

Field Rep Corner

Additional Fax Number

In order to serve providers more efficiently, Provider Relations has expanded our fax capacity with a second fax line. In addition to the primary number, (406) 442-4402, the fax number (888) 772-2341 is now also available. Both lines can be used for faxed requests for Provider Relations. If the primary number is busy, please use the new fax number.

Upcoming Training

April's online training for Hospitals was cancelled. However, there are some important trainings coming in May and June and we will soon announce online training for the summer and early fall. Currently scheduled trainings include:

May SURS Training

Presented by Jen Tucker, SURS Supervisor, DPHHS
May 21, 2020 at 2pm (1 hour)

June PERM Training

Presented by Krista Cronholm, Program Specialist, Quality Assurance Division, DPHHS
June 18, 2020 at 2pm (1 hour)

Register for training on the [Training Registration Page](#).

*Submitted by Deb Braga
Field Rep
Montana Provider Relations*

Recent Website Posts

Below is a list of recently published Montana Healthcare Programs information and updates available on the [Provider Information Website](#). On the website, select “Resources by Provider Type” in the left menu to locate information specific to your provider type. If you cannot locate the information below, contact Provider Relations at (800) 624-3958 or (406) 442-1837 in Helena.

| Provider Notices | | |
|---|--|---|
| Date Posted | Provider Types | Provider Notice Title |
| 02/21/2020 | FQHC, IHS/Tribal 638, RHC | Peer Support Services Revenue Code Update |
| 02/25/2020 | CAH, FQHC, Hospital Outpatient, Mid-Levels, RHC, Physician | Physician Administered Drug Update |
| 02/28/2020 | IHS/Tribal 638, Mid-Levels, Physician, Pharmacy | Starting Dose and Quantity Limitations for Sedative Hypnotics |
| 03/12/2020 | DME, EPSDT ,IHS/Tribal 638, Mid-Levels, Physician | Provider Notice Medical Food or Formula for Phenylketonuria (PKU) due to Inborn errors of Metabolism (IEM) – HCPCS Code S943 |
| Fee Schedules | | |
| January 2020 - Revised | | |
| Dental Hygienist, Mid-Level Services, Occupational Therapy, Physical Therapy, Podiatry, Physician, Psychiatrist, Public Health Services | | |
| January 2020 | | |
| RBRVS | | |
| March 2020 – Proposed | | |
| Behavioral Health TCM | | |
| Manuals | | |
| General Manual | | |
| Additional Documents Posted | | |
| <ul style="list-style-type: none"> • Presumptive Eligibility Training Dates Added • March 25, 2020 DUR Agenda and Meeting Materials for <ul style="list-style-type: none"> ○ Xarelto®, Invokana®, and Entresto® | | |

Top 15 Claim Denial Reasons

| Claim Denial Reason | February 2020 | January 2020 |
|---------------------------------------|---------------|--------------|
| RECIPIENT NOT ELIGIBLE DOS | 1 | 1 |
| EXACT DUPLICATE | 2 | 3 |
| MISSING/INVALID INFORMATION | 3 | 2 |
| PA MISSING OR INVALID | 4 | 4 |
| RATE TIMES DAYS NOT = CHARGE | 5 | 6 |
| PASSPORT PROVIDER NO. MISSING | 6 | 7 |
| PROC. CODE NOT COVERED | 7 | 8 |
| RECIPIENT COVERED BY PART B | 8 | 9 |
| CLAIM INDICATES TPL | 9 | 14 |
| SLMB OR QI-1 ELIGIBILITY ONLY | 10 | 12 |
| PROC. CODE NOT ALLOWED | 11 | 18 |
| DEPRIVATION CODE RESTRICTED | 12 | 19 |
| INVALID REV CODE FOR FACILITY TO BILL | 13 | 13 |
| PROVIDER TUPE/PROCEDURE MISMAT | 14 | 16 |
| CLAIM DATE PAST FILING LIMIT | 15 | 15 |

*As of April 2020, additional pharmacy related denial reasons were removed from the Top 15 in addition to those removed in August 2019.

Third Party Liability continued from Page 2

If a Third Party pays after I receive payment from Montana Healthcare Programs, what do I do?

The provider may keep its lien in place and receive payment from the third party, but if payment is received, the provider must refund the Department in accordance with Montana ARM §37.85.407 (9).

“...within 60 days of receipt of the third party payment; the lesser of the amount the Department paid or the amount of the third party payment.”

Additional TPL Information

In summary, when providers are aware of a liable third party, they are required in most cases to bill that source first. Providers can place a lien against the third party for payment. Prior to billing, the Department TPL unit must first be notified of the liable third party including their name and address, if known. Keep in mind that providers must wait 90 days for a response from the third party before billing the Department. When payment is received from the liable third party, providers must refund the Department the lesser of the amount the Department paid or the amount of the third party payment within 60 days.

For questions related to this article or to notify the TPL unit of a third party, please [email hhstraumaprogram@mt.gov](mailto:hhstraumaprogram@mt.gov) or call (406) 444-9440 and select either option 3 or 4 to reach a TPL Recovery Specialist.

*Submitted by Olivia Roussan
Third Party Liability Supervisor
DPHHS*

Key Contacts

Montana Healthcare Programs

Provider Relations

General Email: MTPRHelpdesk@conduent.com
Enrollment Email: MTEnrollment@conduent.com
P.O.Box 4936
Helena, MT 59602
(800) 624-3958 In/Out of state
(406) 442-1837 Helena
(406) 442-4402 or (888) 772-2341 Fax

Conduent EDI Solutions

<http://edisolutionsmmis.portal.conduent.com/gcro/>

Third Party Liability

P.O. Box 5838
Helena, MT 59604
(800) 624-3958 In/Out of state
(406) 443-1365 Helena
(406) 442-0357 Fax

Claims Processing

P.O. Box 8000
Helena, MT 59604

EFT and ERA

Fax completed documentation to Provider Relations
(406) 442-4402.

Verify Member Eligibility

FaxBack (800) 714-0075 or
Voice Response (800) 714-0060

POS Help Desk for Pharmacy

(800) 365-4944

Passport

(406) 457-9542

PERM Contact Information

Email: KCroholm@mt.gov
Telephone: (406) 444-9365
Website: <https://dphhs.mt.gov/qad/PC/PERMPC>

Prior Authorization

OOS Acute & Behavioral Health Hospital,
Transplant, Rehab, PDN, DMEPOS/Medical,
& Behavioral Health Reviews
(406) 443-0320 (Helena) or
(800) 219-7035 (Toll Free)